

THE OPIOID PROBLEM:
AN AWARENESS AND PREVENTION CAMPAIGN IN
HIGHLAND, ILLINOIS

COMMUNITY ENGAGEMENT & AWARENESS
N475 SIUE School of Nursing (Spring 2018)

SSCC Director: Connie Frey-Spurlock
SSCC Research Assistant: Wemimo Esho
Southern Illinois University Edwardsville

ACKNOWLEDGEMENTS

We would like to express our gratitude to Highland community development intern Sean Maher and Chief of the Highland EMS, Brian Wilson for their time, effort and valuable and contributions during the execution of this research work.

We would also like to thank the various SIUE faculty the Nursing students and City of Highland staff who contributed to the successful completion of this research.

About the Office of Educational Outreach

The SIUE Office of Educational Outreach enriches the economic, cultural, personal and professional lives of a diverse society, eliminating barriers to expand the educational resources of SIUE. They promote learning by providing accessible educational opportunities through the agile development of relevant, collaborative programs and partnerships.

- Continuing education courses for licensed professionals
- Training programs for personal and professional development
- Leisure learning opportunities
- Test preparation courses
- Summer Camps

Office of Educational Outreach

Mary Ettling, Interim Director

Rendleman Hall, Suite 1330

618-650-3210

618-650-2629

siue.edu/educationaloutreach

ABOUT SIUE SUCCESSFUL COMMUNITIES COLLABORATIVE

The SIUE Successful Communities Collaborative (SSCC) is a cross-disciplinary program that supports one-year partnerships between the University and communities in Illinois to advance local resilience and sustainability based on community-identified environmental, social, and economic issues and needs. SSCC seeks to reduce those obstacles by linking existing graduate and undergraduate courses at SIUE to explore innovative solutions to community-identified projects.

SSCC selects a single partner community; usually a city or county through a competitive application process. Working with administrative staff and stakeholders in the selected community, the collaborative helps identify 10–15 projects that will advance local resilience and sustainability based on community-identified needs. Each project is connected with one or more key courses at SIUE that can provide research or technical support and move the project forward.

Connie Frey-Spurlock

SSCC DIRECTOR AND ASSOCIATE PROFESSOR OF SOCIOLOGY

Wemimo Esho

RESEARCH ASSISTANT

Mary Ettling

PROGRAM DIRECTOR AND INTERIM DIRECTOR OF EDUCATIONAL OUTREACH

ABOUT HIGHLAND, ILLINOIS

Highland, Illinois is a city in Madison County. It is one of the oldest Swiss settlements in the United States. It was founded in 1831 by Swiss pioneers from Switzerland and shares the title of "Sister City" with the town of Sursee, Switzerland.

Located 35 miles east of St. Louis just off of Interstate 70, today Highland is home to 9,919 residents (as of the 2010 census). A progressing community, Highland also honors its historical roots with several celebrations and festivals that recall the Swiss/German heritage.

One of Highland's early citizens, Louis A. Latzer, perfected the process of condensing milk, thus making milk more widely available to the masses. He is called the "Father of Pet Milk." This is just one example of the long-standing entrepreneurship that has been prevalent in Highland since its inception. Many of Highland's most prosperous industries were founded by local citizens, often growing their operation from garage or basement to multimillion-dollar corporations.

Highland has a long history of being a progressive municipality, successfully blending industry within a small-town atmosphere. There are more than 30 social service organizations in Highland, each with active membership. Additionally, Highland is proud to be home to a highly rated school district, library, and hospital. City utilities are municipally owned and operated and include the electrical system, water and sewer systems, and most recently, the Highland Communications Service for municipally owned and operated fiber broadband internet, telephone and data services.

Table of Contents

Executive summary

Introduction

Conclusion

This report represents original student work and recommendations prepared by the Nursing students of Southern Illinois University Edwardsville's Successful Communities Collaborative. Text and images contained in this report may not be used without permission from the Southern Illinois University.

EXECUTIVE SUMMARY OF HIGHLAND REPORT

The mission of the collaboration is to improve the health of Madison County due to the increasing rate of opioid usage. As of 2014, 60% of deaths were caused by drug overdose. The project identifies risk factors and possible solutions to eradicate the opioid epidemic.

Opioid usage is common amongst those who are unemployed, are low-income earners and have no health insurance. These victims are prone to be Caucasians males between the ages of 35-44 who live in rural communities. Opioid abuse is also associated with those who have mental health challenges and chronic pain. Naloxone is a pharmaceutical drug that reverses the potent effects of opioid and emergency first responders frequently are equipped with Narcan, a popular brand name that produces naloxone.

Naloxone can be purchased in the State of Illinois without a prescription for \$40-\$120, and a non-profit organization, Bethany's Place, provides naloxone for no charge.

In case of emergency, naloxone is administered to an overdosed patient's upper arm or outer thigh, after which it is best to place a 911 call. Under the Good Samaritan Act, if a person administers naloxone in good faith, they are not liable for any civil damages that could otherwise be incurred.

Some factors/concerns to consider when trying to understand the cause of this opioid epidemic:

- Medical: How opioids are used, accessibility of pharmacies where naloxone can be purchased, improperly managed pain prescriptions, alternative pain management therapy, and locations of treatment facilities.
- School: Increased drug use occurring in younger teens, peer pressure, emotional and psychological stress from home leading to involvement with drugs, and social acceptance of use of alcohol and marijuana.
- Resource limitation: distant proximity of treatment centers, lack of community support and support groups, and the need to educate individuals, families, and communities about opioid use and naloxone use.

Understanding Opioid Addiction: How Users Maintain their Habits

Individuals who are addicted to opioids are known to devise all sorts of tactics to fuel their habits. Some of them include:

- Going to multiple physicians/pharmacies and intentionally withholding the information that they are already on opioid medication. This over-prescription sustains their opioid supply and thus the habit.
- Buying from street dealers who sell opioids and opioid derivatives.
- Earning money to buy the opioids by selling their possessions, selling other illegal drugs, working extra jobs to afford the drugs, and stealing.

Enabling

In an effort to help and show support to individuals battling addictions, sometimes these people end up encouraging the habit by ‘protecting’ the user's actions, this is called enabling. According to a quote by De’Meko Scott of Elite Rehab Placement explains it as *“Helping allows someone to get well. Enabling allows, even encourages someone to stay ill”*.

The Hazelden Betty Ford Foundation lists ways in which those who care about them might enable addicts:

- Protecting the addict from consequences of his/her drug use;
- Concealing the addict's behavior from others as a means to avoid disputes;
- Making excuses for the user's inappropriate behaviors related to addiction;
- Coming to user’s rescue when in financial or legal turmoil;
- Attempting to shelter the user by controlling the user’s social relationships, leisure time, and employment;
- Performing tasks for the user that the user should be able to do by himself/herself such as cooking and cleaning;
- Blaming other people or circumstances for the user’s behaviors or actions;
- Assuming the role of a caretaker;

- Attributing the addict's "problem" to something other than opioid addiction, such as loneliness, age-related changes (adolescence), shy nature, other illnesses;
- Avoiding the addict in an "out of sight, out of mind" mentality.

Enabling can lead to:

- Continuation of the habit
- Increased demands on the enabler, which can lead to abuse of the enabler by the addict and consequent relationship destruction
- Escalation of guilt for both the enabler and the addict, which can create a vicious, self-destructive cycle resulting in both parties requiring recovery therapy; and
- Death of the addict.

Best Practices for Interventions

In order to effect change and curb the opioid epidemic in the Highland Community, the following interventions should be considered:

Community-level Interventions

Community-level interventions include the use of print, digital, and other social media to create awareness and provide resource information; Narcotics Anonymous groups to facilitate recovery among users, and family support groups. The City of Highland might also consider adopting a program similar to of Lake County, Illinois' "Way Out" program, which permits users to willingly surrender themselves to the Police to receive help without incurring criminal charges.

Highland might also consider creating a comprehensive program to increase the awareness of high-risk behavior such as alcohol-related incidences. Community leaders, law enforcement agents and especially the media can create a campaign to reduce high-risk drinking (RHD). Public policy and regulations can be implemented to include stricter zoning laws for bars, and liquor stores increased sobriety checkpoints around the city the city and also, curfews for minors.

Partnership for Drug-Free Communities

Madison County Partnership for Community Health focuses on educating the community on preventive measures by providing resource tools and specific programs related to drug use.

Areas focus includes Narcan education, mentorship programs, and a conscious effort to discard needles safely.

Family-Level Interventions

In order for families to intervene, they must recognize signs that their loved one is using. Those signs include:

- Behavioral and social changes; mood swings, new social circle, uncommunicative, declining grades, frequent job change.
- Change in personal appearance; unkempt, poor hygiene.
- Health concerns: Nausea, sudden weight loss.

Another way to identify if a person is addicted to opioids is the CAGE questionnaire:

C- Have you ever thought about **C**utting down your drug use?

A- Have people **A**nnoyed you by being critical about your drug use?

G- Have you ever felt **G**uilty about your drug use?

E- Have you ever used drugs first thing in the morning as an **E**ye opener or to get the day started?

Family-level interventions also involve discussions between children and parents or mentors can help in resistance communication, providing a nurturing and supportive reinforcement, and also rule-setting, boundaries, and consequence awareness.

If the child is homeschooled, there are alternative means of providing a system of intervention, besides parents, there could also be mentors and perhaps even religious bodies enlisted in the prevention programs.

In some cases, families are driven to the point where they consider committing a relative who is addicted to opioids, this is called involuntary rehab commitment and can only be granted by a judge or a psychiatrist who has been provided with adequate mental health records as justification.

School-level Interventions

Currently, drug information is only taught briefly during health classes in the Highland Community Unit School District No. 5. Anecdotal data suggest that too many students are using vape pens and alcohol during the school day, but without a systematic assessment of the problem school officials cannot be certain of the extent of the problem. Students begin using illegal substances as a result of parental indifference, a lack of awareness on the part of the parent, and interactions with students who are already using. For these reasons, we recommend that the school system develop a partnership with community stakeholders and parents with a goal of raising awareness and increasing prevention efforts. We also recommend that the school system participate in the Illinois Youth Risk Behavior Surveillance program to document the extent of the drug and alcohol usage.

Additional recommendations include teaching students' social resistance and competence enhancement skills, how to identify high-risk behavior, teaching coping skills, self-control and self-esteem boosting techniques, and stress relief measures.

There is the need for school resource officers (SRO) on the school grounds to reduce students' involvement with opioid use. Educational initiatives such as the SADD (Students Against Destructive Decisions) and SADA (Students Against Drugs and Alcohol) as well as support groups such as Al-Anon and Alateen can also be of significant impact in ridding the community of this epidemic.

Subscription of 'Health Promotion Wave' newsletter by the Highland School System; located under the 'Resources' tab on their website. This publication addresses a variety of health issues that could affect children in school as well as the teachers and families.

Free educational resources made available such as Drug Enforcement Agency (DEA) operation preventions; taught in classrooms to students as well as Heroin Information Resources; helpful to students, teachers, and family members.

Illinois State Laws Concerning Heroin and Naloxone (Narcan)

According to 720 ILCS 570/401:

- Hypodermic syringes 100+ or any dirty hypodermic syringes are a ‘*Class A misdemeanor*’ facing up to a year of prison and up to a \$2,500 fine.
- 6-30 years for 15-100 grams of heroin or Fentanyl.
- Trafficking 1kg or more of Heroin/Fentanyl could lead to facing ten years to life in prison with fines up to \$50 million.

In the case of some drug-related arrests, the users have to be committed into court-ordered rehabilitation. There are two kinds, first is a *deferred prosecution*: where the accused will not have to plead guilty or suffer any charges but is assigned mandatory rehabilitation by the State. The second is *post-adjudication*, and in this case, the user must plead guilty to the charge, will be sentenced and then have the possibility of the record being waived upon the completion of the rehab program.

Research has shown that the swiftest method of forced rehab is to turn a loved one over to the authorities for using or handling drugs. However, one must ensure that the authorities involved are informed before the legal system enforcing the court-ordered rehabilitation.

Stress Management Tools

In cases where high levels of stress cause addictions, the (BERN) model can be employed to combat the risks. The BERN model stands for:

- *Behavior social support*: healthy communication, friends, motivational psychology

- **Exercise:** Adolescents and adults who perform in vigorous exercise are less likely to engage in drug use. Individuals with high-risk can partake in aerobic and anaerobic physical activities
- **Relaxation:** Studies have shown that people that participate in high-intensity exercises use less drugs and have a better quality of sleep. Meditation and sleep, studies have also shown that meditation helps achieve feelings of well-being and happiness.
- **Nutrition:** Healthy diets and supplements as needed.

Next Steps

- Implementation of school-based interventions strategies, curriculum, and Illinois Youth survey
- Support and funding