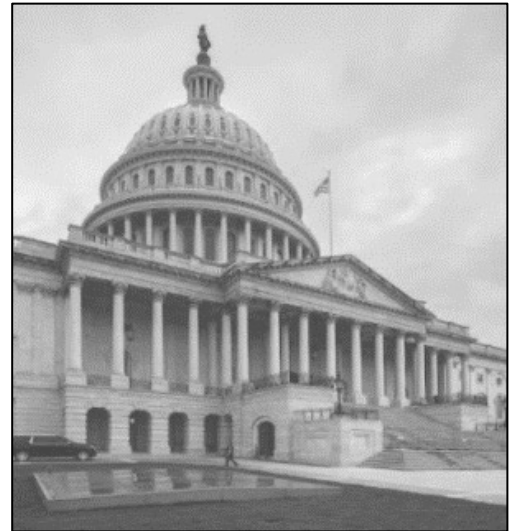


## Montana SOR Initiatives

### 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): Montana Department of Public Health and Human Services (DPHHS)

DPHHS has received \$24,063,722 in SOR funding from FY18 through FY23. For FY23–FY24, it received \$8,000,000.

Montana's SOR III goals include:

1. Increase access to evidence-based treatment for underserved populations with opioid use disorder (OUD) and StUD
2. Increase access to evidence-based prevention services for OUD and StUD
3. Increase access to evidence-based recovery services for OUD and StUD
4. Enhance collaborations to increase the reach and impact of SOR activities statewide



## Preventing Opioid and Stimulant Misuse Before It Starts

Montana has used SOR to support a safe disposal initiative and media campaign.

### Safe Medication Disposal Map

The DPHHS SOR program has successfully implemented a safe medication disposal initiative. This program, focused on vulnerable populations, has established disposal sites, conducted educational campaigns, and fostered community partnerships. The impact includes increased medication returns, reduced environmental impact, heightened community engagement, and a decline in the potential diversion of medications for illicit use. Through strategic efforts, the program contributes significantly to preventing opioid misuse, enhancing community well-being, and promoting environmental sustainability.

### Media Campaigns

The Kauffman and Associates billboard campaign, featuring the impactful slogan “Together We Can,” has significantly influenced the reduction of opioid impact in Montana’s rural areas and Tribal lands and among aging populations and people actively using opioids. By strategically directing individuals to seek assistance for opioid misuse, promoting safe disposal practices, and fostering overall awareness, the media campaign has proven instrumental in connecting affected communities with vital resources and support. The campaign’s targeted approach addresses the unique challenges faced by diverse populations, contributing to a comprehensive effort to combat opioid-related issues across the state.

## Overdose Reversal Efforts: Saving Lives

Montana reduces overdoses through overdose reversal agent distribution and education.

### Statewide Naloxone Master Training Programs

Under the guidance of BHDD, Best Practice Medicine Montana is coordinating the statewide effort to train naloxone master trainers to combat the rise of opioid overdoses. In Montana, the deployment of master trainers for naloxone has shown impactful results. With coverage in all 56 counties, these trainers play a crucial role in empowering communities to respond effectively to opioid overdoses. The program has contributed to widespread naloxone distribution and training, enhancing the state’s readiness to address opioid-related emergencies.

### Overdose Education and Naloxone Distribution Program (OENDP)

SOR has supported Montana’s OENDP, a public health initiative to reduce opioid-related deaths by providing education and access to naloxone—an opioid overdose reversal medication. The programs involve training sessions that educate individuals on recognizing the signs of an opioid overdose, administering naloxone, and accessing emergency medical services. Additionally, OENDP distributes naloxone kits to individuals at risk of experiencing or witnessing opioid overdoses, as well as community organizations, healthcare providers, and other stakeholders.

### Montana Public Health Institute (MTPHI)

MTPHI supports several key initiatives to maximize naloxone distribution and enhance collaboration within the community. This includes developing and executing memorandums of understanding with Tribal organizations, county health departments, safe syringe programs, and other community-based organizations to ensure widespread naloxone access. Additionally, MTPHI regularly participates in bi-weekly meetings with

the Addictive and Mental Disorders Division of DPHHS and the Montana Primary Care Association to foster communication and coordination among stakeholders. The institute also participates in Montana Substance Use Disorder (SUD) Taskforce meetings to engage in broader discussions and initiatives related to SUD. Overall, these efforts contribute to a comprehensive approach to addressing opioid-related issues and promoting community well-being.

### **Free Community Naloxone Distribution**

The Free Community Naloxone Distribution initiative, a SOR-funded online ordering system, has made a significant impact. It has reduced barriers to accessing naloxone. Community organizations, pharmacies, and individuals have the option to request free naloxone by submitting an order through the DPHHS naloxone ordering site using the naloxone order request form. Through widespread distribution efforts, this program has provided communities with free naloxone access. The initiative has enhanced community preparedness, reduced opioid-related fatalities, and fostered a proactive response to opioid emergencies, contributing to overall public health and safety.

### **Overdose Detection Mapping Application Program (ODMAP)**

ODMAP provides near real-time suspected overdose data across jurisdictions to support public safety and public health efforts to mobilize an immediate response to a sudden increase in overdose events. ODMAP links first responders and relevant record management systems to a mapping tool to track overdoses to stimulate real-time response and strategic analysis across jurisdictions. The concept uses ODMAP to display overdose data and superimposes it with a map indicating naloxone distribution. The objective is to identify naloxone-deficient areas and implement outreach efforts to augment naloxone availability in regions with limited supply. This approach ensures prompt naloxone access in communities with increased overdose alerts.

## **Increasing Access to Treatment**

Montana has used SOR to expand access to treatment for OUD, including MOUD and training on using contingency management.

### **MOUD Services**

Access to MOUD is being enhanced by: 1) increasing the number of treatment organizations and office-based providers that can deliver MOUD; and 2) educating state-approved behavioral health treatment providers on the value of MOUD and their role in treating OUD.

### **Contingency Management (CM)**

Dr. Michael McDonnell and his team from Washington State University were contracted through the Opioid Response Network (ORN) to train and coach on using CM, a powerful behavioral intervention for SUD. This training was provided to SOR contractors and other state-approved treatment providers.

CM uses positive reinforcement to encourage abstinence from drug use. It involves providing tangible rewards, like gift cards, when individuals demonstrate drug abstinence, such as negative urine drug tests. By providing rewards for abstinence, CM promotes positive changes and can lead to feelings of pride, joy, and increased self-esteem. This approach also strengthens the therapeutic relationship, as both clients and clinicians can celebrate success and support continued efforts, even in the face of setbacks.



CM has been effective in helping people stop using stimulants and has shown increased abstinence rates for up to a year after treatment. Overall, CM encourages accountability, persistence, and a positive approach to treatment.

## Supporting Long-Term Recovery

Montana used SOR to assist individuals in recovery by expanding peer support services and recovery housing.

### Peer Support Services

The Montana Peer Network (MPN) is contracted to train individuals to become certified behavioral health peer support specialists (CBHPSS), to develop and deliver continuing education trainings for certified peers, to offer one-on-one mentoring sessions with working peers, to consult with organizations on an as-needed basis, and to develop and disseminate guides that support the delivery of peer services. MPN consults with CBHPSS across the state to better understand training needs and workforce issues, and to anticipate needs as they arise. For example, MPN facilitated a four-part continuing education units training, E-CPR, that meets the annual CBHPSS suicide prevention training requirements for the Board of Behavioral Health.

### Recovery Residence Alliance of Montana (RRAM)

In 2023, RRAM achieved official recognition as the state affiliate of the National Alliance of Recovery Residences and is currently in the certification process for 10 housing programs. These programs represent 44 recovery homes and 233 beds.

### Montana Recovery Residence Registry

As of October 1, 2023, alcohol and drug recovery residences operating within Montana must comply with the requirements of Senate Bill 94, passed by the 2023 Montana Legislature. SB 94 requires recovery residences to register with DPHHS. DPHHS currently recognizes certifications by RRAM and the National Sober Living Association.



## Reaching & Serving Populations of Focus

Under SOR II, the focus was on addressing the needs of clinically underserved populations, particularly American Indians and individuals within the criminal justice system. Approximately 44.7% of enrolled clients identified as American Indian, despite comprising only 6.4% of the state population, while 22.2% of enrollees were justice-involved.



**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](#).**

*Disclaimer: Funding for this initiative was made possible (in part) by grant no. 1H79T1o85588-01 from SAMHSA. The information contained in this brief was provided and verified by the state/jurisdiction. The content of this publication does not necessarily reflect the views or policies of SAMHSA or the Department of Health and Human Services.*