

June 2017

Assessing Access to Treatment and Recovery Services for Addiction

Key-Informant Interviews with Treatment and
Recovery Professionals in La Crosse County

La Crosse County Heroin &
Other Illicit Drug Task Force



Executive Summary

Why we conducted these interviews

One of the missions of the La Crosse County Heroin and Other Illicit Drug Task Force (HTF) is to improve early intervention to treatment and recovery services in La Crosse County. The HTF strives to identify and implement community-based strategies to reduce the public health burden of heroin and other illicit substance use in La Crosse County. In order to help the HTF determine the most appropriate strategies to meet this goal, the developers of this report were approached to conduct key informant interviews with providers in the treatment and recovery services realm.

Key informant interviews are a powerful assessment tool when trying to gather the story behind the data. They are most often conducted with people that have extensive knowledge or experience with a particular topic of interest. The questions are open-ended, which allows for richer qualitative information and stories. For this project, interviews were done with providers working in treatment and recovery services that have direct contact with clients seeking help with treatment and recovery.

From these interviews, we hoped to gain a better understanding of the treatment and recovery services available in La Crosse County, as well as some of the gaps and barriers to accessing those services.

Understanding both our community assets as well as the barriers can help to guide the work that the HTF does in the community. It can serve as a starting point to find evidence-based strategies that offer the most impact. Along with existing quantitative data, we hope that this report can be used as a foundation for future policy recommendations and grant opportunities that can help to address the expanding drug problem.

The views and opinions in this report are reflective of the interview participants and do not necessarily reflect the official views of the La Crosse County Health Department. Subsequent mentions of “La Crosse” in this report are a reference to La Crosse County unless otherwise stated.



La Crosse County Health Department Public Health Nurses Sue Bennett, BSN RN Mary Dahlby, BSN RN & Joe Larson, BSN RN conducted the Key Informant Interviews in this Report.

Analysis compiled and written by Joe Larson, BSN RN

All names and organizations of the participants in the key informant interviews are confidential.

The drug problem is not unique to La Crosse County. What does make La Crosse stand out, however, is the level of collaboration and innovation of the community partners fighting this issue.

What we learned

The opioid and other drug epidemic is significantly impacting much of the Midwest. While La Crosse is not unique in its problems, there are some local elements that may contribute to the problem. One of the major themes of this project is the need for community support. Many of the respondents acknowledged that the barriers to treatment and recovery often seem so insurmountable that they dwell more on the problem than the solution. Although community support is improving, there is much more work to do. Change cannot happen without support, and gaining that support requires engagement with local media as well as empowering people to challenge discrimination in social media outlets.

Findings

La Crosse is not unique to the drug epidemic, but it does have contributing factors. One of those factors is that La Crosse is positioned on a major corridor between two large metropolitan areas, and drugs run through the community as a result. Another factor is the cultural acceptance of alcohol. Respondents lamented over the irony of the community's aversion to drug use, but general acceptance of heavy alcohol use and binge drinking. Studies from the United States Department of Health and Human Services have shown a correlation between early alcohol use and later drug use, although the research is still limited.

Collaboration and innovation offer hope for addressing the problem. La Crosse has numerous services and resources available, however accessing them can be difficult. For those that have stable employment, health insurance, reliable transportation and housing, La Crosse has quite a bit to offer for treatment and support. In addition, the availability of support groups is a noticeable strength of this area, and support is slowly increasing. Several of the interviewees with experience outside of the La Crosse area commented that La Crosse seems to be at the forefront of innovating ways to address community problems when compared to other areas around the State.

Resources are available, but the funding to pay for them is severely limited. Interviewees speculated that the lack of funding is a result of several factors. One factor is a need for more compassion, both from the community as well as some health care providers. Another factor is that funds may be misplaced or mismanaged, and competition for limited

funds may obstruct communication and cooperation between treatment providers. Finally, recovery is not a quick and simple process. Treatment can be costly and take months or even years to manage. Like other chronic diseases, maintaining recovery is a lifelong endeavor.

The greatest need for clients in treatment and recovery is a supportive environment. Transitions in and out of treatment are a critical time in a person's recovery. It is unrealistic to expect a recovering drug user to succeed if he or she returns to the same unsupportive and enabling environment they were in before treatment. Support includes tangibles such as safe housing, caring employers, and reliable transportation. It also includes intangibles such as coping skills and education, decreased stigma, and a change in mentality regarding addiction.

What happens next

These interviews are the observations of those that work within addiction treatment and recovery services in the La Crosse Area. While their experience is invaluable to understanding the barriers to accessing treatment and recovery services, it is only part of the story. One of the limitations of this report is that it does not include the direct voices of those currently struggling with addiction. That is an area of opportunity for further research into this problem. For a more complete picture of situation in La Crosse, this report is best used in conjunction with a quantitative data report such as the *Burden of Illicit Drug Use – La Crosse County* written by Joanna Reale, Health Education Intern with the La Crosse County Health Department.

Recommendations from the Interviewees

1. **Change the mentality.** This community needs advocates to change the negative perceptions, or stigmas of addiction. The view of drug users as the problem must change to seeing the drugs as the problem. This is an issue across all sectors, including the treatment providers, primary care, behavioral health, law enforcement, the faith community, and more.
2. **Increase the involvement of primary care providers.** Not every addiction needs inpatient or residential treatment. Some can be prevented with early screening and intervention. Providers must continue to explore the connection between substance use and mental health, and realize that both contribute to overall health. Primary care can and should be one of the early interventions to treatment and recovery.

Support from community members, health care providers, families, and friends are crucial to the success of addiction treatment and recovery.

The La Crosse County Heroin and Other Illicit Drug Task Force continues to be a key advocate for those seeking help for addictions.

3. **Address the social determinants of health to improve chances of recovery.** Although addiction does not discriminate based on neighborhood, income, or education, all of these play a part in the likelihood of recovery after treatment. The ability of a person to return to a supportive, drug-free environment is critical to success in recovery. As a community, we must support those recovering from addiction through safe and affordable housing and stable employment.
4. **Develop more support for the families and loved ones of substance users.** Those closest to a person suffering from addiction also bear a burden of the disease. As a community, we must find a way to make it easier for families and friends to access resources and support for both their addicted loved one as well as themselves.
5. **Advocate for funding.** This includes more than simply requesting more money for addiction treatment. Proper management of existing funds, along with better systems to coordinate and distribute funds appropriately, must be developed and woven into the existing health care landscape. Gaining support from policymakers, however, requires a cost-benefit analysis to demonstrate a strong return on investment. Addiction is not a self-limiting problem, and the financial burden has the potential to overwhelm our community and healthcare system if it remains unchecked.
6. **Promote and advance systems change.** Solving the addiction problem cannot be accomplished through a one-size-fits-all approach. To be successful, a person with an addiction may need to try several treatment options which may or may not include counseling or inpatient care. Success may also be dependent on obtaining support through reliable transportation, safe housing, food assistance, or child care. The importance of an encompassing, collaborative system that can fund and coordinate treatment along with the necessary supportive services cannot be understated.
7. **Don't take on too much at a time.** Solving this problem will not be quick or easy. The strength will come from collaboration and cooperation between all agencies. Fragmentation, however, will continue to spread the limited resources too thin. This problem can be solved, but only with communication and a cohesive effort to take on a limited number of projects at a time.