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Yun-Yun Kathy Chen

University of Vermont

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Awareness and Prevention of Heroin Use in Springfield VT and A Drug Recovery Resource Map of Southern VT

Yun–Yun K. Chen
August/September 2014
Rotation 4
Preceptor: Dr. Dalton
Community Project Mentor: Dr. Barbeau
Problem Identification and Description of Need

- Need for awareness and prevention of opiate drug use
  - What is addiction?
  - How can we make people more aware?
  - How can we prevent it?
  - What are the support systems available? And where are they located?

- Rise in Opiate addiction in VT
  - Since 2000, more than 770% increase in treatment of opiate addiction according to Governor’s Shumlin’s Vermont annual address

- Heroin problem in Springfield, VT
  - On July 11, 2014, there was a shooting incident in Springfield, Vt., that injured a convicted drug dealer and wounded two other people was triggered by a dispute over heroin.
Heroin does not discriminate: it grips the rich and the poor

- Heroin users face intense social pressure to hide their addictions because of the stigma behind heroin use. This makes it extremely difficult for heroin users to seek help and come clean.
- Heroin use alienates the user
- There is also no such thing as an “ex-heroin addict” because heroin addiction recovery is a lifelong battle
Public health cost and unique cost considerations in host community

- Extensive monetary cost to the user
  - According to the Boston Globe
    - Percocet pills can cost $100 a pill, which becomes a very expensive habit; Heroin on the other hand is "vastly cheaper"
    - In Chester, VT, "police raided an apartment" in Oct 2012 "and arrested nine people. They also seized $18,000 in cash, heroin with a street value of $20,000, crack cocaine worth $6,200, and OxyContin pills valued at $4,000"
  - In the documentary, Hungry Heart, one Vermont addict began using drugs in 10th grade, paying $100 a week to $3500 after being introduced to OxyContin. He stole over $20,000 in farm equipment from his own parents feed his addiction.

- Cost to tax-payers – Words from Governor Shumlin of VT
  - "A week in prison in Vermont costs about $1,120, but $123 will buy a week of treatment for a heroin addict at a state-funded center"
  - 80% of VT prisoners have an addiction or are in prison because of their addiction. VT spends more money on prisoners than they do on higher education.

- Growing number of opiate abusers in treatment in VT
  - In 2000, there were 399 people treated
  - In 2011, there were 2944 people treated
Recent Programs Started in Vermont to Help Heroin Users

- **Hub and Spoke System started in 2012**
  - Seven hubs in VT (closest one to Springfield is in Brattleboro) to provide medication-assisted treatment with counseling
  - Spokes are local doctors who treat addicts and link them with medication and counseling
  - With this program, Vermont expects to save $6.7 million dollars in 2015 by treatment through hubs instead of inpatient programs

- **Naloxone Opioid Overdose Prevention Pilot Program started in December 2013**
  - Vermont Department of Health began administering statewide pilot program for giving out emergency rescue kits to people at risk for overdose and family members who can save a life in the event of overdose
  - Antidote used 34 times from Dec 2013 to Jun 2014
  - In 2013, 21 Vermonters died from heroin overdose; 2014 numbers have not yet been released
“There is a big problem with heroin right now. We as providers know how to treat one-on-one but what about the larger community itself, no?”

- Dr. [Name Withheld]
  Family Practice Physician

[The doctor] expressed that it would be a great idea to teach patients and those that accompany them to their appointments more about the heroin problem in the Springfield area. We agreed that a brochure in the waiting area for patients to pick up and read would be an excellent start. [The doctor] would also like to take this brochure to other areas of Vermont. “All that is needed is to change the phone numbers and personnel information in the brochure.”
[Name Withheld] – Director at Turning Point Recovery Center in Springfield, VT
- “The heroin problem in Springfield is huge,” and people need help. He describes the drug problem as being dynamic as the resources and “words used on the streets” to describe the drugs “keep changing.” He supported the idea of making a pamphlet in the office for community members to read and use as a resource for people to understand heroin and get help.
- Also, the neighboring communities “keep talking about consolidating resources, but never seem to find the time. We need a resource guide that can be easily referenced instead of having to call ‘2–1–1’ every time.” The guide should include not only rehab center resources but also help for the homeless, such as shelters and food. “I wish we could print something.”

[Name Withheld] – Community Health Worker at Community Health Team in Springfield, VT
- “I think a resource guide to heroin would be helpful in the office.” He thought it would be good to know the slang used on the streets these days. “We could also use a map that patients can search online and see the connections between each of the community resources.”

[Name Withheld] – Director of Community Health Outreach at Mt. Ascutney Hospital in Windsor, VT
- “I don’t have the time right now to get involved in another project, but I think a map is a great idea.” She forwarded me information about the ideas for making a resource guide map and said “the Governor’s forum in VT has been wanting to do this.” There aren’t enough funds at this time to hire someone to make a map.
Broader awareness and education on heroin in the health care setting

- **Intervention**: Create an educational and interactive pamphlet that can be used in the Family Practice office at Springfield Health Center and beyond in order to encourage dialogue and de-stigmatize heroin use recovery
- **Method**: Tri-fold pamphlet
  - Educational information about heroin, signs and symptoms of use, and current events
  - Interactive portion to allow community members to check off whether or not their friends or family members may have a heroin problem
  - Names and phone numbers of resources will be provided
  - Easily modifiable so that it can be used all around Southern Vermont
Intervention and Methodology

- **Online Drug and Recovery Resource Map of Southern Vermont**
  - **Intervention**: Create a user-friendly map for Southern Vermonters in Windham and Windsor county so that they can seek help in their area and understand what resources are available around them.
  - **Method**: Google maps: Drug and Alcohol Recovery Resources in Southern Vermont
    - **Free**, end user-friendly, and widely accessible by a website link
    - Easily editable by anyone with editing privileges and a google/gmail account
    - Collaborate with [Names Withheld] to gather resources to put on the map

Locations will fall under 3 main categories

- **Substance Abuse Recovery Programs**
- **Housing, Shelters, Food**
- **Community Centers, Mentors, Counselors**

Rough borders of the map will be Windsor and Windham Counties
Results: Educational and Interactive Pamphlet

- Tri-fold pamphlet edited by [Names Withheld]
- Will be placed in the waiting area of the Springfield Family Practice and [Name Withheld]’s second office in Londonderry, VT
- [Name Withheld] will also use it at Turning Point as an educational tool
- Contacts are trained in referrals to Hub and Spoke Programs and Narcan Program (information included)

**Question and Answer**

**What is heroin?**

**What does heroin look like?**

**What are some of the signs and symptoms of someone who is using heroin?**

**Narcan Program in Vermont**

Emergency opioid overdose rescue kits can be provided to people at risk of an overdose, and to family members and others who may be in position to help in the event of an overdose.

Available at HIV/STD Resource Center, Springfield Exchange Program

Serving the White River Junction area, call 802-295-1868 (Monday and Thursday 2:00 – 4:00 pm) or 603-448-8887 for more information.

**What is it? What's the big deal?**

**HERIN**

Understand heroin use and how to help your friends or family members get the local resources they need to get clean.

Fall 2014

**Vermont in the News**

“...what a human being can do...”

Since 2000, Vermont has seen an increase of more than 770% in treatment for opioid addiction...

Governor Shumlin of Vermont

January 2014

“A shocking incident in Springfield, VT, that injured a convicted drug dealer and wounded two other people was sparked by a dispute over heroin.”

Sarah Brabec, Valley News

July 2014

**Have your friends or family members ever had any of the following happen when trying to get help for heroin?**

- Gotten in trouble with the law
- Had problems or changes in behavior at work, school, or home
- Caused physical or psychological damage to themselves or others
- Continued to use heroin even after being aware of these problems

If you checked one or more of the boxes above, your friend or family member may have a heroin problem and needs help to get clean.

Licensed health care professionals and support teams are available in your area right now to help your friend or family member. Please contact one of the follow ASAP for more information where to go from here.

1. Springfield Family Practice, 100 River Street, Springfield, VT 05156 802-385-1000 and ask for Meredith (available Tu, Th, and F) or contact your own primary care doctor
2. Community Health Team, 100 River Street, Springfield, VT 05156 802-386-9898 and ask for Trevor (available M-F)
3. Turning Point Recovery Center, 7 Morgan Street, Springfield, VT 05156 802-866-4668 and ask for Mike (available M-F)

The first step in recovery is admitting that there is a problem.
The goal is for the map link to be placed at public computers in locations such as libraries, that can be easily accessible. It can also be used by health care providers and community team members to find resources close to them.
Evaluation of effectiveness

- Educational and Interactive Pamphlet
  - We will want to look at how many more calls or referrals are made to the resources listed in the pamphlet (Springfield Family Practice, Community Health Team, and Turning Point) either quantitatively or qualitatively
  - [Names Withheld] all have a copy of the pamphlet and will be using them in their centers
    - [Name Withheld] has already shared the pamphlet with colleagues and other recovery centers
  - Encourage patients to pick up a copy and encourage dialogue about the dangers of heroin with their family members or friends

- Drug and Recovery Resource Map of Southern Vermont
  - A preliminary map has been made and has been reviewed by several people including [Names Withheld]
  - Will need to encourage health care providers and community members to link the map on their web pages once to the map has been completed
    - Create a poll to see the usefulness of the map and how often it is used
Limitations

- **Educational and Interactive Pamphlet**
  - It is printed in black and white at this time. It would be more catchy to the eye if it were printed in color.
  - Heroin use is on-going and changing all the time. Slang words will need to be updated periodically as well as resources if they change.

- **Drug and Recovery Resource Map of Southern Vermont**
  - Data input – need more time!
    - This was a much larger project than initially imagined. The foundation of the map has been laid out including the vehicle (google maps), and the format (3 main categories). However, there are lots of locations that still need to be inputted into the map.
    - [Name Withheld] at 2–1–1 who can provide a spreadsheet list of resources that can be put into the map.
  - Maintenance
    - Discussed with [Names Withheld] about maintaining the map. They suggested it be maintained by one person rather than a group of people to avoid backlog; [Name Withheld] has offered to take supervise the project.
    - Need a google/gmail account to edit.
  - Difficult to keep track of how many people are using the Google map because that function is not available by Google at this time.
    - Most end-user friendly but not the most edit friendly.
Recommendations for future interventions/projects

- **Education and de-stigmatization**
  - Continue to use in the office and use in other Family Practice offices in Vermont as well ([Name Withheld] plans to expand use of the pamphlet)
  - [Name Withheld] had talked about “need more money but there’s no money out there for all the programs we want to do.” It will be important to find new sources of funding to help people rebuild their lives and stay sober.

- **Drug and Recovery Resource Map of Southern Vermont**
  - [Name Withheld] at AHEC of Southern Vermont has suggested that AHEC could take over the project, finish the work and maintain it with undergraduate help
  - Continue to add resources to the map
  - Contact [Name Withheld] at 2-1-1 who can provide a spreadsheet list of resources that can be put into the map
  - Stay in touch with what’s going on at the Governor’s Forum (Monthly meetings)
  - Implement on public computers in areas such as public libraries, offices, and family/community centers.
  - Create a poll to evaluate the usefulness of the map, how often it is used, and how it can be changed
I personally spent a few days talking with [Name Withheld] about what is happening at Turning Point, and [he] appears to be very overwhelmed because there are so many users in the area. The next closest Turning Points are in White River Junction, Rutland, or Brattleboro. He cannot hire a full time secretary because there is not enough money. As the director, he spends countless hours dedicated to those in recovery. As an addict in recovery himself, he understands the ongoing struggles of staying clean and sober. He spends much of his weekends and holidays putting on activities and events in the community to prevent recovering addicts who have nothing and no supports stay busy and stay away from alcohol and drugs. I remember him saying, “Holidays are the hardest times for an addict. Everyone has somebody but not an addict. So I hold 24 hour AA meetings at Turning Point on big holidays like Christmas to keep people sober and clean. There’s not a lot of people that can do it so I do it.”

An idea for the future is to send AHEC interns to help Turning Point of Springfield VT organize and staff events. Turning Point is a small organization that helps a very large population that come from the Windsor and Windham counties. Turning Point’s activities and dedication to recovery is needed in order to battle the heroin epidemic and other drug abuse in Vermont.
References


