Introduction

Substance use disorders, including tobacco use, have had a significant and costly impact on the health, well-being and economy of West Virginia. They are linked not only to overdose deaths, but to increased crime rates, child abuse and neglect, neonatal abstinence syndrome, infectious and chronic diseases, and other accidental injuries. The substance use epidemic in West Virginia has negatively affected individuals and families, presented new challenges to health care and behavioral health systems and significantly impacted the economic vitality of the state, including the effects of stigma. Due to the complex and far-reaching consequences of this epidemic, it is necessary to update West Virginia’s Substance Use Response Plan (the plan) using a multi-sector, collaborative approach with subject matter experts from across the state.

The Governor’s Council on Substance Abuse Prevention and Treatment is charged to lead the statewide effort to combat substance use disorders, address prevention and return those impacted to productive lives, and also to establish strategic direction through a state-level plan. Defining elements of the plan established by the Council:

- Strive for West Virginians to have prompt access to treatment.
- Promote access to treatment and support options that suit individuals’ needs.
- Measure and track prevention, treatment, and recovery outcomes.
- Promote strategies to implement evidence-based prevention methods in schools and communities.
- Monitor ongoing initiatives to confirm they are achieving their goals.
- Connect the imprisoned population with a substance use disorder to services and help promote positive behaviors.
- Support employment for those in recovery.

This document describes the current substance use environment in West Virginia, highlights existing activities and initiatives to date, and presents a framework of evidence-based goals, strategies, and objectives to address the current gaps and needs. The plan presents a coordinated and integrated approach using a framework of prevention, community engagement and supports, health systems, treatment, recovery and research, court systems and judicial impacted populations, and law enforcement over the next three years.

This document also presents the strategic framework for the work ahead, outlining needs to effectively address the substance use epidemic in this state and the specific strategies to achieve these goals. A more detailed implementation plan will be developed and will require active collaboration among state governmental agencies and stakeholders, including health care systems, providers, community-based organizations, law enforcement, and the judicial system.

Recommendations

Prevention

West Virginia must address and reduce circumstances that lead to SUD, such as adverse childhood experiences (ACEs) (i.e., all types of abuse, neglect, and other potentially traumatic
experiences that occur to people under the age of 18), while improving social determinants of health (i.e., conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks). Improving the wellness and future of our children, youth, adults, and families will require statewide participation from public, private, state and local partners.

**Goal 1: Prevent substance use disorder and enhance resiliency.**
- Strategy 1 – Implement programs and frameworks that promote prevention and resiliency and address stigma through exposure to evidence-based programs.
- Strategy 2 – Reduce adverse child experiences.

**Goal 2: Monitor opioid prescription and distribution.**
- Strategy 1 – Ensure health professionals in training have appropriate knowledge to reduce inappropriate prescribing of opioid medications for pain.
- Strategy 2 – Continue to conduct public health surveillance using WV Prescription Drug Monitoring Program data and publicly disseminate timely epidemiological analyses for use in surveillance, early warning, evaluation and prevention.

**Community Engagement and Supports**
Communities and regions across the state have mobilized to combat the substance use disorder crisis and stigma by working to increase availability of and access to treatment and recovery support. These essential supports for individuals allow West Virginians in recovery to enter into recovery networks and build employment skills for successful community reentry.

**Goal 1: Increase capacity of recovery housing in West Virginia.**
- Strategy 1 – Conduct an assessment of current recovery housing across the state and identify geographic areas of greatest need.
- Strategy 2 – Explore tax credits, Medicaid reimbursement and other options to improve access and capacity of recovery housing.
- Strategy 3 – Explore and evaluate promising best practices of successful recovery housing.
- Strategy 4 – Explore and consider implementing the Ohio Recovery Housing and Recovery Kentucky models for recovery housing, which use housing construction and renovation as an opportunity for those in recovery to develop job skills.
- Strategy 5 – Create certification processes for recovery housing in West Virginia.
- Strategy 6 – Develop recovery cafes or hubs, consistent with the Association of Recovery Community Organizations model.
- Strategy 7 – Develop MOUs/contracts with transitional housing providers specific to parole requirements for individuals with substance use disorder and previous engagement in the criminal justice system.
Goal 2: Increase availability of transportation in order to access prevention, early intervention, treatment and recovery services.

- Strategy 1 – Explore innovative models of transportation for individuals with SUD. Based on what is learned about these models and feasibility of addressing existing barriers, develop innovative strategies for individuals with substance use disorders to regain the ability to independently transport.
- Strategy 2 – Create a West Virginia ride-sharing program including use of people in long-term recovery to provide transportation.
- Strategy 3 – Create a bundled payment option for MAT that includes transportation.
- Strategy 4 – Engage treatment programs to develop internal transportation programs.
- Strategy 5 – Expand faith-based transportation initiatives.

Goal 3: Increase employment opportunities for people experiencing or in recovery for substance use disorders through supported employment and apprenticeships.

- Strategy 1 – Create a funding stream to support employment for repairs, renovations, and upkeep for high quality recovery residencies.
- Strategy 2 – Create entrepreneurial and social enterprise incubation hubs.
- Strategy 3 – Develop a toolkit to address barriers/needs for employer education and address learnings gleaned from surveys of employers regarding potential barriers.
- Strategy 4 – Develop regional recovery-owned and operated businesses.
- Strategy 5 – Partner/collaborate with the Jobs & Hope WV initiative to establish apprenticeships and internship opportunities.
- Strategy 6 – Promote re-integration programs.
- Strategy 7 – Create a website or hub to connect individuals to workforce opportunities, Workforce WV, Workforce Investment Boards, etc.
- Strategy 8 – Replicate the Work Progress Administration (WPA)/Civilian Conservation Corps (CCC) model of employment for public works projects.
- Strategy 9 – Train individuals in recovery for food prep, Meals on Wheels, elderly visits, etc.
- Strategy 10 – Employ people in recovery to work in public works projects such as construction rehabilitative housing, tearing down dilapidated structures, renovating existing structures, and other areas of the construction trade.

Goal 4: Support the organization of communities to combat the substance use disorder crisis by developing a strategy to pool resources, share ideas and best practices, avoid redundancies and eliminate gaps.

- Strategy 1 – Develop a mapping and planning tool to maximize resources and disseminate emerging and evidence-based practices to communities with unmet needs related to developing integrated systems for addiction care.
• Strategy 2 – Connect successful applicants for funding and their communities to other communities.
• Strategy 3 – Utilize the Huntington City of Solutions Guidebook for community organizing.

Health Systems
Substance use disorders affect people of all ages and demographics seeking care in West Virginia hospitals and health care system facilities. While there are models for providing care for people who have complex substance use disorders and other behavioral health and/or medical conditions, additional approaches are needed. Establishing team approaches fostered by integrated care systems and supported by the effective use of technology will help to further address the substance use disorder crisis in West Virginia.

Goal 1: Reduce fatal and nonfatal overdoses.
• Strategy 1 – Expand access to naloxone education and distribution.
• Strategy 2 – Increase resources for Quick Response Teams in local communities.
• Strategy 3 – Utilize data to strengthen community responses.

Goal 2: Expand points of access to substance use disorder treatment through health care system integration.
• Strategy 1 – Promote improved access to substance use disorder treatment through a coordinated approach with health care system facilities.
• Strategy 2 – Develop a response system statewide through permissible data sharing to quickly identify trends and critical overdose incidents to enable rapid community responses.
• Strategy 3 – Address barriers to treatment by expanding digital therapeutics, mobile service delivery and telehealth.

Goal 3: Reduce risk of infectious diseases associated with substance use disorder.
• Strategy 1 – Increase understanding of harm reduction and stigma and increase cross-sector partnerships in the design, implementation, and evaluation of comprehensive, evidence-based harm reduction programs.
• Strategy 2 – Increase screening for and rapid access to treatment of infectious diseases associated with substance use disorders (e.g., HCV, HIV, HBV, STIs, endocarditis, abscesses, etc.) at any entry point for substance use disorder treatment.

Treatment, Recovery and Research
The substance use disorder crisis has strained treatment and recovery resources in West Virginia and placed a high demand on actionable research. Though the influx of federal grant dollars for State Opioid Response has helped the state combat the crisis, the resurgence of stimulants
threatens to further strain the system. However, innovative state and local efforts have shown promise for effective treatment in combatting these trends.

**Goal 1: Improve access to effective treatment for substance use disorder in outpatient and residential facilities.**
- Strategy 1 – Increase the number of treatment providers that offer evidence-based practices and programs to save lives.
- Strategy 2 – Implement a comprehensive model that addresses recovery and strengthens funding for pregnant and postpartum women and their families.

**Goal 2: Increase the health professional workforce to treat people with substance use disorder.**
- Strategy 1 – Improve client and provider education about substance use disorder, including stigma, in the treatment setting.
- Strategy 2 – Develop clinical expertise to treat people who use multiple substances, especially stimulants.
- Strategy 3 – Provide education to providers in hospitals, urgent cares, and primary care practices.

**Goal 3: Implement recovery support systems throughout West Virginia.**
- Strategy 1 – Define and operationalize a recovery support system model for West Virginia.
- Strategy 2 – Foster the addition of peer recovery supports in health care and SUD treatment settings.

**Goal 4: Conduct relevant research, evaluation, and dissemination of the comparative effectiveness of various approaches to addressing the substance use disorder crisis.**
- Strategy 1 – Work with universities and research institutions to study the effectiveness of various interventions for combatting the substance use disorder crisis across the spectrum from prevention to sustained recovery.

**Court Systems and Justice-Involved Populations**
West Virginia’s incarcerated population has risen dramatically as a result of the state’s substance use disorder crisis. Analysis of internal West Virginia Division of Corrections and Rehabilitation data reveals that those with substance use disorders are at higher risk of recidivism than the general justice-involved population. The criminal justice system offers a foundation and opportunities to build from for people who are incarcerated with substance use disorders to access treatment and recovery services, thus reducing their likelihood of future substance use and drug-related re-offense.
Goal 1: Provide access to effective treatment for individuals with substance use disorders in the criminal justice system.

- Strategy 1 – Provide access to treatment that offers therapeutic programming and appropriate medications across the criminal justice system.
- Strategy 2 – Promote continuity of care through engagement of treatment and recovery providers, case managers, and parole and probation officers.
- Strategy 3 – Promote awareness of public safety interests served through access to treatment in reentry programs, community corrections, and alternative sentencing via education and partnerships.

Goal 2: Construct pathways to employment, housing, transportation, health and behavioral health services for individuals with substance use disorders and criminal records.

- Strategy 1 – Develop opportunities for alternative sentencing options.
- Strategy 2 – Review and facilitate procedures for expunging criminal records for certain offenses directly related to substance use disorder and promote the creation of initiatives offering legal services to eligible populations.
- Strategy 3 – Develop an employer assistance guide for hiring of individuals with a criminal justice history, including addressing stigma.
- Strategy 4 – Engage the West Virginia State Bar Association to promote public service by offering continuing education credits and incorporating new requirements for those seeking admission to the bar for the first time.

Law Enforcement

The substance use disorder crisis has strained law enforcement resources across the state in recent years and driven prison and jail populations to historic highs. Nationally, drug-related arrests have also risen steadily for several decades. Law enforcement is often the first point of contact for individuals struggling with substance use disorder and/or those experiencing an overdose. Therefore, strategies that include law enforcement, such as expanding pathways from law enforcement to treatment and recovery, providing law enforcement with tools and resources, and training law enforcement to respond to overdoses, are critical facets of a holistic response to the substance use disorder crisis in West Virginia.

Goal 1: Expand pathways from law enforcement to treatment and recovery.

- Strategy 1 – Expand innovative models, such as the Law Enforcement Assisted Diversion model, the Police-Assisted Addiction Recovery Initiative, and the Kentucky State Police Angel Initiative into additional counties.
- Strategy 2 – Explore and implement models for “zero repercussion and warm hand off” by law enforcement officers for individuals with substance use disorders.
- Strategy 3 – Develop strategic partnerships to mitigate minor offenses to reduce legal and logistical barriers to treatment/recovery.
Goal 2: Provide law enforcement with analytical tools, techniques, resources, and policies to improve the enforcement of drug laws.

- Strategy 1 – Expand reporting of suspicious practices to the West Virginia Board of Pharmacy, Board of Medicine, and WV Prescription Drug Monitoring Program.
- Strategy 2 – Enhance sentences for drug offenders that commit violent crimes with a firearm (currently a misdemeanor offense in some instances).
- Strategy 3 – Support voluntary public reporting of suspicious activity, such as potential drug deals and drug diversion.
- Strategy 4 – Utilize the Overdose Detection Mapping Application Program to identify drug trafficking routes across state lines and encourage local law enforcement to enter overdose data, as required by law.

Goal 3: Equip and train law enforcement agencies to respond to overdoses.

- Strategy 1 – Provide education and training on naloxone, self-care, and stigma to all law enforcement officers.
- Strategy 2 – Expand the Huntington model for overdose response.
- Strategy 3 – Clarify law enforcement’s role in responding to medical emergencies.
- Strategy 4 – Ensure that law enforcement agencies have access to naloxone.
- Strategy 5 – Engage with community members struggling with substance use disorder.
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