



HEALing Communities Study

April 11, 2021

HCS Community Health Campaigns – Shifting from Engagement to Action

3rd Annual NIH HEAL Initiative Investigator Meeting

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Acknowledgments – HCS Communication Work Group

Boston Medical Center

- Katherine (Casy) Calver
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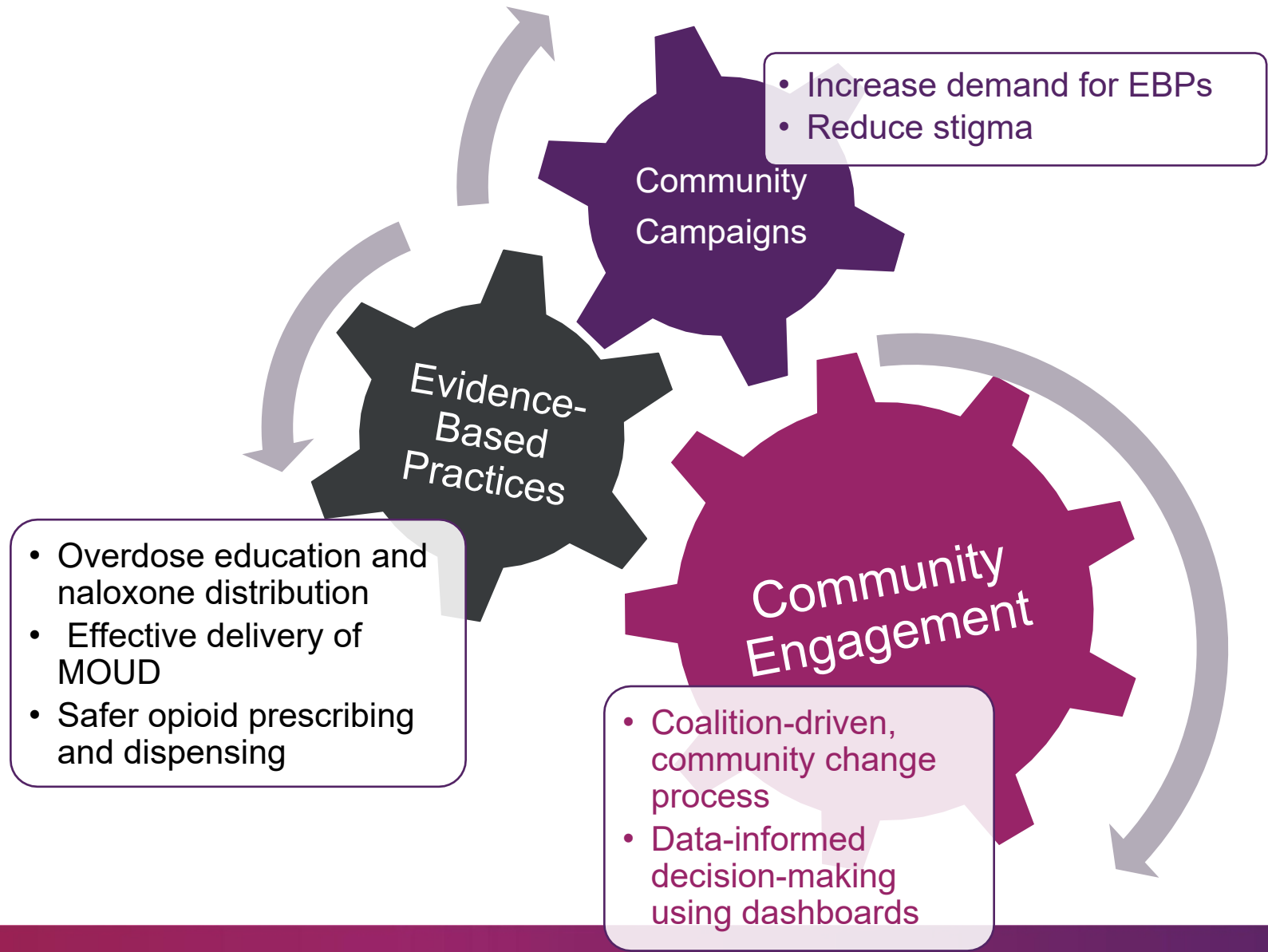
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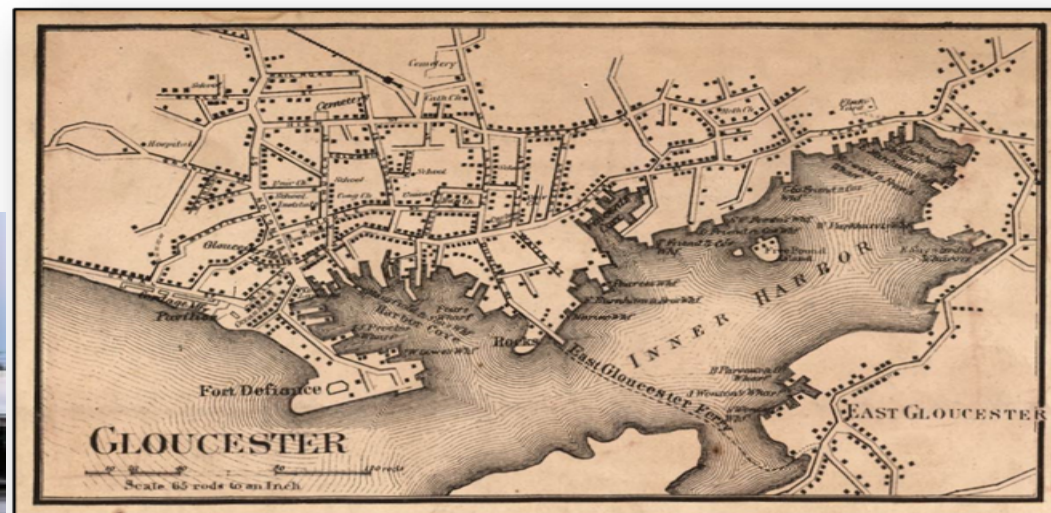
SAMHSA

- Carter Roeber

Communities That Heal (CTH) Intervention Framework



Gloucester, MA: Provider on the Pier



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Gloucester, MA: Problem and Solution

Fishing community is an underserved high-risk population

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graph TD; A[Fishing community is an underserved high-risk population] --> B[24% of opioid overdose fatalities among Gloucester residents from Jan 2017 - Jun 2021 were employed in the fishing industry]; B --> C[Lack of insurance due to seasonal work]; C --> D["Provider on the Pier" – a basic medical clinic, specializing in MOUD and OEND, to serve the fishing community];
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24% of opioid overdose fatalities among Gloucester residents from Jan 2017 - Jun 2021 were employed in the fishing industry

Lack of insurance due to seasonal work

“Provider on the Pier” – a basic medical clinic, specializing in MOUD and OEND, to serve the fishing community



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Part of the fishing industry?
If so, you may want to check out:

Gloucester Addiction Coalition's

Provider on the Pier

MEDICAL CLINIC

- Basic medical evaluations
- Connections to primary care providers
- Enrollment in medication for opioid use disorder
- HIV/Hep C/STI testing
- Naloxone/harm reduction services
- Insurance enrollment
- Connection to wraparound services

**Brought right to you every Friday
at the Harbormaster's Office
from 10am-2pm**

19 Harbor Loop #2
Gloucester, MA



Made possible by:

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Massachusetts

Beth Israel Lahey Health
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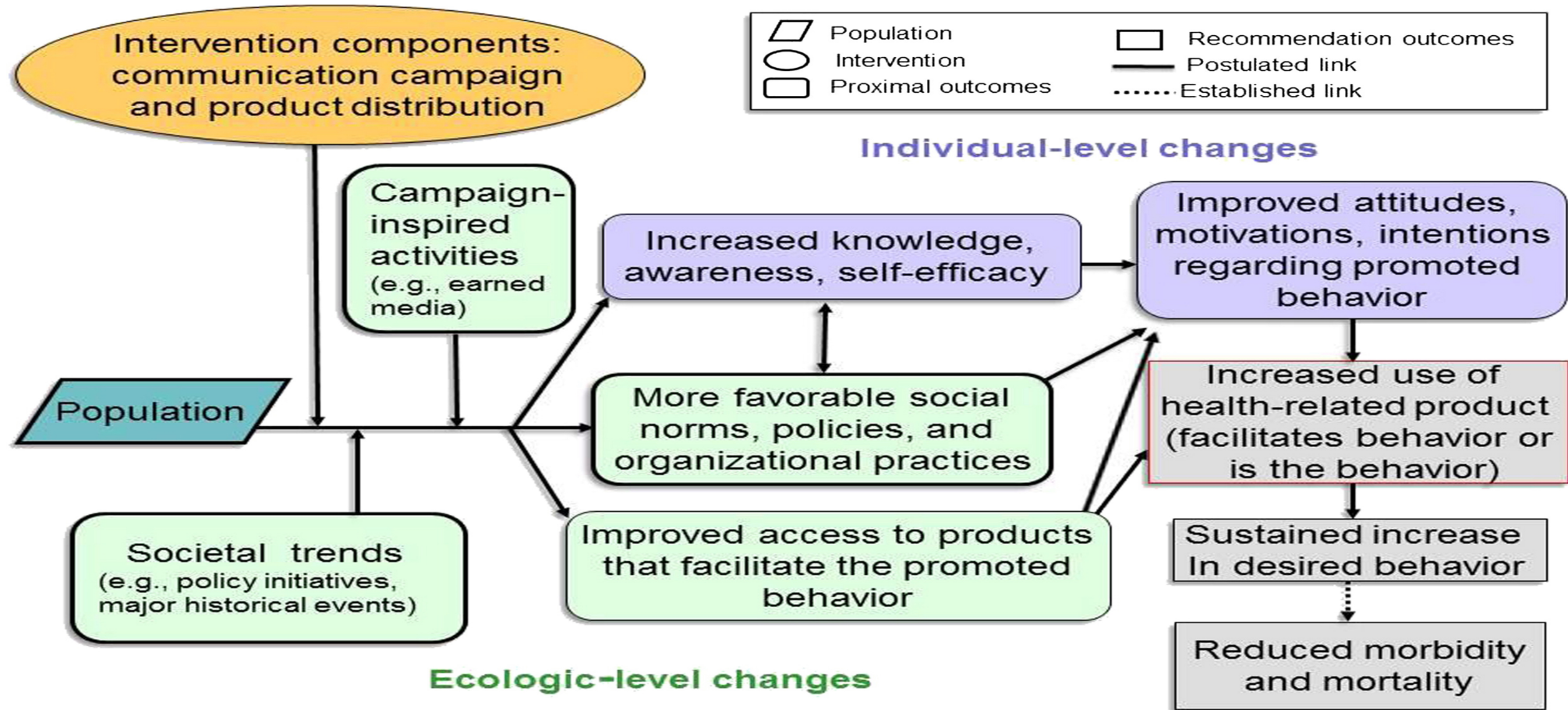


EBP Promotion

- **Focus:** Fishing community
- **Strategy:** Sublocade® promotion
 - CATA bus ads
 - Flyers in Harbormaster's office and pier
 - Local images including providers participating in Provider on the Pier



From Awareness and Information to Changes in the Community



HCS Campaigns

1. Naloxone
2. Stigma
3. Seek MOUD Tx
4. Stay in MOUD Tx and Recovery

Develop a cohesive set of communication objectives, priority groups, strategies and tactics that can be applied across all communities in the HCS

Integrate approaches to reduce stigma

Provide message guidance documents and sample assets that can be tailored to unique characteristics of each community

Enhance community engagement and the adoption of evidence-based practices (EBPs) in each community

HCS Community Evaluation Questionnaire (CEQ) Overview

- Recruitment through Facebook advertising in HCS communities.
- The preliminary results reported here are aggregated across all Wave 1 communities for more reliable estimates and an overall sense of campaign impacts on CEQ variables.
- Because only residents in Wave 1 communities who responded to survey recruitment advertisements are represented in the CEQ, these results should not be considered as generalizable to all residents across HCS communities.

Wave 1 Comparisons: CEQ1 | CEQ4

CEQ1 March 30 – April 22, 2020 (pre-Naloxone campaign)

CEQ4 June 14 – July 21, 2021 (post-Stigma and Seek MOUD Tx Campaigns)

Survey Item	CEQ Wave	No	Yes	Pvalue
In the past month, have you considered carrying (or begun to carry) naloxone (more commonly known as Narcan), the medication that can reverse an opioid overdose, when out in public?	1	927 (80.7%)	222 (19.3%)	0.0721
	4	341 (76.6%)	104 (23.4%)	
In the past month, have you made an effort to learn more about medications for treating opioid use disorder (methadone, buprenorphine (Suboxone®), or naltrexone (Vivitrol®))?	1	942 (82.1%)	206 (17.9%)	0.0819
	4	345 (78.2%)	96 (21.8%)	
In the past month, have you suggested to someone that they or their loved one seek treatment for opioid addiction/opioid use disorder?	1	918 (79.8%)	232 (20.2%)	0.0099*
	4	328 (73.9%)	116 (26.1%)	

CEQ Knowledge of Resources

Survey Item	CEQ Wave	Definitely Yes	Probably Yes	Probably Not	Definitely Not	Pvalue
Do you know where to find treatment for opioid addiction/opioid use disorder?	1	338 (29.3%)	442 (38.4%)	251 (21.8%)	121 (10.5%)	0.0078**
	4	164 (36.6%)	159 (35.5%)	72 (16.1%)	53 (11.8%)	
Do you know where to find a healthcare provider of medications for the treatment of opioid addiction/opioid use disorder, such as methadone, buprenorphine, or naltrexone?	1	304 (26.4%)	411 (35.6%)	274 (23.8%)	164 (14.2%)	0.0669
	4	146 (32.6%)	136 (30.4%)	104 (23.2%)	62 (13.8%)	

Selected CEQ Stigma Items

Survey Item Label [NOTE: 1 = Strongly Disagree, 7 = Strongly Agree]	CEQ Wave	N	Mean	Standard Deviation	Pvalue
Once you have an opioid addiction/opioid use disorder there is not much you can do about it.	1	1155	4.52	0.74	0.0346*
	4	447	4.43	0.82	
Most people in my community believe that it is better to offer drug treatment as an alternative to incarceration for people with opioid use disorder who are charged with non-violent crimes.	1	1152	4.83	1.51	0.0152*
	4	447	5.03	1.49	
Most people in my community think less of a person who has been in treatment for substance use.	1	1154	4.89	1.43	0.4184
	4	448	4.82	1.48	
Most people in my community believe that medications for opioid use disorder such as methadone and buprenorphine are just replacement drugs and not real treatment.	1	1149	4.52	1.44	0.5469
	4	446	4.57	1.59	

Conclusions

- Communication campaigns can reduce stigma and support EBP adoption and use
- Build communication planning into community interventions from the beginning
- The importance of customized, localized materials that consider equity
- Understand local cultural stigma and barriers

