



# Developing a community-trauma informed approach to the opioid epidemic in Ohio

## The need to address adverse community experiences and community trauma

Prevention Institute's Adverse Community Experiences and Resilience (ACE|R) Framework has been eye-opening as a lens that helps communities grappling with the tremendous impacts of the opioid epidemic. With high rates of opioid use disorder (OUD) in Ohio, staff of the Ohio Department of Mental Health and Addiction Services (OhioMHAS), Bureau of Prevention were searching for a strategy to address opioid overdose deaths and prevent the epidemic of opioid and other substance misuse from growing every day in the state. When they came across PI's ACE|R Framework, the concepts of community trauma and building resilience to address harm in the community resonated deeply with what they saw driving the crisis in the state: loss of industry, high rates of unemployment, broken relationships and lack of social supports, social isolation, and a pervasive sense of hopelessness in communities hardest hit. Molly Stone, Chief, and Valerie Leach, Prevention Administrator, OhioMHAS Bureau of Prevention, were interested in

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*"Trauma reaches beyond those who directly witness or experience it, affecting communities on many levels. There's a need for healing and building resilience to prevent future community trauma. We're excited to be a part of this innovative approach to addressing community trauma resulting from the opiate epidemic."*

*– Molly Stone, Prevention Bureau Chief, OhioMHAS*

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seeing if the framework had applicability to developing a prevention plan for the state.

To date, the ACE|R Framework has been used in communities across Ohio to think about and advance actions to build community trauma-informed teams; support the development of local theories of change that

consider community trauma; reduce stigma that arises when issues are seen solely as problems of individual behavior versus through a broader lens of contributing community factors; and to develop a strategic roadmap that considers underlying factors and root causes driving OUD. The 12 participating Ohio learning community partners have expressed overall support for overlaying a community trauma framework into their planning efforts. They have characterized the approach as an effective way to explore community determinants of health that also encourages involvement of partners from a diversity of sectors that impact those factors (i.e. pharmacists, physicians, insurers, emergency responders, employers, faith based organizations, and youth development professionals). Applying the ACE|R Framework allows the use of data to better understand the local community issues and track effectiveness of solutions.

## Enhancing prevention to combat the opioid epidemic

From 2013 to 2015, unintentional drug overdose deaths in Ohio increased from 84 to 1,155. Of the 1,155 fentanyl-related unintentional overdose deaths in Ohio in 2015, only 30 deaths had a fentanyl prescription within 90 days of their death. Fentanyl-related overdose deaths are categorized nationally as prescription opiate deaths even though it is believed that the vast majority of such deaths are the result of illegally produced and trafficked fentanyl.\*

Thanks to funding through the 21st Century Cures Act, Ohio saw an influx of \$26 million in July 2017 to address the opioid epidemic, with \$5 million of that funding directed toward prevention. Up until then, Ohio's model for addressing the opioid epidemic included the development of local coalitions and opiate task forces, with no collective approach to the work. OhioMHAS staff saw an opportunity to move the focus from working with individuals one at a time to a community approach that would have broader and longer-lasting impact, and that would direct efforts toward taking a closer look at community conditions (employment, education, housing) and the systems (business, law enforcement,

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*Working on community determinants is both scary and reassuring. If we don't do this level of prevention, we will always be chasing the problem.*

*– Ohio Community Collective Impact Model for Change Initiative Community Partner*

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government, and health care) that have potentially contributed to the epidemic – and that are critical to helping communities heal and build resilience.

As the state agency explored the ACE|R Framework, they invited Prevention Institute Director, Sheila Savannah to provide a keynote address at the Ohio Prevention and Education Conference in the summer of 2017.

This presented an opportunity to see if the Framework would resonate with a broader group of community stakeholders. The presentation made the case for a prevention and public health approach to the opioid epidemic, and laid out the ways that elements in the sociocultural, physical/built, and economic/educational opportunity environments potentially drive the epidemic – and how these same factors can also serve as protective factors to build resilient communities.

## Using the Adverse Community Experiences and Resilience Framework as a tool for planning

With this new intentional focus on community trauma, OhioMHAS is implementing a collective impact approach to address substance misuse in the state, and consider how elements in the community environment are drivers for substance misuse so that they can be incorporated in county prevention plans. Through its Community Collective Impact Model for Change (CCIM4C) Initiative, OhioMHAS, with support from Ohio University's Voinovich School of Leadership and Public Affairs, has brought together 12 prioritized counties, mostly rural and remote counties comprised of areas of isolation.

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\* Ohio Department of Health (2015). 2015 Ohio Drug Overdose Data: General Findings.



Together, these communities will develop a shared vision and plan for preventing OUD that incorporates a community trauma-informed lens that elevates community strengths, assets and conditions as starting points for reducing OUD. Using Prevention Institute's ACE|R and THRIVE (Tool for Health and Resilience in Vulnerable Communities) frameworks, the communities are focusing on community-level approaches to address and prevent OUD. Through a series of learning community meetings, webinars, and technical assistance opportunities, the learning communities are exploring a unique approach to strategic planning that integrates the ACE|R Framework alongside SAMHSA's Strategic Prevention Framework and the Collective Impact Model, with a focus on developing multi-sector partnerships and collaboration.

## Moving toward community resilience

The ACE|R Framework continues to be seen as a critical framework for moving the state of Ohio towards their ultimate vision for creating a powerful collaborative of diverse, cross-sector stakeholders including community leaders, educators, business, nonprofits, funders, law enforcement, faith leaders, medical community, service providers, youth and other community members who are all working together on linked activities and held accountable by shared goals in order to dramatically improve prevention, treatment and recovery outcomes for children, youth and families in their community.

OhioMHAS is continuing to work with its community partners to develop a planning process steeped in a prevention and public health approach to addressing community trauma. Future efforts will emphasize continued learning and a deeper-dive into how a community trauma lens can be applied specifically in rural, Appalachian areas of Ohio to prevent and reduce OUD.

By addressing the underlying causes of the opioid epidemic – from declining community conditions and frayed social connections to dangerous and irresponsible pharmaceutical industry practices – Ohio can get ahead of the opioid epidemic, prevent new waves of addiction and substance misuse, expand access to treatment for those who need it, and provide the resources that will empower all communities to thrive.

## Authorship & Resources

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Prevention Institute (PI) is working with the Ohio Department of Mental Health & Addiction Services and Ohio University's Voinovich School of Leadership and Public Affairs to develop a public health and prevention approach to curbing the epidemic of opioid, heroin, and other substance misuse in Ohio across urban, rural and Appalachian areas of the state, incorporating PI tools including its *Adverse Community Experiences and Resilience (ACE|R) framework* with other statewide frameworks. This work focuses on building the capacity of the state's grantees to develop comprehensive, data-driven strategic plans across the continuum of care – prevention, treatment and recovery – that are culturally relevant, sustainable, and address factors that contribute to and exacerbate community trauma. This profile shares the state's perspective on the importance of taking a community trauma-informed approach to preventing opioid and other substance misuse in Ohio.

### ABOUT PREVENTION INSTITUTE

Prevention Institute is a nonprofit, national center dedicated to improving community health and wellbeing by building momentum for effective primary prevention. Primary prevention means taking action to build resilience and to prevent problems before they occur. The Institute's work is characterized by a strong commitment to community participation and promotion of equitable health outcomes among all social and economic groups. Since its founding in 1997, the organization has focused on community prevention, injury and violence prevention, health equity, healthy eating and active living, positive youth development, health system transformation, and mental health and wellbeing. For more information, visit [www.preventioninstitute.org](http://www.preventioninstitute.org).

### ADDITIONAL RESOURCES

Prevention Institute's report, *Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma*, provides a groundbreaking framework for understanding the relationship between community trauma and violence. Funded by Kaiser Permanente Community Benefit in Northern California, and based on interviews with practitioners in communities with high rates of violence, the report outlines specific strategies to address and prevent community trauma – and foster resilience – using techniques from those living in affected areas. For additional information and resources on addressing community trauma, go to our [project page](#).

Since the initial development of the *Adverse Community Experiences and Resilience Framework* in 2016, multiple networks and communities have shared it, as well as adopted, adapted and/or implemented it to address and prevent community trauma. *Adverse Community Experiences and Resilience: Learning from Practice* reflects valuable lessons from their practice.

*What? Why? How? Answers to Frequently Asked Questions About the Adverse Community Experiences and Resilience Framework* builds off of core concepts in the *Adverse Community Experiences and Resilience Framework* and addresses questions that have emerged in early practice and implementation.

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