

Priority Issue 8



Drugs, particularly heroin and opioids, are creating significant social, economic, public health, and safety problems across the County

Back Story Nationally, drug abuse and drug overdose are becoming a major health problem. In 2013, opioid analgesics were involved in 16,235 deaths — far exceeding deaths from any other drug or drug class, licit or illicit. Specifically, in 2014, nearly 2,500 Pennsylvanians died from drug-related causes, a 20 percent increase from the previous year, according to the PA State Coroners Association. This currently puts PA as seventh in the nation for drug-related overdose deaths.

According to the National Survey on Drug Use and Health (NSDUH), in 2012 an estimated 2.1 million Americans were addicted to opioid pain relievers and 467,000 were addicted to heroin. These estimates do not include an additional 2.5 million or more pain patients who may be suffering from an opioid use disorder because the NSDUH excludes individuals receiving legitimate opioid prescriptions.

Other important national statistics from a September 2014 Report for the Center for Rural PA:

- 4.2 million Americans age 12 and older have used heroin at least once
- 80% of heroin addicts reported abusing prescription opioids before starting heroin
- Health care providers wrote 259 million prescriptions for painkillers in 2012
- Heroin abuse affects one out of every four families.

There are significant numbers of people in the Country that need treatment and are not receiving it. According to the September 2014 Report for the Center for Rural Pennsylvania, the Federal Government claims that only one in ten individuals across the nation that need treatment are able to obtain or access it due to a lack of funding for addiction services.

Across Pennsylvania, heroin and opioid abuse is becoming a serious epidemic. According to the Center for Rural Pennsylvania December 2015 Report - Heroin: Combating this Epidemic in Pennsylvania:

- From 2007-2012 over 3,000 Pennsylvanians died from overdoses
- Overdose deaths increased by an astounding 470% over the last two decades
- More people are dying from overdoses than from car accidents (ages 20-44 in PA)
- 52,150 Pennsylvanians are receiving addiction treatment services
- Approximately 760,703 Pennsylvanians remain untreated

“Drug overdose death rates in the U.S. have increased five-fold between 1980 and 2008, making drug overdose the leading cause of injury death.”

Johns Hopkins Bloomberg School of Public Health report titled The Prescription Opioid Epidemic: An Evidence-Based Approach

- Access to treatment is also a concern within the State -approximately 1 in 8 Pennsylvanians are not able to access addiction treatment due to a lack of funding

Heroin users are ubiquitous-there is no such thing as a typical heroin user. Heroin addiction frequently starts as an opioid addiction. It is cheap and accessible. Heroin addiction brings an increase in crime and it is not easy to beat. Sadly, the problem is pervasive and growing. The PA Department of Drug and Alcohol Programs states that one in four people has substance abuse in their families. However, treatment programs can help.

Priority Issue Overview Heroin is rapidly becoming an epidemic throughout Lycoming County; moreover, heroin and opioid abuse crosses all socioeconomic groups all ages and all races. This issue is not only a health concern but also affects community and economic development throughout the county. Not only does the heroin epidemic taint the image of the community to outside investors, but there are significant workforce concerns as well. In a 2016 Focus Group session with county manufacturers and business owners, they reported that in some industries, only about 30-40% of qualified candidates for jobs pass the drug tests. It is becoming increasingly more difficult to find the qualified workforce to do the jobs needed because of this epidemic. This hinders growth and expansion opportunities as well as the sustainability of some businesses to remain here. Furthermore, the problem is causing additional stresses on the EMS service delivery and social service programs in just about every community.

According to the Lycoming County District Attorney, in 2012 the heroin epidemic that was devastating Pennsylvania began to impact Lycoming County. There are typically 50-60 heroin overdoses in Lycoming County

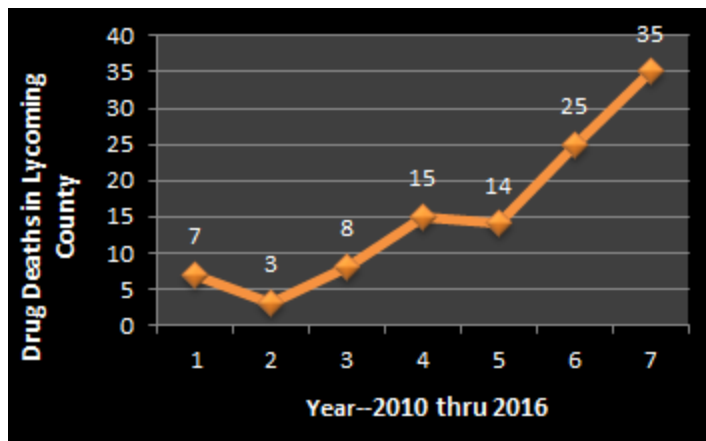


Figure X: Drug Deaths in Lycoming County
Source: Lycoming County District Attorney's Office

every month; most of these victims survive. However, the death toll (due to overdose) in the County has risen from eight in 2012 to 38 in 2017. This represents a 338% increase over a four-year period. Recently, drug-induced deaths appear to be due more often to Fentanyl and Cocaine.

A public survey, conducted in 2016 as part of the County's comprehensive planning process, documented the level of concern by the general public regarding the drug problem and associated crime. When respondents were presented an online survey (as well as in-person interviews at

public events), they were asked to select five areas (from a list of 12) where they would most like to invest public resources. More than 1,000 local citizens participated. Seventy percent (70%) of the respondents identified crime as one of their top five areas. Even more telling was the response to the question regarding what residents would like to change in Lycoming County. In that survey, crime and drugs was by far the most frequently received comment. As illustrated in the callout box (above to the right) crime and drug usage are highly correlated.

In Lycoming County, the West Branch Drug and Alcohol Commission functions as the Single County Authority (SCA). It has been in operation since 1974 as a private, non-profit human service agency for helping people find their way to recovery. The Commission is responsible for developing and providing a comprehensive and balanced continuum of care for quality substance abuse prevention, intervention, and treatment services for Lycoming and Clinton County residents. The Commission seeks to reduce the addiction, alleviate its effect and ultimately eliminate the abuse and misuse of alcohol, tobacco, and other drugs. To address this issue, a number of potential approaches must be explored:

- **REHABILITATE**-Support the provision of treatment, rehabilitation, education and counseling to prevent addiction and assist recovery
- **EDUCATE**-Reach students at a young age to impress upon them the dangers before possible drug use begins
- **PROTECT**-Continue to evaluate the need for a paid police department
- **ENGAGE**-Promote volunteerism among all populations and young people in particular through the use of social media and applications

Education is the proactive intervention to rehabilitation and is best achieved before a person is entangled in the drug culture. West Branch Drug & Alcohol Abuse Commission has presented the “Too Good for Drugs” program to some 2,300 students in 92 classrooms across Lycoming and Clinton Counties. The program is generally offered at the 5th-7th grade levels. This program fosters confidence and self-efficacy and resistance to substance abuse through goal setting and achievement, responsible decision making, positive conflict resolution, and healthy relationships. The key point is to educate youth early and repetitively.

The Pennsylvania Youth Survey (PAYS) is a biennial survey administered to adolescents in grades 6th, 8th, 10th, and 12th and aims to collect information about knowledge, attitudes, and behaviors towards alcohol, tobacco, and other drug use. In 2015, Lycoming County had a 77% participation rate (2,697 students). According to the National Institute on Drug Abuse and The Centers for Disease Control, youth who engage in the use of “gateway drugs” (alcohol, tobacco, marijuana) exhibit a significant greater likelihood of future use of other illicit drugs such as opioids, heroin and crack cocaine.

One area where Lycoming County youth may be more vulnerable than their counterparts across Pennsylvania involves narcotic prescription drugs Table X. Among the County students who have used these drugs, about 41% obtain them from a friend or family while 39% simply took them from a family member living in their home. Offsetting this illicit use is the attitude embraced by student peers: about 91% of 6th graders, 88% of 8th graders, 84% of 10th graders, and 80% of 12th graders “somewhat disapprove or “strongly disapprove” of their peers using Rx drugs not prescribed to them.

6th Grade	1.0% (1.0%)
8th Grade	2.7% (1.6%)
10th Grade	4.0% (2.0%)
12th Grade	3.8% (3.0%)
All	2.8% (1.9%)

Table X: Youth Narcotic Prescription Drug Use
Source: Pennsylvania Youth Survey

During its 2015 Community Needs Assessment process, STEP Inc.- a bi-county community action agency- conducted a community survey of 464 randomly selected registered voters in Lycoming County. Registered voters were selected with the purpose of providing a broad cross-section of residents in the County. Respondents were asked to identify the most important problem facing Lycoming County today. The survey’s top issue was Drugs and Alcohol. Survey results related to this issue from three additional years are also shown in Table X.

STEP also issued a survey to its 150 social service partner agencies; 179 responses were received. Among the 44 identified concerns, the top three issues are shown in Table 8.4.

Community and partner surveys concurred that substance abuse is a major problem in Lycoming County. Over two-thirds of the general public and nearly one-third of agency customers knew of someone dealing with substance abuse. Focus Group respondents indicated that the problem exacerbates the other identified needs in the county. Breaking the cycle of substance abuse goes well beyond treating the addiction; life’s normal problems are amplified by addiction.

Key Implications The cost of illicit drug use is generally defined in three principal areas: health costs, lost productivity cost, and crime-related cost. According to Lycoming County District Attorney’s office, from 2012-2016 the crime numbers in Lycoming County rose by 20%, nearly erasing all of the progress that had been made since 2008 in reducing crime in the County. As noted to the right, crime increases in Lycoming County were found to be directly attributed to heroin cases and the implications of this crisis are far-reaching.

The heroin crisis has resulted in the following crime increases:


- Number of drug possession cases
- Number of shoplifting cases
- Number of DUI cases (driving while impaired by drugs)
- Number of credit card fraud cases

	2015	2012	2009	2005
Drugs/Alcohol	48.5%	4.6%	13.3%	11.0%

Table X: Percentage of Survey Respondents that rated Drugs/Alcohol as the Top Issue in the County
Source: STEP Inc., 2015 Community Needs Assessment

	2015	2012	2009	2005
	Rank	Rank	Rank	Rank
Abuse of alcohol and/or drugs by youth	1	5	1	2
Abuse of alcohol and/or drugs by adults	2	T7	4	T6
Access to substance abuse services	3	T15	T12	***

Table X: Drugs/Alcohol Related Issue Rankings by Service Partner Agencies
Source: STEP Inc., 2015 Community Needs Assessment



Beyond the human carnage, the heroin and opioid epidemic has impacted Lycoming County’s budget in a number of additional ways:

- increases criminal justice system cost
- aggravates prison overcrowding
- increases recidivism with multiple periods of incarceration
- overloads court schedule
- causes additional work for parole and probation office
- increases activity for district attorney and public defender’s office
- creates impact on the families of the defendants
- induces negative impact on the budgets for other county departments thus forcing reductions in service delivery to general public projects

- Level of prostitution
- Frequency of burglary and robbery as addicts commit crimes to support their habit

As highlighted above, the drug epidemic has a ripple effect throughout Lycoming County government. The County's Criminal Justice System has worked hard over the last half decade to address and overcome the overcrowding issues in the County Prison. The male overcrowding issue has been trending downward; however, the female population continues to increase and overcrowding conditions persist.

Moreover, the heroin and opioid plight is ubiquitous. It is attacking every municipality in Lycoming County regardless of the income or educational level of their residents. The human toll on families from heroin and opioid addiction is devastating. It is particularly upsetting when this issue hits children. All too often drug-related overdose has been listed as the cause of death.

The County has had to face the challenge of finding a way to provide balanced resources to all departments and not just those departments directly impacted by the heroin epidemic. It is increasingly evident that the County cannot incarcerate its way out of this problem: aggressive and early education and long-term rehabilitation are recommended as much more effective approaches.

Effective rehabilitation involves two sequential phases:

- Near-term treatment
- Long-term follow-up

According to the National Institute of Health (NIH), successful drug rehabilitation outcomes are contingent on sufficient treatment length. "Treatment enables people to counteract addiction's powerful disruptive effects on the brain and behavior and to regain control of their lives. The chronic nature of the disease means that relapsing to drug abuse is not only possible but also likely, with symptom recurrence rates similar to those for other well-characterized chronic medical illnesses-such as diabetes, hypertension, and asthma." For Heroin and Opioids abuse, relapse -return to substance abuse-is often a catalyst for recidivism-a return to committing crime.

There is no universal standard that defines an adequate treatment length. Individuals progress through drug addiction treatment at various rates. However, according to NIH research has shown unequivocally that residential or outpatient treatment programs, whose duration is less than 90 days, are of limited effectiveness. NIH contends that treatment lasting significantly longer than 90 days is recommended for maintaining positive outcomes.

According to the National Institute on Drug Abuse, highly structured long-term rehab programs in therapeutic communities typically last from 6 to 12 months. For methadone maintenance, 12 months is considered the minimum, and some opioid-addicted individuals continue to benefit from methadone maintenance for many years. Moreover, treatment dropout is one of the major problems encountered by these programs. Research shows that motivational techniques that can keep patients engaged will also improve outcomes.

The follow-up to treatment is equally important. This involves a well-developed outpatient aftercare program based on a strong mentoring/sponsoring/support group element. Successfully designed and implemented, a drug addiction aftercare program is shown to:

- reduce relapse
- decrease recidivism
- increase the rate of full recovery

Such programs are based on providing a high level of accountability, behavioral feedback and effective management of negative emotions. The core programs also involve substance abstinence and development of a society contributing role. In the final analysis, there is no panacea and there is no cure to substance addiction, but the condition can be managed and recovery sustained - it's a lifelong commitment.

Developing and implementing effective rehabilitation programs is absolutely essential to combat the heroin and opioid epidemic. But, perhaps the best tool is early education that successfully reaches youth before they start down a destructive pathway.

Projects of Countywide Significance for this Issue

SUPPORT PROJECT BALD EAGLE

- Local governments and schools can assist by hosting public educational meetings in their municipal buildings to help the community better understand the nature and extent of the epidemic.
- Municipalities and local Police Departments may consider partnering with the County DA to have Drug Take-Back Programs in addition to the program administered by the District Attorney's office. A drop box, for example, could be set up for unwanted prescription or over the counter drugs. They would then be safely disposed of.
- Municipalities may consider using their websites, newsletters, and other means of communication to provide information and education about the issue. For example, Doylestown, PA has a Drug Awareness, Prevention and Education information page on their website to keep the community informed.

SUPPORT COUNTY RE-ENTRY PROGRAMING

- Financial assistance from Lycoming County to continue extensive programming, particularly related to drug recidivism

SUPPORT PUBLIC EDUCATION PROGRAMS

- Continue to support other educational awareness programs in the community and in our schools, such as "Too Good for Drugs" and promote wholesome extracurricular activities

- Encourage parents to educate themselves on pain management practices and the proper use of prescription drugs as well as the dangers of abuse and overdose while maintaining effective pain management

SUPPORT LAW ENFORCEMENT EFFORTS

- Encourage municipal law enforcement agencies to work more closely with West Branch Drug and Alcohol and the criminal justice system to understand and adopt effective intervention efforts – police-assisted referrals into treatment models
- Promote municipal first responder and law enforcement naloxone projects

SUPPORT DRUG & ALCOHOL TREATMENT PROGRAMS

- Work to support the West Branch Drug and Alcohol Commission prevention, intervention, treatment and recovery programs of adequate length
- Advocate for the Friends and Family Naloxone Project

SUMMER SPORTS PROGRAMS WITH DRUG EDUCATION

Develop a collaborative approach with local social service agencies, schools and colleges to provide an extracurricular and/or summer program for school-aged kids to provide productive and active outlets for them. This can be done as a sponsorship program by using local human and financial resources to implement. Drug education would be incorporated into the program goals.

CJAB SUBSTANCE ABUSE COMMITTEE

The committee is developing a “strategic Plan for Opioid Overdose Reduction” in collaboration with: PA Opioid Overdose Reduction Technical Assistance Center at Pitt Pharmacy Program evaluation and Research Unit (PERU).