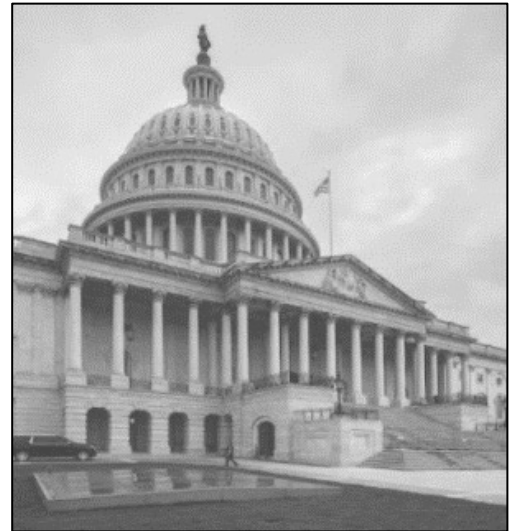


## Hawai'i SOR Initiatives

### Addressing Opioid and Stimulant Misuse & Use Disorders: The Impact of State Opioid Response (SOR) Grants

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the SOR grant program. SOR addresses the opioid overdose crisis by providing resources to states and territories to increase access to Federal Drug Administration-approved medications for opioid use disorder (MOUD) and to reduce unmet treatment needs and opioid-related overdose deaths with prevention, harm reduction, treatment, and recovery supports. In 2020, SOR expanded to support evidence-based services for stimulant misuse and use disorders (StUD), including cocaine and methamphetamine.

This brief was developed by the National Association of State Alcohol and Drug Abuse Directors (NASADAD) in collaboration with the Opioid Response Network (ORN) as part of a series of state reports intended to showcase initiatives across the continuum of care that states have implemented with SOR funds. The ORN is a SAMHSA-funded technical assistance and training center that works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to support efforts to address the opioid and stimulant crisis.



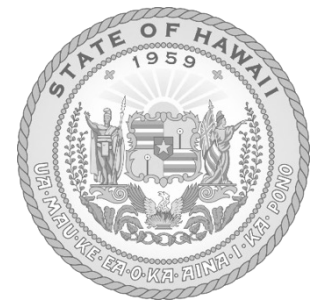
### Single State Agency (SSA): Hawai'i Department of Health Alcohol and Drug Abuse Division (ADAD)

Through SOR, ADAD received \$26.3 million from FY18 through FY23. For FY23–FY24, it received \$4,068,210.

The state's overarching goal is to prevent and reduce the severity and disabling effects of alcohol and other drug use, misuse, and overdose through effective, accessible, public and private community-based prevention strategies, treatment services, harm reduction services, and recovery support. The purpose of the Hawai'i SOR project is to enhance and expand the state's substance use disorder (SUD) continuum of care.

This comprehensive approach aims to expand access to MOUD and provide community engagement in prevention, treatment, harm reduction, and recovery resources availability. Hawai'i SOR projects focus on culturally anchored primary prevention for children and families to:

- Promote resilience
- Develop and implement workforce trainings





- Increase workforce capacity through opioid and stimulant trainings in a nurse residency program
- Improve hepatitis C care coordination for clients and pregnant women with dependent children
- Increase access to telehealth services for rural communities
- Enhance naloxone distribution and harm reduction services throughout the state

With the initial SAMHSA award of State Targeted Response funding, Hawai'i developed a multifaceted public health approach to opioid use, misuse, and overdose called the Hawaii Opioid Initiative (HOI). The purpose of HOI is to provide recommendations on opioid use to the legislature and opioid settlement advisory committee, identify gaps in the current continuum of care, and develop and implement innovative solutions to those gaps. HOI brings together nonprofit, for-profit, state, city, county, and community volunteers to develop and implement the HOI action plan to address eight focus areas:

1. Access to treatment
2. Prescriber education and pain management practices
3. Data-informed decision-making
4. Prevention and public education
5. Pharmacy-based interventions
6. Support for law enforcement and first responders
7. Screening, brief intervention, and referral to treatment (SBIRT)
8. SUD services for Native Hawaiians

HOI will be moving into its fourth rendition in 2024. Focus area workgroup members will conduct a strategic planning session to identify new goals and objectives for HOI and develop the fourth HOI action plan.

## Preventing Opioid and Stimulant Misuse Before It Starts

The Hawai'i SSA has used SOR to implement several prevention programs, including programs for children and families, drug take-back programs, media campaigns, and workforce initiatives.

### Native Hawaiian Culturally Anchored Prevention for Children and Families

This project provides culturally anchored primary prevention programs for children and families to improve resilience, reduce stigma, and promote connection with the visceral needs of the Native Hawaiian community, such as cultural reclamation, indigenous healing, culture-based education, and land-based ('aina) education. This addresses social determinants of health and health disparities pursuant to 226-20(a)(7), HRS "Objectives and Policies for Socio-Cultural Advancement-Health" and Senate Concurrent Resolution (SCR) I 03 (2019).

### Take-Back Boxes

ADAD purchased and disseminated 16 take-back boxes placed at different police stations across the islands. Since their installation, the state and Department of Public Safety collected 7,198.16 pounds of medication.

### Media Campaigns

In collaboration with HOI, the state developed media campaigns, including public service announcements (PSAs), social media initiatives, digital ads, and radio. The Opioid Awareness Campaign, launched in 2019 on a local news channel, aimed to educate the community on the importance of safely disposing of medication. The PSA directed viewers to the HOI website to take an opioid dependency risk quiz based on American Society of Addiction Medicine criteria. In September 2020, the state launched the "Pain is No Game" and

“Help is Here” television campaigns focused pain management and the Hawai’i Coordinated Access to Resources Entry System (CARES) for treatment services. The state also launched a newspaper advertisement called “Eye on an Epidemic,” which highlighted the current epidemiological landscape of opioid use, misuse, and overdose in Hawai’i. In November 2020, the state launched the “Storytelling” television campaigns, which showcased stories of resilience, pain management, naloxone use, and treatment access.

### **Nurse Residency Program (NRP)**

This project aims to add evidence-based opioid content to NRP curriculum in Hawai’i to: 1) Increase the number of new nursing professionals trained on safer patient opioid practice standards; 2) Disseminate safer patient opioid practice standards to expert nurses in Hawai’i; 3) Enable hospitals to meet individual and community health needs regarding opioid best practices and care models; and 4) Provide current and evidence-based opioid training content to increase healthcare provider knowledge and utilization.

Since the project’s inception on May 1, 2021, 939 graduate nurses and 629 preceptors have started training.

### **‘Ohana Coaches**

‘Ohana coaches are individuals trained as confidants who offer emotional support and coping resources for people with loved ones dealing with substance use. ‘Ohana coaches do not offer professional counseling or drug treatment expertise.

## **Overdose Reversal Efforts: Saving Lives**

Hawai’i has used SOR to support access to overdose reversal medications, described further below.

### **Naloxone Distribution**

Pharmacists are now authorized to prescribe and dispense opioid antagonists to patients at risk of overdose and for family members and caregivers of patients at risk of overdose (Act 255, 2019). Since 2018, the state has purchased and disseminated 67,020 naloxone kits, with 54,840 of those purchased through SOR. In 2023, there was an increase in requests for naloxone due to greater news coverage on fentanyl and opioids, increased overdoses throughout the islands, and overall increase in awareness and education about opioids. The state has increased naloxone distribution to the Department of Education, Hawai’i Liquor Commission, bars, restaurants, hotels, and private schools. ADAD partnered with the Hawai’i High Intensity Drug Trafficking Area to provide trainings to organizations across the state. This has been beneficial in providing education on opioids and new and emerging drugs and decreasing scare tactics and stigma.

### **Naloxone Vending Machines**

In collaboration with the Hawai’i Department of Health Adult Mental Health Division, the state purchased naloxone kits for 15 naloxone vending machines placed in treatment organizations, bars, and state and county facilities for public use.

## **Implementing Harm Reduction Strategies**

The Hawai’i SSA used SOR to implement a harm reduction program for OUD and StUD, described below.



### **Enhancements to the Prescription Drug Monitoring Program (PDMP)**

In collaboration with the Department of Public Safety, the state provided SOR funding to increase prescriber use of PDMP and implement the Clinical Alerts enhancement. The alerts included those for prescriber and dispenser threshold, daily active morphine milligram equivalents, and opioid and benzodiazepine threshold.

## **Increasing Access to Treatment**

ADAD currently provides treatment and recovery services through 33 contracted providers throughout the state. The state compensates providers for several services across the continuum of care. With SOR, the state has provided treatment services for 3,980 individuals.

### **Prescriber Education – Mocha Minutes and Project ECHO**

Hawai'i developed and implemented the Mocha Minutes Project, which consists of physician trainings on opioid prescribing best practices through interactive modules. The state also engaged with Project ECHO, an innovative practice model that builds workforce capacity while improving patient access to specialty health care in rural communities. This included opioid-related education for prescribers and healthcare professionals.

### **Medications for Opioid Use Disorder**

The state provides funding for MOUD, including methadone, buprenorphine, and naltrexone. The state has provided MOUD services for 1,575 individuals.

### **HOI Workgroup: Access to Treatment**

The HOI workgroup focuses on improving treatment access. The volunteer group has a goal to “improve and modernize healthcare strategies and access for opioid and other substance misuse treatment and recovery services.” This focus area assisted with developing the coordinated entry system pilot into a statewide system for all state-contracted treatment and recovery providers. The workgroup is also developing guidance for the legislature and opioid settlement advisory committee on specific populations, such as criminal justice-involved and complex clients.

### **Telehealth**

Hawai'i has developed multiple telehealth initiatives, including initiatives to build infrastructure for rural providers who have clients dealing with opioid addiction, opioid use or other substance use, mental health issues, and/or homelessness.

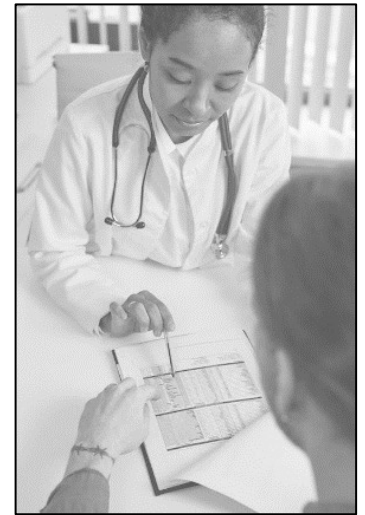
The state also collaborates with the University of Hawai'i to implement the Utelehealth program, which provides a minimum of four hours per week of free telehealth services to patients or teleconsultations between licensed providers for individuals experiencing opioid, stimulant, or other behavioral health issues. It also provides telehealth services from licensed Hawai'i providers, including but not limited to, physicians, psychologists, mental health counselors, social workers, and certified SUD counselors.

### **Culturally Anchored Training**

Culturally anchored training is critical for the workforce to provide the best care for the indigenous people of Hawai'i, who make up 48% of ADAD admissions into treatment and recovery programs. This project addresses recommendations from SCR 103 and HOI evaluations. SCR 103 directly references the state and HOI, “urging the inclusion of Native Hawaiian cultural intervention treatment programs, wellness plans, and holistic living systems of care in the State of Hawai'i's response to the rise of misuse of opioids or illicit substances in Hawai'i.” In addition, HOI evaluation recommendations are to, “include experts in Native Hawaiian health and

healing,” “increase workgroup diversity,” and “address root causes of OUD through holistic care, system of care enhancement, and ‘āina (land) based programming for Native Hawaiians.”

Pursuant to 226-20(a)(7), HRS, “Objectives and Policies for Socio-Cultural Advancement-Health” and SCR 103 (2019), the trainings present culturally anchored frameworks for mitigating OUD, polysubstance use disorder, and other health disparities in Hawai‘i. HOI workgroup members, social workers, healthcare providers, and community members gathered to learn the Kanilehua Framework and its applications, the Hanai Ahu framework, and the Papa Ola Lōkahi’s Ahupua‘a system based on the White Bison Healing Forest model, which uses cultural teachings to replace the community vulnerabilities. Attendees were equipped with learning tools to facilitate deeper connections to Hawai‘i language, history, and cultural practices, which can be used in their personal and professional practices.



## Supporting Long-Term Recovery

Hawai‘i has used SOR to expand access to recovery support services, including transportation, cultural supports, and wraparound services.

### Transportation

Hawai‘i provides compensation for transportation services for contracted treatment providers. The state provides this support for travel in program- or employee-owned vehicles or on public transportation.

### Culture-Based Recovery Support

The state, in collaboration with Papa Ola Lokāhi, the Native Hawaiian Health Care System, has developed a training for culture-based recovery intended to be replicated and implemented in treatment organizations and for individuals. The goal of this project is to use a Native Hawaiian framework for recovery and healing. The approach outlined in this summary is responsive to the strategic goals established in 2007 for SAMHSA’s fourth policy academy through the visioning of kūpuna at ‘Imi Ke Ola Mau, a roadmap for the improvement of substance use and mental health outcomes for Native Hawaiians, their families, and communities.

### ADAD SUD Continuum of Care

The expanded coordination between provider agencies has resulted in more comprehensive coordination to ensure recovery support services are applied effectively and efficiently to meet client needs. Recovery support services include connection to support groups, assistance with employment services, assistance with follow-up to primary care, educational services assistance, and services for other substance use and mental health needs. The Hawai‘i CARES program links clients with treatment services and recovery services, such as group recovery homes.



## Reaching & Serving Populations of Focus

Hawai'i has used SOR to implement and support programs that reach and serve populations of focus, including Native Hawaiians and pregnant women and women with dependent children.

### Pregnant Women and Women with Dependent Children

HOI provides a framework to focus on high-need populations. The Perinatal Substance Use Disorder (PSUD) workgroup is a product of HOI focus area workgroup efforts to improve treatment access. The PSUD workgroup continues to improve systems of care to support perinatal women with OUD and/or SUD in the state. The workgroup aims to enhance the capacity of OUD and/or SUD providers to bill medical insurance for services, develop and implement guidance on perinatal clients for Hawai'i CARES, and design and implement a pilot care coordination support model for perinatal OUD and/or SUD clients.

### Native Hawaiians and Pacific Islanders

To address the needs of the Native Hawaiian and Pacific Islander population, the state implemented a culturally anchored primary prevention program with children and families, training for the community and workforce, and HOI workgroup dedicated to identifying gaps within the continuum of care and creating innovative solutions to those gaps.

The state is working to enhance and increase culturally based treatment and recovery services within the continuum of care. It uses the Cook Inlet Tribe Indigenous Evidence-Based Effective Practice Model for implementing indigenous knowledge and values with evidence-based modalities. The model facilitates development of practices and programs that are culturally congruent for Indigenous people, accepted and validated by the research community, and deemed supportable by private and governmental sponsors.



**About the Opioid Response Network (ORN):** ORN is a group of diverse individuals and organizations working collaboratively to address the opioid and stimulant crisis. Funded by SAMHSA's SOR/Tribal Opioid Response (TOR) Technical Assistance (TA) grant, ORN works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to provide education and training. **Visit the ORN website [here](#) or request training or TA [here](#).**

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