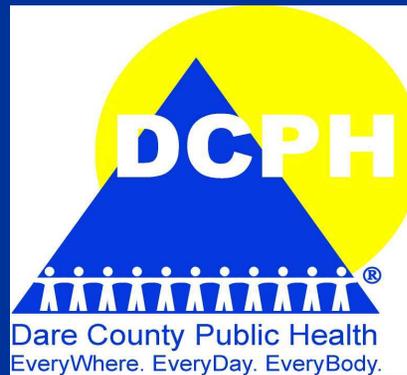


# Dare County Substance Abuse Demonstration Project

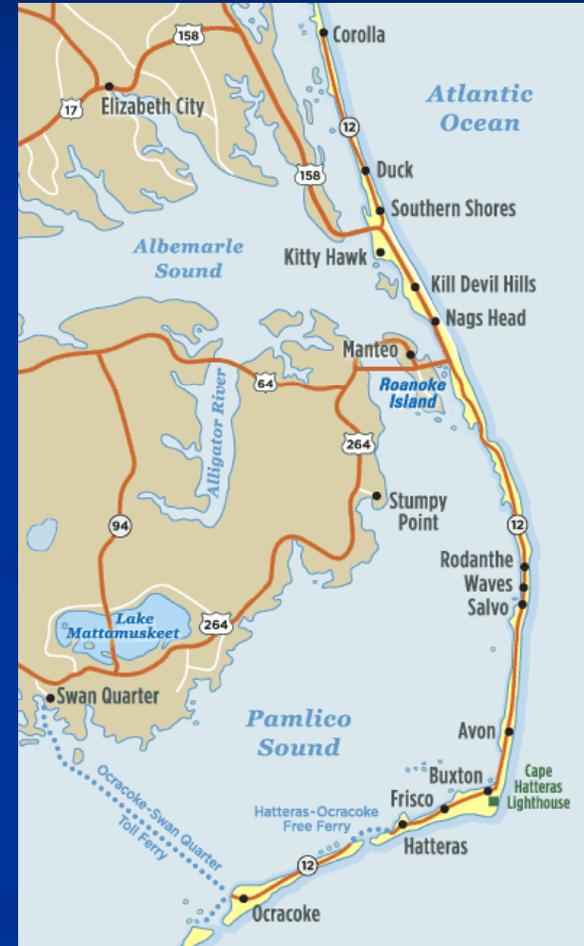
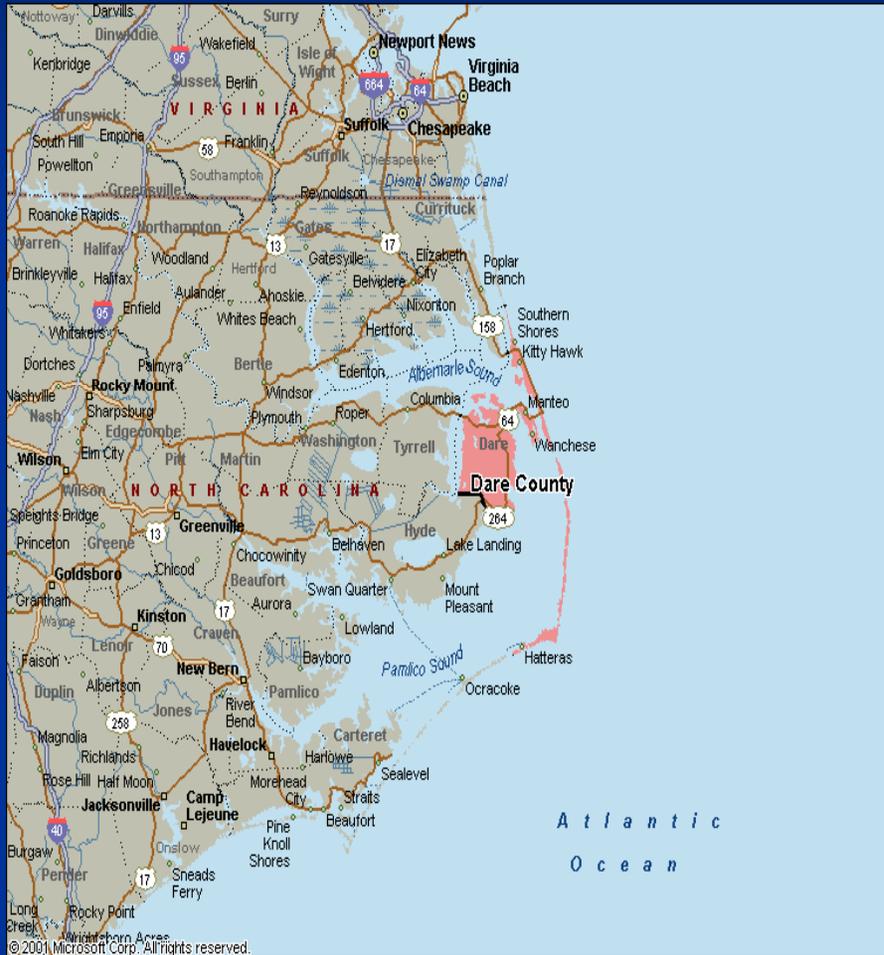


Anne Thomas, Health Director  
Dare County Department of Public Health

# Presentation Overview

- Background/History
- Needs Assessment
- Dare County Substance Abuse Demonstration Project Plan
- Project Progress
- Keys for Success

# Dare County



# Project Development Overview

- Community Call for Action
  - 2002 Healthy Carolinians Community Health Assessment
    - Dare County Substance Abuse Task Force
    - Dare Coalition Against Substance Abuse
  - April 2006 Community Meeting
    - Public outcry
    - Overdoses from oxycontin, methadone, and heroin (some fatal)
    - Alcohol related motor vehicle accidents and deaths
    - Social, economic and health problems and issues from alcohol and drug abuse
    - Dare County Department of Public Health asked to take the lead in developing a comprehensive plan to address substance abuse

# Project Development Overview

- Substance Abuse Needs Assessment
  - Meetings with Stakeholders and Partners
  - Data Collection
  - Focus Groups
  - Surveys
  - Onsite Observations: law enforcement, medical services, self help
  - Assessed available resources and identified gaps

# The Problem:

## Dare County Arrest Data 2005

Dare County arrest statistics illustrate that alcohol and other drug issues facing Dare County residents are significantly higher than the national estimates:

### Adolescent Data

- 12 adolescents 15 years old or younger were arrested for drug offenses
- 746 young people ages 16-20 were arrested for alcohol offenses
- 294 young people ages 16-20 were arrested for drug offenses
- **1040 total arrests for young people ages 16-20 for alcohol and other drug offenses**

### Adult Data

- 654 individuals over the age of 21 were arrested on drug offenses
- 572 individuals over the age of 21 were arrested on alcohol offenses
- **1226 arrests of individuals over the age of 21 for AODA offenses**

Residents accounted for 53% of drug related arrests

# The Problem:

## NC Medical Examiner Data, 2003 Alcohol and Other Drug Related deaths Dare County vs. State totals

- Suicides: 50% of Dare County suicides were alcohol and/or drug related as compared to 26% of the state suicides
- MVA s: 40% of Dare County fatalities from car accidents were drug and/or alcohol related as compared to 21% of the state MVA fatalities
- Drowning Deaths: 33% of Dare County drowning deaths were drug and/or alcohol related as compared to 18% of the state drowning deaths
- 100% of Dare County homicides were drug and/or alcohol related

# The Problem: Adolescents and drugs

Source: 2005-2006 School Violence Report  
Dare County Schools

- The 2005-2006 report showed Dare County Schools had a higher rate (4.8 per 1000 students) of substance abuse violations than 70% of schools in the state
- Dare County Schools averages a 6.1% positive result rate on their random drug test screens, which is more than double the 2-3% rate reported by most school systems with similar testing policies

# The Problem: Adolescents and drugs (continued)

Search Institute 2005 Profile of Student Life Surveys

According to student self report surveys the rates of substance use are alarmingly high:

- 23% of 8<sup>th</sup> graders reported alcohol use (17% national average)
- 63% of 12<sup>th</sup> graders reported having used marijuana (45% national average)
- Average age when local 12<sup>th</sup> graders reported first getting drunk was 13 or 14
- The average age for middle school students who reported having gotten drunk was 11.5
- 29% of 12<sup>th</sup> grade students reported that their parents would not be upset at all or only a little upset to learn that he or she was drinking (18% of 11<sup>th</sup> graders, 15% of 10<sup>th</sup> graders)

# The Problem:

## Gaps in Services - Adolescents

| ASAM Levels of Care | Services  | Current Services existing in Dare County   |
|---------------------|---|--|
| Level .05           | Early Intervention                              | Random Drug Testing in schools/high school guidance counselors   |
| Level I             | Outpatient Individual and Group Counseling      | Scheduled as needed by Albemarle MH and available through private practice venues of which 3-5 exist in the county |
| Level II            | Intensive Outpatient Program                    | Not Available  |
| Level III           | Residential/Inpatient Treatment                 | Not Available  |
| Level IV            | Medically Managed Intensive Inpatient Treatment | Not Available  |

# The Problem: Gaps in Services - Adults

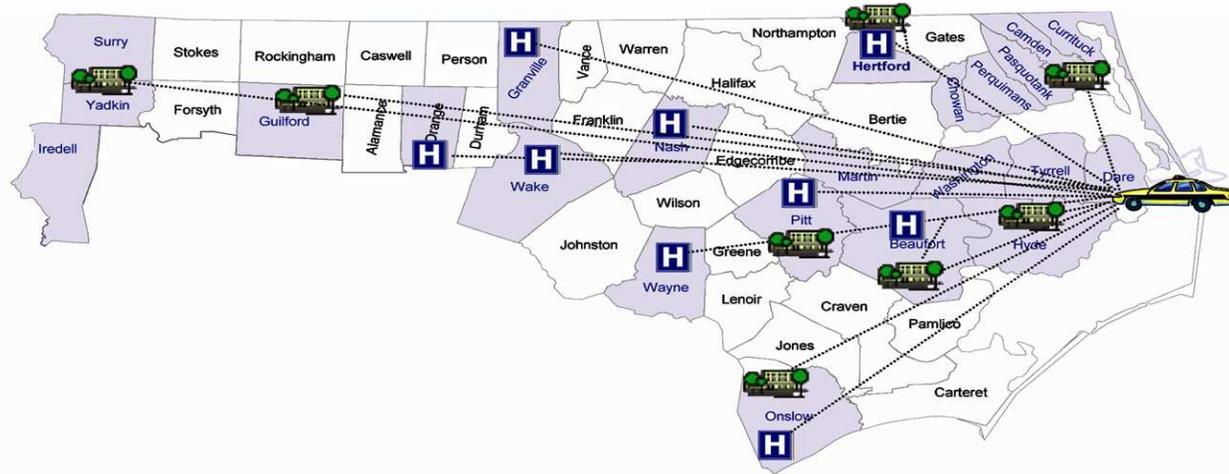
| ASAM Levels of Care | Services  | Services existing in Dare County  |
|---------------------|---|---|
| Level .05           | Early Intervention                              | DWI Assessments Only<br>-----<br>Part-time TASC Assessments/Dare County Court System  |
| Level I             | Outpatient Individual and Group Counseling      | Scheduled as needed by Albemarle MH and available through private practice venues of which 3-5 exist in the county<br>-----<br>Avon Court/Ordered/DWI Group<br>M-9:30 -11:30 am<br>-----<br>Nags Head DWI/SA Group<br>M 5-7pm and F 8-10 am |
| Level II            | Intensive Outpatient Program                    | Not Available   |
| Level III           | Residential/Inpatient Treatment                 | Walter B. Jones ADATC-Greenville, NC  |
| Level IV            | Medically Managed Intensive Inpatient Treatment | Not Available   |
| Detoxification      | Social Setting-Medical Detoxification           | Walter B. Jones ADATC-Greenville, NC  |

# The Problem:

## Drug and Alcohol Issues facing Dare County as reported by Stakeholders and Surveys

- Drug and alcohol use and abuse are prevalent throughout our community and exists within all age ranges
- Prevention resources need to be increased in schools and our community
- Access to local treatment is difficult to obtain; some treatment (i.e. detox and residential rehab) is not available locally
- It is very challenging for individuals to get re-connected to the community post substance abuse treatment
- Many people are unaware or unwilling to accept there is a substance abuse problem in Dare County
- Our community has a culture of tolerance
- Many people try to “blame” or identify the problem as a “tourist issue”
- Drugs used/abused in our community are: cocaine/crack, methamphetamine, marijuana, heroin, alcohol, and prescription drugs
- Transportation is a barrier to accessing SA services

## Dare County Sheriff's Department Substance Abuse and Mental Health Out-of-County Transport Cases July 2005-June 2006



|   |            |
|---|------------|
| • Total Number of Total Transports Outside County   | = 240      |
| • Total Number of Transports Inside County          | = 29       |
| • Estimated % of Substance Abuse Transports (85)    | = 35.6%    |
| • Total Hours Transporting Out of County            | = 2,036    |
| • Total Overtime Costs for Out-Of-County Transports | = \$47,269 |

# Impact of Substance Abuse



Robert P. Trivette  
Associate,  
Vandeventer Black

- “I was a prosecutor in Dare County from 1991-2003, and during that period felony drug prosecutions dramatically increased. By the time I left, I would estimate drug cases accounted for about 85% of the felony cases I handled.”
- “I became very frustrated as a prosecutor in handling drug cases. The same people with substance abuse problems were committing the same crimes over and over, and the local treatment options were very limited.”
- “You are not going to win the ‘war on drugs’ just by sending people to jail. If you don’t work on the “demand” side of the problem by providing high quality treatment options, the crime problem is not going away.”
- “We spend an enormous amount of taxpayer dollars investigating and prosecuting drug cases. I believe we would save tax dollars by providing good treatment options. If you don’t stop the cycle of use and abuse, crime will just continue”.

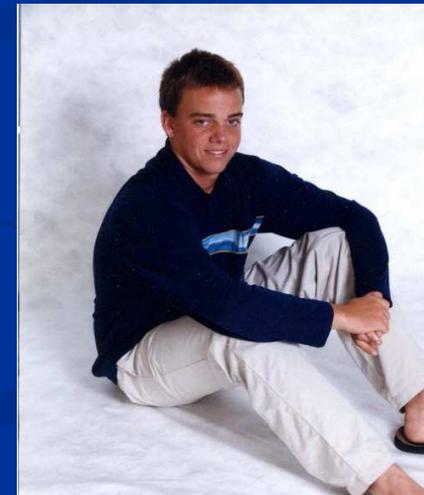
# Testimonial

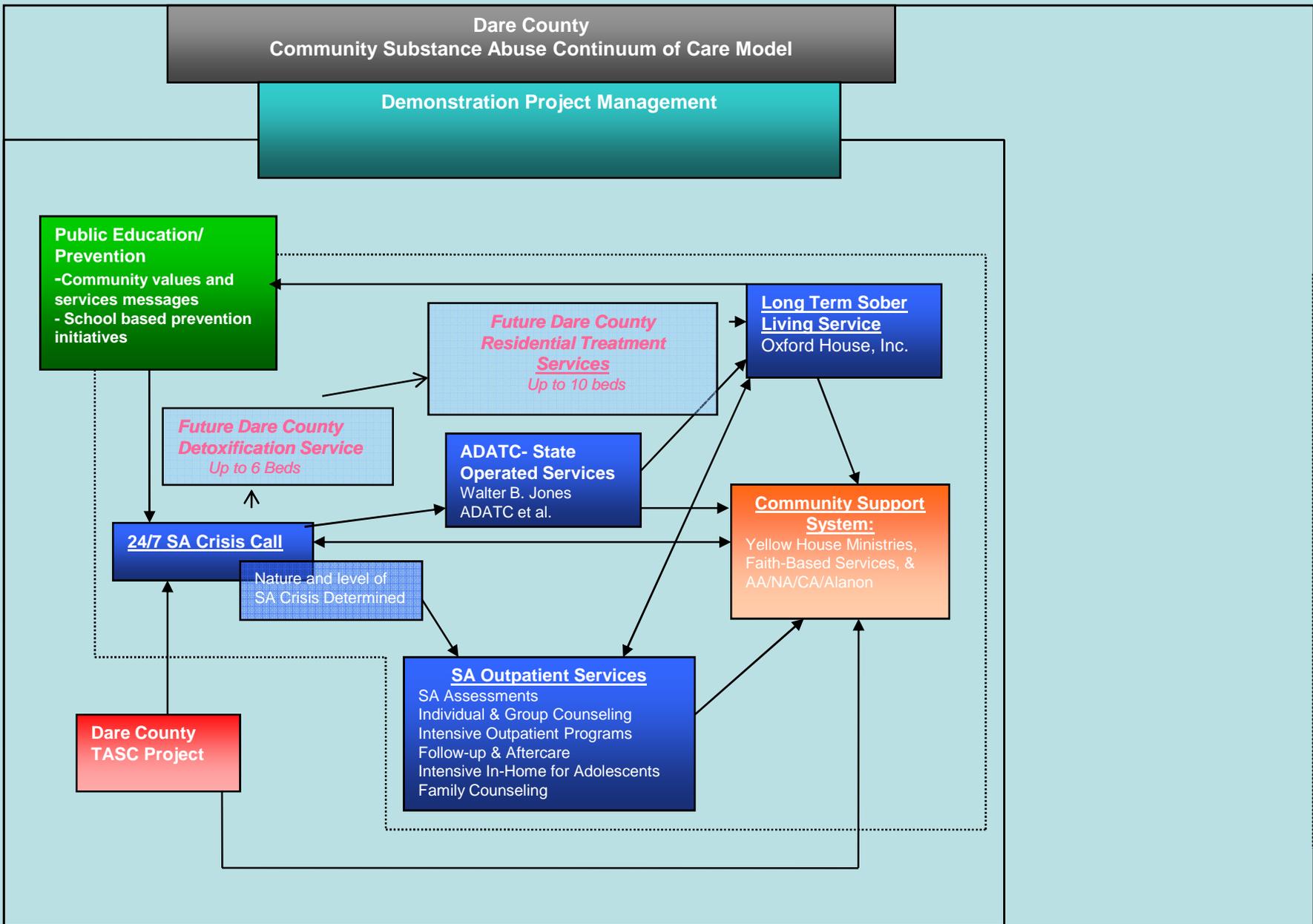
## Bonnie



# Testimonial

Jackie (speaking), mother of Chaps (pictured)





# The Plan

Build an effective substance abuse prevention/intervention/treatment system for Dare County through a demonstration project which includes:

- **Prevention/Public Education Services for Adults and Adolescents**
  - Implement evidence based prevention programming
  - Implement a community prevention, education, and awareness campaign
  
- **Intervention Services for Adults and Adolescents**
  - Implement a 24/7 Substance Abuse Helpline
  - Initiate adolescent services to include 2 levels of outpatient services, including school based counseling with individual/family counseling and clinical services
  - Alcohol and drug assessment services readily available
  - Full time TASC case manager for Dare County
  - Implement SBIRT

# The Plan (continued):

- **Dare County Treatment Services for Adults**
  - **Outpatient Services**
  - **Detox Services**
  - **Short term Residential Treatment Services**
  
- **Training development/workforce issues**
  - Training to be provided for existing and new professionals
  - Collaborative educational initiative to be developed to address workforce development

# Project Progress:

## Prevention/Public Education:

- In collaboration with Dare County Schools, we selected and began implementing Positive Action
- Positive Action is an evidence based program that teaches success and happiness through a comprehensive, coherent approach to academics, behaviors, and character.



# Project Progress

## Public Education and Awareness (continued):

- Hosted first annual Dare County Recovery Month celebration in September 2007 and second annual celebration in 2008
  - Members of the planning committee include representatives from 12 step groups, private counselors, faith based community, and business community
- Ongoing Community Awareness Campaign
- Developing a website which will promote the new substance abuse services, helpline number, tips for parents and people suffering from addiction, as well as links to other community support services
- Working with faith based community on prevention programs

# Project Progress

## Intervention Services

- Full time TASC (Treatment Alternatives for Safer Communities) case manager began in November 2007
- 24/7 Substance Abuse Helpline available
- Preparing to pilot SBIRT and working on Safer Opioid Prescribing Seminar for Physicians and Pharmacists

# Project Progress:



# Project Progress:

## Treatment Services:

### New Horizons - Outpatient Services:

- Subcontracting with PORT Human Services
- Hired 7 staff (6 counselors and 1 support staff; 3 counselors will work in clinic and 3 will be community based)
- Began serving clients on June 16, 2008
- Services include assessments, individual and group counseling and family services
- Served 117 clients to date
  - 100 adults/17 adolescents
  - 40% self referred; 25% DSS referred; 10% TASC referred
  - 76% retention rate

# Project Progress:

## Workforce Development

- Partnered with College of the Albemarle (COA), Dare Campus, to begin substance abuse continuing education program (taught 4 courses and 23 students)
- Partnered with UNC-Chapel Hill, and COA to pilot the Peer Support Education Program (12 students)
- Hosting trainings in collaboration with UNC-Chapel Hill for Providers in the community (58 Providers)

# Progress:

## Transition to the Community and Recovery Support

Partnerships with  
other community organizations to facilitate seamless transitions to the  
community and ongoing recovery support

- AA
- NA
- Al Anon
- Dare CASA
- The faith based community
- Yellow House Ministry
- The Oxford House

# Next Steps

- Additional Services
  - Intensive Outpatient
  - Detox – 6 bed facility
  - Short Term Residential Treatment – 10 bed facility

# Support:

- The Dare County Commissioners have allocated \$500,000 toward the development of substance abuse services in Dare County.
- The North Carolina Division of MH/DD/SAS allocates funds toward the demonstration project's services in Dare County and are demonstrating their commitment to the project through ongoing technical assistance and consultation as needed

# Keys to Our Project's Success:

- Verifiable need
- Passionate community – who is ready for change
- Public Health Approach
- Strong collaborations: schools, law enforcement, faith based community, recovery community, TASC, community college, etc.
- Political support
- Technical support
- Open-mindedness and flexibility

Questions ?