

Tackling the opioid crisis with a warmer touch

February 10 2020, by Jessica McBride



A new initiative involving UConn researchers aims to improve recovery odds for people who have survived opioid overdoses. Credit: Waterbury Police Photo/Lt. David Silverio

In the event of an opioid overdose, quick action from first responders can mean the difference between life and death. But oftentimes, survivors need much more than that first response to recover.

UConn researchers are working with the Waterbury Police Department (PD) and the Waterbury Department of Public Health on an innovative program to tackle the [opioid](#) epidemic by connecting overdose survivors to behavioral health clinicians immediately after overdose.

The City of Waterbury has received funding to implement the Waterbury Warm Hand-Off Program, the first of its kind in the state. The funding comes from the Office of National Drug Control Policy's "Combating Opioid Overdose through Community-Level Intervention." Part of the grant funding will support research activities at UConn to evaluate the program's effectiveness.

While the nation as a whole is fighting the opioid epidemic, Connecticut has been particularly hard hit. In 2017, there were 27.7 reported deaths due to opioid overdose per 100,000 population. That is nearly double the national average of 14.6 overdose deaths per 100,000.

Waterbury has seen a drastic increase in opioid overdoses in recent years, many of which involve highly potent synthetic opioids like fentanyl. According to a [2019 report](#) from the Greater Waterbury Health Partnership, the presence of fentanyl in overdoses in the Waterbury region has nearly doubled since 2016. In 2017, 81% of overdoses were fentanyl-related.

The Waterbury PD and [community partners](#) have already implemented several proactive, "out of the box" initiatives to stem the growing wave of fatal and non-fatal opioid overdoses. The department has spearheaded community outreach events and prescription take-backs, made drug disposal bins available, provided naloxone training, and created

informational materials that can be shared with survivors after an overdose.

Despite all these efforts, more needs to be done, and done quickly, says Waterbury Police Chief Fernando Spagnolo. He's hopeful that launching the Warm Hand-Off Program with UConn researchers to evaluate the model will provide qualitative and quantitative evidence of a positive effect.

"The Warm Hand-Off Program isn't an enforcement opportunity. The goal is to provide critical connections to care at ground zero and in real time," says Spagnolo. "As police officers, we're very good at solving immediate problems and making the scene safe. This program is different. It will create an avenue for long-term recovery support and necessary follow-up from health specialists."

In a traditional "cold hand-off," first responders provide emergency medical attention by administering naloxone to reverse the effects of an opioid overdose, for instance. The survivor might then be taken to a hospital and receive pamphlets about recovery support, but often that's where the interaction ends. In contrast, the warm hand-off model involves health specialists and peer recovery support as soon as an emergency call comes in.

The on-hand clinician talks with overdose victims about the need for treatment immediately, conducts an assessment, facilitates transfer to a treatment program (if the survivor agrees), and creates a plan to support the survivor as they work towards recovery. After the initial interaction, clinicians will continue to build trust, develop personalized plans, and remain responsive in order to best assist survivors on their journey to recovery.

"Survivors' willingness to engage in treatment tends to be highest right

after they receive emergency care for an overdose," says Jennifer DeWitt, a substance abuse prevention specialist with the Waterbury Health Department. "Their willingness diminishes rapidly once they leave the acute care setting, and they are at very high risk for a repeat overdose."

First responders and clinicians will collect data from overdose survivors and their families. Demographics like age, sex, and employment, as well as details about the [overdose](#), serve many purposes in the program. First, having this knowledge will help clinicians offer more effective assistance to survivors. The data will also be an important tool to evaluate the program's effectiveness. That's where researchers from UConn's Institute for Collaboration on Health, Intervention, and Policy (InCHIP) and Center for Applied Research in Human Development (CARHD) come in.

Home to over 600 affiliated researchers, InCHIP is a multidisciplinary institute with a long history of conducting cutting-edge health behavior research in areas like substance use, obesity, cancer, HIV, treatment adherence, and digital health, to name just a few. CARHD provides assistance to state and community-based agencies in the development, delivery, and evaluation of human service programs, particularly for marginalized populations.

Led by InCHIP associate director Debbie Cornman and associate professor Beth Russell from the Department of Human Development and Family Sciences, the UConn research team working with the Waterbury Police Department will use data analysis as well as stakeholder feedback to illustrate the Warm Hand-Off Program's impact on treatment outcomes, identify areas of strength, and suggest potential opportunities for continued improvement.

"We're thrilled to partner with Waterbury Police and the Department of

Public Health on this project," says Cornman. "When you are tackling an issue as complex as opioid abuse, you need to involve as many stakeholders as possible. This can't be fixed by one organization alone."

While the team is still working to identify the clinical providers who will implement the program, they hope to launch services in the beginning of March. Spagnolo's goal is to be able to eventually provide 24/7, 365 support through the Warm Hand-Off Program.

"What we're trying to do really goes beyond opioid addiction—it's a holistic approach so that people struggling with opioids can deal with everyday life. We want to let survivors know that the city supports and cares about them," says Spagnolo.

If Waterbury sees improvement through the program, it could serve as a model for other Connecticut communities battling unnecessary deaths from opioid use.

Provided by University of Connecticut

Citation: Tackling the opioid crisis with a warmer touch (2020, February 10) retrieved 1 May 2024 from <https://medicalxpress.com/news/2020-02-tackling-opioid-crisis-warmer.html>

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