

Recovery Oriented Systems of Care (ROSC)

Madison and St. Clair County Needs Assessment

Chestnut Health Systems

January 31, 2020

The Scope of the Opioid Crisis in Madison and St. Clair Counties

The US Census Bureau (2020) indicates that Madison and St. Clair counties have an estimated combined population of 525,520.

Roughly 15% of these individuals were living below the poverty level. This calculates to over 75,000 individuals living below the poverty level in the two counties. East St. Louis (St. Clair County) is one of the poorest cities in America, demonstrated by close to 45% of its individuals living below the poverty line. More than 40,000 of the individuals living in this region do not have health insurance.

St. Clair and Madison Counties have not been immune to difficulties of America's opioid epidemic. In 2014, it was reported by the Drug Enforcement Administration (DEA) that 9,031,240 oxycodone and hydrocodone pills were sold in St. Clair County and 14,367,940 were sold in Madison County. This equates to approximately 34 pills per St. Clair County resident and 54 pills per Madison County resident. By comparison, the statewide average per Illinois County was 1.22 pills per Illinois resident with the nation's average at 1.73 pills per U.S. resident.

This access has only fueled the addiction crisis in the area. This is demonstrated by the data from the 2016 State of Illinois Comprehensive Opioid Data Report in the chart below.

Population	Rate of ER visits due to opioid analgesic and heroin overdose combined per 10,000 pop., IL 2016	Rate of hosp. for opioid analgesic and heroin overdose combined per 10,000 pop., IL 2016	Rate of hosp. due to heroin overdose per 10,000 pop., Illinois, 2016	Rate of ER depart. visits due to heroin overdose per 10,000 pop., Illinois, 2016	Rate of hosp. due to opioid analgesic overdose per 10,000 pop., Illinois, 2016	Rate of ER depart. visits due to opioid analgesic overdose per 10,000 pop., Illinois, 2016
SC: 265,569	5.21	2.66	.48	3.30	2.25	1.98
MC: 266,759	12.08	4.02	1.13	7.06	3.32	2.94

As with the opioid epidemic, St. Clair and Madison Counties have equal concerns with AUD. According to a County profile conducted by the Institute for Health Metrics and Evaluation (IHME) at the University of Washington, St. Clair and Madison Counties had the following rates per 100,000 individuals in the categories below:

Population	Mental and Substance Use Disorders Mortality	Cirrhosis and other Chronic Liver Diseases Mortality	Heavy Drinking	Binge Drinking	Transport Injuries Mortality	Self-Harm and Interpersonal Violence Mortality
SC: 265,569	15.55	14.75	9.4	22.0	15.15	29.3
MC: 266,759	12.08	4.02	1.13	7.06	3.32	2.94

Many of these outcomes are associated with and/or directly related to AUD and other drug/alcohol related issues.

Drug overdose death trend data for the two counties follows:

County	2013	2014	2015	2016	2017	2018	2019
Madison	53	91	77	71	87	107	95
St. Clair	29	47	43	35	46	51	83

As you can see, despite a wide variety of treatment options in the area, community partnerships including two coalitions, and funding from the federal, state and local levels to combat drug and alcohol related issues, the problem is still at crisis levels.

Assessment Data

Over the course of the past year, the Metro-East Recovery Council (MERC) has met monthly with regular participation from community members and agencies throughout both counties. We conducted an analysis of communication systems in the two counties and developed a plan for outreach to our communities. We participated in the ROSC Assessment and analyzed the results. Three new priority indicators were identified by individuals participating in Madison and St. Clair Counties. Two additional indicators were identified by a number of St. Clair County responders, so these issues will be considered as part of our work as well. Of course, assessment is ongoing. We will continue to reassess community needs regularly throughout the project. For now, we will continue to examine the issues identified during fiscal year 2020, which include:

- Madison and St. Clair Counties:
 1. Lack of community funding programs available to help people leaving treatment and/or in early recovery pay for first month's rent in sober living facility.
 2. Lack of ample sober living opportunities for people leaving treatment and/or in early recovery.
 3. Lack of readily available primary healthcare and dental needs and lack of partnerships and/or programs in place to enable these services for recoverees.
- Additional indicators identified specifically in St. Clair County:
 1. Lack of adequate array of secular-based recovery programs (e.g. Rational Recovery, SMART Recovery, Secular Orgs. For Recovery) in the community.
 2. Lack of availability of long-term treatment programs (i.e. over 28 days) for recoverees who meet the requirements for such services (e.g. multiple previous treatment stays).

The four issues identified in fiscal year 2019 included:

1. Lack of awareness/education about addiction and support services for families and community members. There is great stigma still attached to individuals with SUD on the part of both family and community members.
2. Lack of age-appropriate education, treatment, recovery supports, and leisure activities for youth in recovery.
3. Lack of timely access to treatment services.
4. Lack of appropriate services for students in recovery offered at local colleges and universities.

As can be seen, the main focus issues identified have shifted in the past year, but the supports for the previously identified focus issues are still in development. Chestnut staff will work with MERC members to incorporate all community concerns into the strategic plan.

The following information can be found in the Appendices following this document:

Appendix A- **Inventory of SUD/COD Resources
MAT Services**

Appendix B- **Recovery Support Services/Groups**

Appendix C- **Recovery Residences**

Prevention Services

Chestnut Health Systems has a long history of providing quality ATOD prevention services through grants provided by the Illinois Department of Human Services/Division of Substance Use, Prevention, and Recovery. We are currently funded to provide services in the following communities in Madison and St. Clair counties (communities listed together indicate one service area):

Alton and Godfrey

Belleville and Swansea

East Alton, Wood River, Roxana, Hartford, and Bethalto

Edwardsville, Glen Carbon, Hamel, Worden. Moro, Dorsey, Prairietown, and Midway

Granite City, Pontoon Beach, and Mitchell

Hoyleton Youth and Family Services also has a Substance Abuse Prevention Services grant to serve the communities of Dupon and Cahokia. East Side Health District serves the East St. Louis community with Prevention services.

Count of Credentialed Peer Recovery Support Professionals

Chestnut Health Systems currently has at least 7 Peer Recovery Support Specialists employed throughout our substance use and mental health treatment services in Madison and St. Clair counties. Several others are working toward the certifications. At this time, we have been unable to determine the number of credentialed Peer Recovery Support professionals working with other agencies throughout the two counties. The IAODAPCA website lists the credentialed peer recovery specialists, but the only available filter is by region and not by county. We will continue to attempt to gather this data.

Community Readiness to support the ROSC and RCO

The Metro-East Recovery Council is a dynamic group comprised of individuals representing numerous community sectors. They welcome the chance to participate in the group and are excited about the chance to make a difference for individuals and families in our communities. That being said, we also understand that we have a long road ahead of us in regards to engaging community members to fully embrace the concept of the ROSC and RCO. We have had several encouraging signs over the past several years that indicate some willingness to address the needs of individuals seeking or maintaining recovery:

1. The Partnership for Drug-Free Communities- this coalition is comprised of over 60 cooperating agencies, treatment centers, colleges, hospitals, individuals, law enforcement entities, family members, and other groups has worked diligently to engage the community in drug prevention efforts. Three work groups (Prevention and Education, Treatment and Recovery Supports, Law Enforcement) meet separately and have developed strategic plans to address the opioid crisis in the Metro East area. This group has been in existence for over 10 years but increased efforts over the past 3 years in response to current issues. Recent monthly meetings have an attendance of approximately 40-50 people.
2. The St. Clair County Drug Prevention Alliance- in an attempt to reduce both youth substance use and the number of opioid overdose deaths in the county, this group convened for the first time in February of 2018. They are currently developing a strategic plan and are actively seeking funding to support their efforts.
3. Police departments in our area are seeking out training in Narcan administration. Several years ago, police officers showed mostly disdain for individuals with substance use disorder. Diligent work on the part of several coalitions, foundations, agencies, Madison County State's Attorney, and Madison County Coroner have helped to reduce that stigma somewhat. More work needs to be done, but we are seeing an increase in the referrals for treatment from police departments in the two county area.
4. Other community partners have emerged with requests for training and educational materials. These include libraries, hospitals, local school districts, and other groups.

SWOT Analysis

The ROSC Council conducted an analysis of the Strengths, Weaknesses, Opportunities, and Threats (SWOT) in regards to communication efforts in Madison and St. Clair Counties. While the full SWOT analysis was included in our Outreach and Communication Plan, some of the points are relevant to community readiness as well.

Strengths:

- There are high levels of individuals in the communities engaged in working on the issue
- There are several drug prevention coalitions
- The Metro East area is rich in opportunities for communication (newspapers, TV stations, etc)
- Capacity rich (lots of agencies engaged, lots of funding opportunities)

Opportunities:

- We can expand community knowledge regarding recovery opportunities
- Improving communication efforts with physicians and other medical personnel could have a huge impact on our work
- We have the opportunity to expand individual's knowledge regarding substance use disorder

- We have the opportunity to reduce stigma

It is our intent to develop outreach and communication materials to continue to engage community members in the work of our group. We feel strongly that our community members will support our efforts once they are fully apprised of the benefits of a community who supports members who are seeking or maintaining recovery. True recovery happens in communities, and we will seek to build a community system that supports recovery.

Technical Assistance Priorities

Part of the value in a ROSC Council comprised of members from many different sectors of the community is that they all come to the table with varied perspectives but a similar desire to help create change. With those different perspectives comes a need for training so that all members are aware of the breadth and scope of the issue and the possible strategies to employ. We anticipate that training will be needed in the following areas:

- Defining recovery.
- Assisting in reducing stigma associated with SUDs.
- Training to Criminal Justice System on recognizing COD.
- Stories of hope from other communities in their work to create and support an ROSC.
- What an ROSC is and what their role in it might be.