

# Substance Use in S. St. Louis County

## Supports and Barriers to Recovery - SUMMER 2020

Public Health & Human Services - Duluth Government Services Center 320 W 2nd St, Duluth, MN 55802  
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### Resiliency, workshops, and education

#### Supports:

- Community collaboration, support, and connection
- Department of Human Services (DHS) to expand opioid resources
- Solution-based, innovative community
- More acceptance for recovery

#### Education needs:

- Information sharing for the community and town halls
- Collaboration with work sites
- Mental health awareness for youth and parents
- Parent education on substance use
- Remake police prevention video
- Take a preventative approach to address the social determinants of health
- Add harm reduction, Peer Recovery Support and mental health services to Duluth Police Department opioid resource list online
- Redefine recovery to be inclusive to non-abstinence based recovery
- Remove fear tactics from education

#### Workshops or training that might be helpful:

- Employer toolkit on Substance Use Disorders (SUD)
- "Rising Together as a Community" - Winona training

- Stigma, shame, and language
- Trauma, abuse, mental illness, and resilience
- Naloxone/Narcan training for adults and youth
- De-escalation and clinical training
- Opportunity for those in recovery to share stories
- Public forum in non-stigmatizing community location
- PRS, harm reduction, and mental health workshops
- Medication Assisted Therapy (MAT) for jail workers and general public
- Substance use education (including heroin and opioids) for native populations and youth
- Student-driven high school forum on substances (including injection drugs)
- Diversity training for treatment staff and health care providers (HCPs)
- HCP "boot camps" that provide training for Medication Assisted Therapy (MAT) waivers
- Causes of SUD and co-occurring disorders
- "Addiction as a disease" for biomedical and legal communities

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### Social supports and barriers

#### Needs:

- Better community connections & support
- Greater PRS presence in the community and medical care
- Stigma reduction and awareness
- Transparency and communication of resources to those in need

- Quick response from county opioid resources

#### Barriers:

- Recovery communities are segmented by age and recovery philosophies
- Having to distance from old friends/family

**Supports:**

- Strong recovery community
- Recovery Alliance Duluth (RAD) and other recovery and treatment groups
- Peer Recovery Support (PRS)
- Sober events in Duluth
- Health Realizations meetings (supportive for non-faith based recovery)

- Collaborative culture and supportive community
- Tri-Campus and Community Coalition on College Student Alcohol Drug and Use (T3C)
- St. Scholastica, University of Minnesota Duluth, Lake Superior College
- Develop a program from college student

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**Physical supports and barriers****Barriers:**

- Socioeconomic disparities and extreme wealth inequality
- High rates of poverty and homelessness
- Lack of transportation options
- High demand on tax-funded services
- Presence of used syringes in public areas
- Housing shortage and expensive housing market
- Resources are strained by transient populations
- The increased cost of housing and low wages due to the college population
- Meth is common on reservations & in rural areas
- Duluth is a center for drug distribution (meth and opioid)
- Violence, crime, and petty theft often involve substance use
- Rule 25 assessors do not always follow through on care coordination
- Prevalence of treatment programs that don't accept certain insurances
- Legal framework barriers to getting care
- Resources are not well distributed
- No MAT services in jails

**Other needs:**

- A social and legal infrastructure that supports agency collaboration
- Financial worker engagement to understand the economic burden of SUD
- Jobs and housing for those with criminal records
- More low income and sober housing
- Funding to PRS
- Address race disparity in drug overdose mortality, as well as incidence of Hepatitis C and HIV
- Employer support of SUD resources to employees
- Access to insurance for low income individuals or those with SUD

**Supports:**

- Community connections and support
- Growth in SUD resources
- Specialty and drug courts
- Beautiful surrounding environment and outdoor activities
- Harm reduction services and access

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**Community Involvement and Needs****Barriers:**

- St. Louis County SUD Unit
- Client-centered treatment
- Harm Reduction services such as:
  - Rural Aids Action Network (RAAN), Harm Reduction Sisters (mobile syringe exchange), MAT, naloxone distribution
- San Marco (wet house)

- Social service and government funding
- Positive Community Norms
  - Sober Drink nights
- Opioid detox & mental health services
- Recovery Alliance Duluth and PRS
- Churches United in Ministry (CHUM), Health of People Everywhere (HOPE) Clinic
- Underground railroad for domestic violence

- Fond du Lac recovery resources
- Health realization meetings
- Opioid Response Program - Duluth Police Department (DPD)
  - Contact: Jessica McCarthy
- Community supports: Damiano Center, Teen Challenge, Life House, Safe Haven
- DPD now carries naloxone
- Grace Place (housing for women with SUD)
- Life-team: hospital organization that brings in PRS for individuals in a hospital setting
- The Hills - Youth residential treatment
  - Mental health & delinquent programs
- More PRS and aftercare programming
- Expand specialty and drug courts
- Communicate community resources to healthcare providers
- Expanded options for rural and native residents
- Intensive outpatient with residential support
- Insurance based treatment programs
- A recovery-oriented system of care that connects resources & addresses SUD as chronic issue
- Educate all hospital departments on addiction
- For healthcare providers:
  - Treatment intervention when a physical injury is sustained from substance use
  - Educate the patient on addiction risk post surgery upon discharge
  - Better coordination of outpatient services
  - Follow up with SUD patients instead of deferring them to primary care
  - Not ignoring signs of SUD in patients

### Needs:

- Expanded harm reduction & safe injecting sites
- Non-abstinence/faith-based treatment programs
- Adolescent residential treatment center
- Better community collaboration
- Connect PRS to medical care & hospitals
- More MAT services and connections
- Build stronger partnerships with Duluth Police Department around SUD
- Quicker access to treatment

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## The Bottom Line

- Easily accessible training and education is needed
- Duluth has great recovery resources, but healthcare providers are unaware of them
- Self medicating mental illness and schizo-affective disorders is contributing to SUD
- Fentanyl is present in the community
- SUD is a public health crisis
- There are not enough resources
- Community stigma toward SUD, naloxone, and harm reduction is a prominent barrier
- Stigma exists in healthcare
- Suboxone restrictions are limiting
- Schools and populations are divided

Contact **Stephany Medina** ([medinas@stlouiscountymn.gov](mailto:medinas@stlouiscountymn.gov), 218-725-5144) for resources, or naloxone (Narcan) training.

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