

Colorado Consortium for Prescription Drug Abuse Prevention

Public Awareness Work Group Meeting Minutes

May 18, 2022 via Zoom

Present:

Kent MacLennan Co-chair

Sam Bourdon, Co-chair, Harm Reduction Work Group

Mike Nerenberg, MD, Co-chair, Harm Reduction Work Group

Donna Mae Baukat, Community Compassion Outreach

Sarah Werner, Co-chair, Affected Families & Friends Work Group

Cathy Law, Volunteers of America

Sara Jean Cardona, CDPHE

Jenny Loth Hill, Co-chair, Recovery Work Group

Taylor Kidd, Larimer County Human Services

Terri Schreiber, Schreiber Research Group

Jennifer Mackender, Broomfield Public Health

Trina Faatz, Boulder County Public Health

Andrea Thomas, Voices for Awareness Foundation

Sara Money, SCHN

Andrea Alvarez

Amelie Company: Christine Cowan, Katelyn Aberle

Consortium: Jose Esquibel, Gina Olberding, Susanna Cooper, Jen Place, Jessica Eaddy, Lindsey

Simbeye, Michael Davidson

Absent: See attached list.

Kent MacLennan, Work Group Co-chair, called the meeting to order at 1:05 p.m.

Approval of Minutes:

A motion was made to approve the March 2022 work group meeting minutes. Motion approved.

Legislative Updates:

Jose Esquibel reviewed the recently passed ARPA Behavioral Health bills:

- SB 22-147 Behavioral Healthcare Services for Children
- SB 22-148 Colorado Land-based Tribe Behavioral Health Services Grant Program
- SB 22-177 Investments in Care Coordination Infrastructure
- SB 22-181 Behavioral Healthcare Workforce
- SB 22-196 Health Needs of Persons in Criminal Justice System
- HB 22-1281 Behavioral Healthcare Continuum Gap Grant Program
- HB 22-1283 Youth and Family Behavioral Healthcare
- HB 22-1302 Healthcare Practice Transformation
- HB 22-1303 Increase Residential Behavioral Health Beds
- HB 22-1326 Fentanyl Accountability and Prevention
- HB 22-1386 Competency to Proceed and Restoration to Competency

The Consortium will be coordinating public awareness programs with CDPHE, OBH, and the Attorney General's Office. Jose will disseminate a summary of the sections of each bill that are

relevant to the respective Consortium work groups. None of the bills include direct funds for the Consortium; however, funding from the marijuana tax and ARPA is ongoing.

Amelie Statement of Work Overview:

Michael Davidson reviewed the work group's past public awareness activities, including RTI's evaluation role. RTI will continue working with the Consortium as a research consultant. The Amelie Company has been hired to manage the creative part of the work group's public awareness campaign.

Christine Cowan and Katelyn Aberle of Amelie provided background information on their past campaigns and plans for their work with the Consortium. Amelie worked on the Lift the Label campaign.

A discussion was held regarding the messaging that will be directed towards the targeted audience. Messaging will address overdoses, fentanyl test strips, naloxone, using drugs while alone, Good Samaritan laws, OpiRescue, education and outreach in schools. Amelie will create a key messaging list based on priorities and message testing.

The targeted audience profile includes Coloradoans age 18-44 years, recreational drug users (prescription opioids, benzodiazepines, cocaine, MDMA, etc.), social setting users (one to five times per month), and high risk-seeking individuals.

Work Group Suggestions for Reaching Targeted Audience:

- Music festivals, concerts, Instagram, Snapchat, posters in restrooms.
- College/university dorms, classrooms, large gathering areas.
- Ski resort employee housing.
- Posters at homeless encampments.
- Schools, dorms, and university health centers.
- Infographics/handouts.
- Bars and smoke shops.
- Soup kitchens and food resource centers.
- Shelters for people experiencing homelessness, especially Urban Peak (Youth).
- Marijuana retail stores.
- Panel discussions with healthcare providers and periodic education and updates for service providers.
- Social media venues (Tik Tok, Instagram, Facebook).
- Materials/outreach in Spanish.
- Sober AF Entertainment.
- Local DJs.
- Educate individuals on not using drugs alone and how to recognize an overdose.
- Focus on overdose prevention (OpiRescue).
- Make access to Naloxone and fentanyl test strips easier.
- Differentiate between active and recreational users.

Work group members also discussed the following: how to reach specific populations, the importance of harm reduction, fentanyl awareness, the continued need to distribute fentanyl test strips, overdose prevention, and community involvement.

Member Updates:

Andrea Thomas: A fentanyl overdose and prevention event will be held in Denver on August 21. National Fentanyl Prevention and Awareness Day is being recognized by the City of Denver and potentially the Governor. Partners include the DEA and the National Crime Prevention Council. Others are welcome to become involved in the event.

Michael Davidson: CDPHE is currently reviewing the Medication Take-back Program. They are working with SE2 to develop a marketing plan.

Sarah Werner: The Affected Families & Friends Work Group met with the AG's office recently. Since a number of families have contacted the AG's office, a member of the AG's office will be joining the work group. The work group plans to offer professional coaching for families and friends who would like to participate in a speakers' bureau.

Adjournment/Next Meeting:

The meeting adjourned at 2:30 p.m. The next work group meeting will be held on Wednesday, July 20, 2022 from 1–2:30 p.m.

Attachments: Work group roster, Discussion Guide

Links:

Consortium Fentanyl Overdose Prevention Campaign Materials Needs Assessment: <https://forms.gle/bdsyRQDHhWxT99de6>

Pueblo County Substance Use Data: <https://county.pueblo.org/public-health/substance-use-data-pueblo-county>

Drug Policy Alliance Safety First, A Reality-Based Approach to Teens and Drugs: https://drugpolicy.org/sites/default/files/safetyfirst-4.24.19_0.pdf

CA Bridge: <https://cabridge.org/>
MAT for individuals using fentanyl and opioids in general.

Selected Chat Comments:

- Trina Faatz: Boulder Valley School District just sent district wide letters to all parents and students regarding the increase of fentanyl in the community. Information included how to access Narcan, that fentanyl is commonly found in all street substances, and how to reverse an overdose. They are also holding four training sessions on administering naloxone (two in-person sessions and two virtual).
- Mike Nerenberg: The governor's approach to scare everyone about all drugs is an incorrect approach. Kids will not listen. Stay away from anything too technical.
- Andrea Thomas: We use teen tools and parent education for prevention. Focus groups with fentanyl users have been very informative.
- Sophie Feffer: It is my understanding that other entities will be focusing on awareness campaigns for schools and youth.

- Trina Faatz: We tell kids to have a designated non-user like a designated driver. Someone can then reverse an OD rather than the five who all overdosed without time to call for help. We also tell kids/young adults to start small - you can always add more.
- Kent MacLennan: To Sophie's point, the teens/parents audience will be led through the AG's Office, although we intend for this work group and Amelie to stay connected/coordinated.
- Sarah Money: We know less than 25% of overdoses reported to us at Access Point Pueblo did not involve a 911 call (just to speak to how the public knows).
- Sam Bourdon: The abstinence-only mandate puts adults in the unenviable position of having nothing to say to the young people we most need to reach – those who insist on saying “maybe,” or “sometimes” or even “yes” to drugs. This prevents us from having conversations about how to reduce risks and keep them safe."

https://drugpolicy.org/sites/default/files/safetyfirst-4.24.19_0.pdf

Touching fentanyl does not cause an overdose, fentanyl is not naloxone resistant, people use fentanyl both intentionally and unintentionally. The "poisoning" narrative creates a harmful and unnecessary distinction between "innocent and guilty" people who use illicit substances. Also, there are ways to use fentanyl that reduce risk.
- Sarah Werner: 1) Can we use existing resources and media and develop new media for which no good message exists 2) Marijuana users.
- Trina Faatz: Some misconceptions concern not having enough information. Treating fentanyl use disorder is increasingly difficult with MAT. We are not able to find sustainable Suboxone levels to treat, or methadone levels must be much higher than we have ever seen. Those in treatment utilizing methadone are four times less likely to overdose or die.