

Addressing Opioid and Stimulant Misuse and Disorders: The Impact of State Targeted Response and State Opioid Response Grants

Background on State Targeted Response and State Opioid Response Grants

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. The STR program was designed to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose–related deaths through the provision of prevention, treatment, and recovery support activities for opioid use disorder (OUD). Following STR, the SOR program similarly aims to address the opioid crisis by increasing access to medication-assisted treatment (MAT) using the three Food and Drug Administration (FDA)–approved medications for treatment of OUD and through the provision of prevention, treatment and recovery activities for OUD. In addition, the SOR program supports evidence-based prevention, treatment and recovery support services to address stimulant misuse and use disorders, including for cocaine and methamphetamine.

In FY 2017 and FY 2018, grantees received a total of \$1 billion through STR. From FY 2018 through FY 2020, states, territories, and jurisdictions received a total of \$4 billion in SOR grants.

Single State Agency (SSA): Massachusetts Department of Public Health Bureau of Substance Addiction Services

In FY 2017 and FY 2018, the Massachusetts Department of Public Health (MDPH) Bureau of Substance Addiction Services (BSAS) received a total of \$23.7 million in STR funding. From FY 2018 through FY 2020, the state received a total of \$147 million in SOR funding.

Overview of Massachusetts' efforts to address opioid and stimulant misuse and disorders

With STR/SOR funding, MDPH serves individuals affected by the opioid crisis using a data-driven, recovery-oriented system of care approach. Overarching goals for the funding include:

1. Improving, enhancing, and expanding the state's infrastructure for reporting on the opioid epidemic;
2. Expanding and enhancing opioid misuse, addiction, and overdose prevention interventions by expanding overdose prevention in high-risk, high-need communities using innovative and evidence-based methods;
3. Expanding treatment and recovery support for people with OUD and stimulant use disorder;
4. Increasing capacity through targeted workforce development and training activities; and

5. Increasing education and awareness to reduce stigma and increase access to medication for OUD through the development of strategic communications campaigns.

Innovative service delivery models

- Office-based opioid treatment (OBOT) training and technical assistance for providers and clinicians
- Telehealth strategies in rural and underserved areas
- Post Overdose Support Team (POST) model
- Collaborative and Transitional Models (CTM)/hub-and-spoke model
- Access to Recovery (ATR)
- Rapid rehousing for individuals/families in recovery from OUD/stimulant use disorder
- Medication for opioid use disorder (MOUD) in correctional settings
- OBOT and Opioid Treatment Program (OTP) enhancements
- Treatment and recovery services targeting youth and young adults
- Peer recovery support services for pregnant, postpartum, and parenting women
- Family supportive housing

Building workforce capacity

Massachusetts implemented initiatives to expand and enhance efforts to strengthen the workforce's ability to provide evidence-based prevention, intervention, treatment, and recovery support services to people with OUD and stimulant use disorders.

Specific activities include Opioid ECHO (Extension for Community Healthcare Outcomes) telehealth training and technical assistance on MOUD vendors, overdose prevention training, training for peers and their employers on evidence-based models for peer support, expansion of activities designed to recruit a more diverse workforce to serve people with OUD, training for long-term care facilities on OUD and MOUD, targeted training to providers on the intersection of suicide and OUD, training for high-risk occupations, and ongoing engagement with Massachusetts Tribal organizations

Collaborating with public and private entities

Massachusetts funded the Office of Local and Regional Health within MDPH to support coordination of local public health department efforts around opioid intervention and prevention messages to address the opioid crisis at the community level.

MDPH has also collaborated with Native American Tribes and Tribal organizations in Massachusetts as part of the SOR grant, with the goal of increased access to culturally responsive, evidence-based treatment and expansion of culturally sensitive opioid misuse and opioid overdose prevention initiatives.

Preventing opioid and stimulant misuse before it starts

With STR/SOR funds, Massachusetts is implementing the following activities to prevent opioid misuse:

- OBOT training and technical assistance for providers and clinicians to ensure that practitioners associated with STR/SOR programs obtain training in evidence-based addiction treatment and obtain a Drug Addiction Treatment Act (DATA) waiver (if applicable),

- Deploying telehealth strategies in rural and underserved areas to increase the capacity of communities to support OUD prevention, treatment, and recovery through Opioid ECHO, and
- Targeted training for prescribers and other staff on safe prescribing of opioids.

Education and public awareness

Three main information/media campaigns have been implemented using STR/SOR funding:

1. A public information campaign to reduce stigma against MAT, building on and expanding the successful “State Without StigMA” campaign;
2. Targeted communication campaigns to reach high-risk populations and provide targeted, culturally responsive information on prevention, intervention, treatment, and recovery supports; and
3. Marketing and outreach to advertise the newly updated and enhanced Massachusetts Substance Use Helpline.

Overdose reversal efforts: saving lives

Overdose Education and Naloxone Distribution (OEND)

The overall goal for this project is to increase outreach, education, and training on overdose reversal and naloxone for at least 2,000 new individuals over the 2-year grant period. To meet this goal, MDPH BSAS allocated funding to seven new community-based syringe services programs or other harm reduction programs serving 12 high-priority communities. The seven newly funded sites have provided overdose education and naloxone to 3,954 individuals through April 2019. An additional eight high-priority locations have since been funded and have provided overdose education and naloxone to 10,138 individuals.

POST Programs

The POST model offers in-person, home-based, and venue-based outreach and support grounded in a harm reduction approach after an overdose or stimulant-related acute medical event occurs and is reported to the community program. Community programs receive triggers for service based on data such as police reports, 911 calls for service, emergency medical services (EMS) records, and other data sources tracking overdose events. Three funded sites successfully made contact with at least 1,563 individuals located at addresses where an overdose occurred. Eight new high-priority locations have been established and have successfully contacted an additional 3,021 individuals. There are now 11 funded POST programs serving Massachusetts.

Expansion of overdose prevention training and technical assistance

This project aims to provide new cross-sector trainings to at least 2,000 service providers statewide to improve the capacity of health and human services providers for overdose prevention and response. In year 1 of STR, MDPH BSAS contracted with Health Resources in Action (HRiA) to conduct a needs assessment and begin developing a curriculum based on findings from this assessment.

With STR and SOR funding to date, HRiA has delivered 207 trainings to approximately 1,890 staff members from the statewide Offices of Community Corrections and to state sister agencies on overdose prevention in priority populations, including people experiencing homelessness and people with co-

occurring mental health and substance use disorders. MDPH expanded this initiative to continue offering these trainings in additional locations around the Commonwealth, and HRiA has developed additional relevant training modules grounded in the harm reduction approach.

Increasing access to treatment

With STR/SOR funding, Massachusetts is implementing the following activities to increase access to treatment:

Hub-and-spoke model

In this model patients with OUD are stabilized in a specialized treatment setting focused on the care and treatment of OUD and associated conditions and then transferred to community-based providers after stabilization.

Transition Addiction Treatment program and enhancing access to OBOT and OTPs

In this program clinicians identify individuals with OUD admitted to a hospital facility or an Acute Treatment Services (detox) program and provide assessment for medication, monitor induction on MAT, and then transfer to the partnering outpatient OTP or OBOT for medication maintenance and treatment after discharge from acute care. This program also expands and enhances OBOTs and OTPs in areas of identified high need as well as among high-risk, high-need populations. Enhanced services consist of community- or home-based outreach, innovative models to serve hard-to-reach patients, specialized case management, clinical and nonclinical services targeting needs of specialized populations, training and certification associated with treating specialty populations, and transportation or other ancillary costs to facilitate engagement in treatment and to support ongoing recovery.

Supporting long-term recovery

Access to Recovery

The overall goal for this project is to implement an ATR model focused specifically on individuals affected by opioid addiction. The project is providing support for basic needs, job readiness and employment training, and recovery coaching for up to 5,900 individuals in early recovery. The project provided ATR services to 5,509 individuals in early recovery. MDPH continued to fund and has served an additional 6,810 individuals, with service delivery ongoing.

Rapid rehousing for individuals/families in recovery from OUD

This pilot program aims to provide short-term rental assistance (such as rental arrears or housing costs), housing search support, and up-front costs associated with preventing or ending housing insecurity and homelessness. The recipients of these services are individuals diagnosed with OUD and/or who have a history of opioid overdose who are residing in residential addiction treatment programs with no secure housing plan available after discharge from the program. These services will be targeted to approximately five high-need communities and will serve approximately 100 households across the Commonwealth.

Family supportive housing

This program provides recovery housing to families impacted by OUD and/or stimulant use disorder, meeting an identified need for this population.

Serving special populations

Prevention services for special populations

In addition to prescriber education and other training/technical assistance activities, Massachusetts is using STR/SOR funds to increase training for health and human services providers on overdose reversal and response, as well as working with syringe services programs and post-overdose follow-up programs, to provide overdose education and naloxone to individuals at high risk for witnessing and/or experiencing an opioid overdose.

The BSAS Office of Youth and Young Adult Services is implementing community-based intervention programs and direct care services to underserved youth at high risk for OUD/substance use disorders by utilizing evidence-based and developmentally appropriate practices such as Screening, Brief Intervention, and Referral to Treatment (SBIRT) and Adolescent Community Reinforcement Approach (A-CRA). Services will be integrated into schools for youth ages 8–17 and will offer case management, family support, and referral to external resources. The state also plans to provide training and education to high-risk worker groups in the Commonwealth, including the fishing industry and the building trades.

Targeted intervention for high-risk youth

In partnership with the Executive Office of Public Safety and Security and the Department of Mental Health, this project provides targeted, developmentally appropriate intervention services for justice-involved youth and youth with co-occurring disorders who are at high risk for OUD and/or stimulant use disorder.

Treatment services for special populations

Through STR/SOR, Massachusetts is specifically targeting the highest-risk populations, including individuals ages 17–44, ethnic and racial minorities, pregnant and parenting women, persons with history of incarceration, persons with co-occurring disorders, and individuals experiencing homelessness. Specific initiatives include:

MOUD in Correctional Settings

Massachusetts has expanded and enhanced current Sheriff's Department initiatives to increase access to MOUD and other evidence-based treatment for individuals with OUD and stimulant use disorders who are justice involved.

Expansion of the Moms Do Care Program

The existing Moms Do Care program, serving pregnant, postpartum, and parenting women with OUD, has been expanded from 2 to 10 new service locations. Each project participant is paired with a perinatal peer mentor who acts as care navigator and peer support specialist in assisting participants to access MAT, as well as obstetric, primary, mental health, and pediatric health care. and the mentor also links them with wraparound treatment, recovery support, and family services. The expanded model supports a medical and behavioral health home for perinatal women with OUD, to increase engagement through service integration, patient-centered scheduling, care navigation, and peer support. This expansion model seeks to create seamless provider collaboration, through either the co-location or the close integration of services.

Recovery services for special populations

Massachusetts has expanded the FIRST (Families in Recovery Support) Steps Together program, a home visiting parenting and recovery support initiative serving pregnant women, mothers, and fathers of young children who are impacted by OUD and stimulant use disorder. Two sites will be added, for a total of approximately nine funded sites.

The state has also expanded current efforts to increase access to developmentally appropriate recovery support services for youth and young adults. In partnership with the Massachusetts Department of Elementary and Secondary Education, this program provides recovery-oriented enrichment programming for youth and young adults in recovery from OUD and/or stimulant use disorders. The state funds two Alternative Peer Group (APG) programs, a comprehensive adolescent recovery support model that integrates recovering peers and pro-social activities into evidence-based clinical practice.

Demonstrating outcomes for a healthier future

- As of April 2021, 34,301 individuals were enrolled across all STR and SOR prevention, treatment, and recovery programs.
- Approximately 4,500 individuals and/or their family members were reached after a 911 call for an overdose offering critical post-intervention services and support.
- The state added eight new OBOT sites under STR. With SOR, six OBOT sites received funding to provide outreach, engagement, and culturally responsive services for hard-to-reach, high-risk populations with OUD, including pregnant and parenting women, youth and young adults, people who identify as LGBTQ, individuals with justice involvement, people experiencing homelessness, and Black/African American and Latinx populations.
- With STR, 711 overdose reversals with the use of naloxone were reported at the time of refill and almost 7,000 naloxone kits were distributed. With SOR, Massachusetts has distributed an additional 37,279 kits, and 3,436 overdose reversals have been reported.
- With STR, 6,140 individuals received recovery support services, and an additional 7,774 have been served with SOR.

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