

## Illinois State Opioid Crisis Response Advisory Council

### Public Awareness & Education Committee Meeting

April 25, 2017

#### MEETING MINUTES

**Chair and Co-Chair:** Chelsea Laliberte, Karel Homrig

**Committee Members Attending the Meeting in Person/Phone:** Jessica Gerdes, Mai Pho, Carol West, RJ McMahon, Laura Crain, Donna Nahlik, Ankur Dave, Sam Gillespie, Kate Mahoney, Patricia Johnson

**DASA & AHP Representatives:** Kim Fornero, Sue Pickett

#### Welcome, Introductions and Meeting Goals

- Chelsea and Karel welcomed the group. At the March 24<sup>th</sup> meeting, the group identified three key target audiences: youth, people with opiate use disorders (OUD) and people being prescribed opioids. The group also noted that increasing general public awareness of the crisis is one of its unique contributions to addressing Illinois' opioid epidemic. The goal for today's meeting is to think about each target audience and discuss the following questions:
  - Does focusing on these target audiences tie directly to the overall, immediate goal of the Council? (We have an opioid **crisis** and we need to address it **now**)
  - Which target audience is at the **greatest** risk for developing an opioid problem right now?
  - Can the general public be engaged in reaching these target audiences?

#### Discussion – Tying Target Audiences to the Council's Goal

- The group agreed that each target audience ties directly to the Council's goal. Discussion related to each target audience is summarized below.
- Youth: It's critical to address youth, particularly in regards to prevention – efforts made now can reduce future high-risk youth. This generation is curious and may have easy access to drugs but they also do their research and want to be engaged in conversations about opiate use. Parents need to be included in messaging and education efforts. Social media can be an effective tool to reaching youth.
- People with OUD: Issues for this target population include harm reduction, education on safe use, and information on treatment. The group discussed the importance of talking with people with OUD to develop effective messages and reaching out to family members and the community who do and can support them.
- People being prescribed opioids: Messaging and education for this target population needs to focus on knowledge about opioids and how to talk with physicians about opiates so that these individuals can make informed decisions about prescribed opiate use. The group acknowledged that messaging should not alienate prescribers.

#### Discussion – Developing Goals and Metrics

- After discussing each target audience with these criteria, the group agreed that each audience was still important to reach as part of a public awareness and/or education campaign. The group agreed that it would be important to focus first on the general public –

this would inform and support outreach to each target audience, and help hone messages and messaging for each target audience.

- The group identified five content areas that the general public—and each target audience—needs to know:
  - Basic facts about opioids and their effect on the body, and that misuse can be harmful and risky
  - Naloxone—understand what it is and how it is used
  - Social and medical access to opiates
  - What treatment is and that it works
  - Safe use and disposal of prescription medications
- The group developed the following goal related to these content areas: Provide an access point for resources and information about these content areas for different sectors/target audiences.
- The group discussed potential metrics and data needs. For example, a metric related to the number of people reached through a public education campaign could be assessed via hits to a website or virtual clearinghouse (e.g., # of people visiting the site, # of people downloading specific materials/resources).
  - The Illinois Youth Survey and YRBS could be used to establish metrics regarding perceived risk and use of opiates. The group agreed to review the survey and see what items exist and/or could be added to collect these data.
  - Chicago Recovery Alliance may have data on and from people with OUD.
  - The group suggested that a point-in-time survey at all treatment centers might be used to collect data on people with OUD's knowledge about safe use, Naloxone, treatment, the Good Samaritan law and other topics.
  - IDPH, SAMHSA and other federal data sources may provide information on use and treatment receipt
  - PMP data, DEA takeback data, and health/hospital system data might be used to establish metrics related to people who are prescribed opiates (i.e., metrics on safe disposal, whether prescribers and pharmacies are educating people who are prescribed opiates on safe use, risks, etc.).