

# Cecil County Opioid Overdose Key Informant Interview Results

January 20, 2021

# Introduction

- Cecil County Health Department is seeking to develop a county-specific strategic plan for a coordinated overdose response that will provide the local opioid intervention team with a blueprint to guide its work on this issue over the next several years
- As part of this comprehensive review process, key informant interviews were conducted with a variety of stakeholders in the county including representation from county government, nonprofit organizations, treatment and counseling centers, the school system, and participants of the local harm reduction program
- The purpose of the interviews was to gain feedback on the strengths and needs of the county and suggestions for the future

# Methodology

- Fifteen key informant interviews were conducted between October 23, 2020 and January 11, 2021
  
- The following stakeholders were represented in the interviews:
  - ADRC Peers at Cecil County Health Department
  - Bodhi Counseling
  - Cecil County Department of Community Services
  - Cecil County Public Schools
  - Cecil County Sheriff's Office
  - County Executive Office
  - Elkton Treatment Center
  - Harmony participants
  - Meeting Ground-Mary Randall
  - Project Chesapeake
  - Voices of Hope
  - Youth Empowerment Source

# Methodology

- One-hour, virtual interviews were conducted individually by Sonia Pandit (external consultant) and covered the following topics:
  - Effect of opioid use disorders and opioid overdoses on Cecil County
  - Reasons why Cecil County has higher opioid overdose death rates than the state average
  - Current programs, services, and policies that focus on preventing or treating opioid use disorders, what they are doing well, and what should be changed or improved
  - Programs, services, and/or policies that are missing
  - Data each organization collects related to opioid use disorders and overdoses and how they are utilized
  - Opportunities for improving data collection and utilization
  - Organizations or agencies working to address opioid use disorders or overdoses and the extent of their collaboration
  - Opportunities for increased collaboration for county-wide planning and response to opioid use disorders and opioid overdoses

# Methodology

- Interview notes were comprehensively coded using Atlas software and rigorous qualitative thematic analyses were conducted
- In the slides that follow, themes are presented in the order of most frequently shared by interviewees to least frequently shared by interviewees
- The number of respondents who shared the theme in their interviews is indicated by the number in the parentheses following each theme

# Key Findings Outline

1. Effect of opioid use disorders and opioid overdoses on Cecil County
2. Populations most impacted by opioid use disorders and opioid overdoses in Cecil County
3. Factors that contribute to opioid use disorders and overdoses in Cecil County
4. Existing programs, services, and policies in Cecil County
5. Impact of COVID-19 on opioid use disorders and opioid overdoses in Cecil County
6. Perceived county-wide collaboration
7. Most frequently shared challenges and barriers
8. Most frequently shared recommendations

# 1. Effect of opioid use disorders and opioid overdoses

Respondents shared that opioid use disorders and opioid overdoses most impact:

- ▣ **Families (8)**

Families broken apart; children experience trauma and are orphaned by overdose, left with grandparents, or abandoned

- ▣ **First responders (3)**

First responders are stretched thin and fatigued

- ▣ **Economy (3)**

Employment (families miss work), increased need for medical services

- ▣ **Schools (3)**

# 1. Effect of opioid use disorders and opioid overdoses (continued)

Respondents shared that opioid use disorders and opioid overdoses most impact:

- ▣ **Hospital (2)**

Hospital is at full capacity between COVID-19 and overdoses, jaded

- ▣ **Everyone (2)**

Many have friends or family that have been impacted, see it everywhere in social media

- ▣ **Other: systems are taxed, communities (neighbors dying), detention center, social services, housing, peers (takes an emotional toll)**



## 2. Populations most impacted by opioid use disorders and opioid overdoses

Respondents shared that the populations most impacted are characterized as:

- ▣ Income/geography:  
**Low-income or lower income neighborhoods** in Elkton or Northeast such as Lakeside or Hallingsworth Manor (5)
- ▣ Age  
**16-35 years** (4), 25-50 years (3), varies (3)
- ▣ Race  
**White** (4), but seeing more African Americans seeking services (1)
- ▣ Gender  
**Male** (2), 50% female and 50% male (1), varies (1)
- ▣ Other  
**People experiencing homelessness** (2), 2-3 known students in the last 3 years (1), high school drop out or GED equivalent (1), unemployed (1)

### 3. Factors that contribute to opioid use disorders and overdoses

Respondents shared that the factors that contribute most to opioid use disorders and overdoses include:

- ▣ **Location** of Cecil County near I95, Philadelphia, and Baltimore (11)
- ▣ Cecil County is a **high drug trafficking area** (6)
- ▣ Opioid use is a **generational issue** (6)
- ▣ **Changing drug supply** (4)
- ▣ Cecil County is **small and rural** with limited entertainment (4)
- ▣ **Mental health** (3)
- ▣ **Prescription pain pills** (3)

### 3. Factors that contribute to opioid use disorders and overdoses (continued)

Respondents shared that the factors that contribute most to opioid use disorders and overdoses include:

- **Abundance of resources, family setting, and not-in-my-backyard approach** in Cecil County attracts high-risk populations including people experiencing homelessness (3)
- **Peer pressure** (2)
- **Laws for first offenses, probation, and parole are less strict** in Cecil County (2)
- **Poverty, income disparity** in Cecil County (2)
- **Functional addiction is accepted** in Cecil County (2)
- **People use alone or refrain from calling for help** due to fear of legal ramifications (2)

## 4. Existing programs, services, and policies in Cecil County

Respondents most frequently shared the following existing programs, services, and policies:

### Prevention

- ▣ Youth Empowerment Source (9)
- ▣ Drug Free Cecil (5)
- ▣ Handle With Care (4)
- ▣ School System (4)
- ▣ DARE (3)
- ▣ Youth Leadership Summit (2)
- ▣ Drug take back (1)

### Treatment/Other

- ▣ Cecil County Health Department (12)
- ▣ Voices of Hope (11)
- ▣ Ashley Addiction Treatment (10)
- ▣ Medication Assisted Treatment (10)
- ▣ Project Chesapeake (8)
- ▣ Individual physicians (7)
- ▣ Peers (6)

## 4. Existing programs, services, and policies in Cecil County (continued)

Respondents most frequently shared the following existing programs, services, and policies:

### **Treatment/Other**

- ▣ Recovery Centers of America (6)
- ▣ Narcan distribution (5)
- ▣ Serenity Health (5)
- ▣ Union Hospital (5)
- ▣ Jail system, detention center, drug court, Department of Juvenile Services (5)
- ▣ Elkton Treatment Center (4)

### **Treatment/Other**

- ▣ Law enforcement (4)
- ▣ First responders, EMS, paramedics (3)
- ▣ Harm reduction/Harmony (3)
- ▣ LOFRT (3)
- ▣ Recovery houses (3)
- ▣ Treatment centers (3)
- ▣ Division of Community Services (2)

## 4. Existing programs, services, and policies in Cecil County (continued)

Respondents most frequently shared the following existing programs, services, and policies:

### **Treatment/Other**

- ▣ Core Services Agency/Advisory Council (2)
- ▣ Crisis response program (2)
- ▣ Domestic violence shelter (2)
- ▣ DAAC (2)
- ▣ Mary Randall (2)
- ▣ Mobile Crisis (2)

### **Treatment/Other**

- ▣ North Bay (2)
- ▣ On Our Own (2)
- ▣ Department of Social Services (2)
- ▣ Upper Bay (2)
- ▣ Outpatient treatment centers (2)

## 5. Impact of COVID-19 on opioid use disorders and opioid overdoses

Respondents shared that the impact of COVID-19 includes:

- ▣ **More overdoses** (5)
- ▣ **Restricted programming** (5)
- ▣ **Less personal connection, less accountability, more isolation** (3)
- ▣ **Limited collaboration** (2)
- ▣ **More displacement in terms of housing** (1)
- ▣ **Overutilization of emergency department, first responders overwhelmed** (1)
- ▣ **No increase in overdoses** (1)

## 6. Perceived county-wide collaboration

Respondents most frequently shared the following thoughts about perceived county-wide collaboration:

- ▣ **Collaboration could be improved (11)**  
Organizations are siloed, poor understanding of who is doing what and each stakeholder's core competencies, need more collaboration instead of competition
- ▣ **Collaboration is working very well (7)**  
Everyone is willing to help, frequent communication, good coordination and cooperation



## 7. Most frequently shared challenges and barriers

Respondents most frequently shared the following challenges and barriers:

- ▣ **Lack of accessible treatment facilities in Cecil County (11)**  
Long wait times, lack of transportation, restrictive hours of operation, unaffordable, short treatment time
- ▣ **Distribution of funding or lack of funding (9)**
- ▣ **Lack of reliable and accessible transportation (7)**
- ▣ **Lack of inpatient treatment, detox, rehab, and/or walk-in crisis center (6)**
- ▣ **Stigma (6)**
- ▣ **Overdose survivor outreach data not timely, complete, or accurate (4);  
releases/HIPPA can be a barrier (1)**

## 7. Most frequently shared challenges and barriers (continued)

Respondents most frequently shared the following challenges and barriers:

- ▣ **Need more diversion programs, treatment in and coming out of jail** (4)
- ▣ **Need more housing** (3)
- ▣ **Restricted hours of service** (2)
- ▣ **Legal requirements to build or adapt facilities (e.g. zoning, licensing)** (2)
- ▣ **Not enough behavioral or mental health providers** (2)
- ▣ **Hospital does not offer treatment** (2)

## 8. Most frequently shared recommendations

Respondents most frequently shared the following recommendations:

- ▣ **Improve collaboration between stakeholders in the county** (10)  
 Better understanding of resources available and referral process via warm-hand offs (4), engage all stakeholders including the faith-based community, police, and doctors (4), need to understand who is doing what and what each stakeholder's core competency is (3), make meetings action-oriented (3)
- ▣ **Need more prevention efforts for children in schools** (7)  
 More recreation options for children, need to go to children in low-income neighborhoods, need a more realistic approach in schools, focus on children of impacted parents
- ▣ **Need access to timely and accurate data** (6)
- ▣ **Need more training in trauma, addiction literacy** (4)
- ▣ **Need to reduce stigma** (3)

## 8. Most frequently shared recommendations (continued)

Respondents most frequently shared the following recommendations:

- ▣ **Need to be able to get people help immediately if they are ready (3)**
- ▣ **Integrated response to overdose (3)**
- ▣ Need accessible treatment options at different levels in the county (2)
- ▣ Need more peers (2)
- ▣ Need more work programs/jobs (2)
- ▣ Need to continue harm reduction (2)
- ▣ Need to invite state/federal government representatives, legislators (2)