About the National League of Cities

The National League of Cities (NLC) is the nation’s leading advocacy organization devoted to strengthening and promoting cities as centers of opportunity, leadership, and governance. Through its membership and partnerships with state municipal leagues, NLC serves as a resource and advocate for more than 19,000 cities and towns and more than 218 million Americans. NLC’s Institute for Youth, Education, and Families (YEF Institute) helps municipal leaders take action on behalf of the children, youth, and families in their communities. NLC launched the YEF Institute in January 2000 in recognition of the unique and influential roles that mayors, city council members and other local leaders play in strengthening families and improving outcomes for children and youth.

Acknowledgements

Special thanks to the Robert Wood Johnson Foundation for their support of the Mayors’ Institute on Opioids and the technical assistance cohort, including Jamie Bussel, Amy Gillman, Monica Hobbs Vinluan and Mona Shah. Also, NLC is deeply grateful to Dr. Johsua Sharfstein and Amanda Latimore at the Bloomberg American Health Initiative for their deep and enduring commitment to supporting cities in their efforts to address the opioid epidemic.
Table of Contents

Introduction ................................................................................................................. 3

City Efforts and Action .............................................................................................. 4
  Huntington, West Virginia ......................................................................................... 4
  Knoxville, Tennessee .................................................................................................. 5
  Madison, Wisconsin ................................................................................................... 6
  Manchester, New Hampshire ...................................................................................... 7
  New Bedford, Massachusetts ...................................................................................... 8
  Tacoma, Washington .................................................................................................. 9

What’s Ahead and Next Steps .................................................................................... 11
Introduction

The Mayors’ Institute on Opioids took place May 2018 in Boston with six participating mayors and their respective city teams who were selected through a competitive application process. Participating cities included Huntington, West Virginia; Knoxville, Tennessee; Madison, Wisconsin; Manchester, New Hampshire; New Bedford, Massachusetts; and Tacoma, Washington. The National League of Cities, in close partnership with the Bloomberg American Health Initiative, has provided technical assistance to each city over the past 12 months. The cities engaged in both one-on-one consultations and several peer-learning opportunities, including a second in-person convening in Nashville, Tennessee, in December 2018. Topics that were explored as a group included: evidence-based prevention, multi-sector data sharing, comprehensive planning, financing strategies, and expanding access to treatment and services, among others.

As a result of this effort, each city gained a better understanding of how widespread the opioid epidemic is around the country and greatly appreciated the chance to connect with peers to share promising practices and lessons learned. Each city chose unique focus areas for their work as part of the technical assistance associated with the Mayors’ Institute, and each also made progress in those specific areas. Additionally, many felt the relationships developed with peer cities, plus the leading experts and resources provided, would continue to inform their work and efforts well into the future.

The work of the mayors and their teams also resulted in updated NLC policy guidelines, with stronger language incorporated that seeks a portion of federal funds to go directly to local communities rather than solely through the states. Several mayors, including Steve Williams from Huntington, Madeleine Rogero from Knoxville and Victoria Woodards from Tacoma, all took part in briefings in Washington, D.C. as part of this effort to share their insights and educate policymakers about continuing needs on the ground.
City Efforts and Action

Huntington, West Virginia

“Our work in the City of Huntington benefited from our participation in the Mayors’ Institute on Opioids as we were able to work more closely with employers to develop a longer-term strategy to ensure individuals in recovery have greater job prospects and opportunities for fuller, more productive lives in the future.”

Mayor Steve Williams

Considered to be at the front lines of the epidemic prior to engagement in the Mayors’ Institute, the City of Huntington already had numerous programs and practices in place to comprehensively address the opioid epidemic. Key populations of focus included women with substance use disorders at high risk of pregnancy and individuals with repeat overdoses.

Historically, the economic distress of the city following the decline of the coal and manufacturing industries contributed to the disproportionate impact of the state’s opioid crisis on Huntington. Through their work as part of the Mayors’ Institute, the city team sought to address economic inequality through enhancing economic development, including a focus on revitalizing the workforce and developing employment opportunities for people in recovery.

Strategies to achieve this goal included working closely with the Huntington Chamber of Commerce to survey businesses in the community to better understand their level of interest in hiring people in recovery, as well as identifying barriers and opportunities to advance employment strategies. With the support from the Bloomberg American Health Initiative, the city was able to move forward in extracting key findings from the survey data. A focus group was also convened in Huntington to better understand barriers and obstacles to employer engagement. Through this effort, officials in Huntington now can use data to identify potential solutions to move forward.
Key barriers that emerged from the employer survey, focus groups and interviews include: challenges during the application and hiring process; perceived liability to employers; lack of resources to support those with addiction; a need for education for employers on addiction; and a lack of transportation, skills training and readiness-to-work programs in the community. A group of local experts, including behavioral health, medical, legislative and other experts were asked to review these themes and draft an initial set of strategies to address the barriers and support the next phase of work.

Huntington is currently in the second phase of the project with continued support through NLC’s partnership with the Bloomberg American Health Initiative. Continuing efforts seek to further understand the challenges faced by those in recovery from the perspective of those in recovery and the provider community. The development of surveys and focus group questions is underway as Huntington prepares to gather input from people with lived experience and behavioral health providers. This work will ultimately inform a strategic plan geared towards economic development in the city.

Knoxville, Tennessee

Knoxville joined the Mayors’ Institute with strong community coalitions and an existing number of resources in place to combat the epidemic. These resources included new harm reduction strategies such as syringe services, a Crisis Intervention Team (CIT) and a new urgent care diversion facility that provides treatment in lieu of incarceration for low-risk offenders with behavioral health conditions.

As Knoxville began their work through the Mayors’ Institute, the city team developed an ambitious set of goals that included enhancing prevention efforts, coordinating treatment and recovery efforts to better align across systems (e.g., law enforcement, health care, housing and other social services), decreasing stigma, and engaging individuals with multiple overdoses to ensure better outcomes.

In the fall of 2018, the City of Knoxville and Knox County jointly held a Mayors’ Summit on Substance Misuse that included many of the area’s key stakeholders in order to gain greater support for their multi-faceted plans. One of the major findings from this event was a greater recognition of the need for a stronger buy-in from the community in order to move forward on
their overall strategy. To ensure greater success, Knox County undertook a quality of life survey, which identified drug misuse as a key issue across all demographic groups in the broader community. The University of Tennessee was also engaged to assist with data gathering to better understand the community’s perception of what is working and what could be improved to address substance misuse. These data currently inform the Knox County Health Department’s community health assessment, which will lend itself to moving forward with a deeper level of work to gain further support from the community for additional action.

Looking ahead, a community summit is being planned for August where major goals will be presented to a diverse group of multi-sector stakeholders based on feedback received throughout the process. The stakeholders will work over 6-12 months to develop specific strategies related to measurable indicators for a five-year strategic plan. The health department recently hired new staff to coordinate the strategic planning process.

Madison, Wisconsin

As part of the City of Madison’s approach to the opioid epidemic, they entered the Mayors’ Institute with strong partnerships across a variety of systems, including public health and human services, peer outreach and recovery, the criminal justice system and first responders. Promising efforts already being implemented included police initiatives that value treatment over incarceration, such as the Madison Addiction Recovery Initiative (MARI), a pre-arrest diversion program and implementation of an Overdose Fatality Review process as part of a broader state-wide initiative.

Through participating in the Mayors’ Institute, the city team identified two additional strategies as the focus of their ongoing engagement in technical assistance, including establishing a data-driven coordinated response and examining quantitative data to better understand and ultimately address the root causes of the opioid epidemic.

Specific to furthering data-driven responses, the City of Madison leveraged the Drug Enforcement Agency (DEA) High Intensity Drug Trafficking Areas (HIDTA) Overdose Detection Mapping...
Application Program (ODMAP), which tracks real-time first responder fatal and non-fatal overdose data. Officials in Madison are working to use these data to develop more coordinated responses in affected communities. The City also partnered with consultants to examine and respond to significant disparities in overdoses with a focus on African-American women who have lost children to the epidemic.

Additional short-term plans include learning more about community perspectives on the epidemic by placing greater emphasis on the issue in the health department’s community health needs assessment as well as providing recommendations on how to engage emergency preparedness divisions more effectively in the development of robust responses.

Manchester, New Hampshire

“The opioid epidemic ignores age, address and occupation. It has taken a huge toll on our community, but by working together, we have been able to get people the help they need.”
Mayor Joyce Craig

Two years before the Mayors’ Institute on Opioids, the City of Manchester was well on its way to combating the opioid epidemic. In 2016, the city launched the Safe Station initiative, which allows citizens to walk into any fire station 24 hours a day and be connected to treatment. The Safe Station initiative has helped more than 5,600 people since its inception and has earned national attention, including being a recipient of the Robert Wood Johnson Foundation Culture of Health prize. Several fire departments within New Hampshire and across the country have since adopted the Safe Station model.

Given the work already underway in Manchester, the city team joined the Mayors’ Institute with an interest in expanding on their initial efforts and success with Safe Stations. A key goal for the city was to ensure rapid access to the most effective treatment for women, youth, individuals with co-occurring mental illness and those who access treatment through the Safe Stations. Additional goals included using data to inform policy making and increasing coordination between various city, state and non-profit organizations. And for the first time since the epidemic began, in 2018 Manchester saw a 19 percent decrease in opioid overdoses and a 22 percent decrease in opioid overdose deaths.
New Bedford, Massachusetts

“We are moving away from the idea that we are combating a challenging epidemic to truly understanding that we are addressing a clinical issue that requires a strategic plan to make greater progress.”

Mayor Jon Mitchell

Like Huntington and other communities around the country, the City of New Bedford’s work to address opioids started long before the Mayors’ Institute. The city already had important infrastructure in place to combat the opioid epidemic. The Greater New Bedford Opioid Task Force (GNBOT) includes government and community leaders with a common goal of strategically addressing the opioid epidemic. In addition to safe medication disposal, naloxone education and youth life skills training programs, the GNBOT had already implemented Crisis Intervention, Treatment not Jail Time and drop-in center approaches.

Through the Mayors’ Institute, the city team prioritized three areas of work building upon their current efforts: 1) Establishing data sharing and review processes to address the opioid epidemic, including identifying high utilizers and youth at risk of initiating recreational opioid use; 2) Evaluating key programs such as Law Enforcement Assisted Diversion (LEAD), engagement of recovery coaches and drop-in centers; and 3) Expanding workforce to provide Medication Assisted Treatment (MAT).

The emphasis of the city’s technical assistance took root as they secured additional funding to hire staff to better coordinate the work of their GNBOT. With assistance from the Bloomberg American Health Initiative, they will soon train staff to improve the use of data in monitoring and evaluating the efficacy of their programs. This information will inform priorities in an upcoming health department strategic plan as well as GNBOT strategies. Further, through the engagement of experts from Boston Medical Center connected to the city team through the Mayors’ Institute, the team is also actively pursuing strategies to expand their MAT workforce.
Tacoma, Washington

“The City of Tacoma, in partnership with Pierce County and the Tacoma-Pierce County Health Department, is actively expanding efforts to address the opioid epidemic by working to expand access to treatment, prevention through education, and ensuring the right services at the right time. Based on our engagement in the Mayors’ Institute, we are better positioned to lead and get better outcomes for our residents.”

Mayor Victoria Woodards

Through the Tacoma-Pierce County Opioid Task Force, the City of Tacoma joined the Mayors’ Institute having already forged a strong partnership with Pierce County and the Tacoma-Pierce County Health Department. The task force focused on three areas of effort: prevention and education, expanding access to treatment and ensuring the right services at the right time. County and city officials also included a strong emphasis on equitable access to treatment and services.

In prioritizing the focus of their efforts that could be best supported through technical assistance, leaders in Tacoma and Pierce County wanted to build upon the work in key focus areas already identified through their task force. They also understood the need to improve their use of data, tailoring and targeting interventions to where they are most needed. They are exploring and working through privacy issues in the hope of moving forward with a data dashboard.

Concurrently, efforts are also underway to help further strategies in prevention/education and expanding access to treatment. Specific to prevention/education, Tacoma and Pierce County are reviewing evidence-based prevention of substance misuse to better understand best practices, key components across similar types of programs and examples of successful implementation. The goal is to identify and fill gaps in the school-based prevention landscape to improve outcomes and prevent drug misuse in youth. Specific to expanding access to treatment, the city is laying the groundwork for a more targeted strategy to educate and more fully engage primary care physicians to administer buprenorphine by tailoring tested best practices to efforts on the ground in Tacoma and Pierce County.

From a peer-to-peer perspective, Tacoma is in the process of implementing a Safe Stations program, modeled upon the initiative in Manchester. The city is also working to expand resources to ensure individuals who seek help at Safe Stations receive access to treatment.
What’s Ahead and Next Steps

As we conclude the formal technical assistance period with this collaborative cohort of cities, we are struck by the ongoing needs of cities to adequately address the epidemic. While more federal funds are flowing, many go through state agencies and are slow to meet the needs on the ground. NLC plans to continue advocacy to direct a larger share of available funds directly to local communities.

While all participating cities had distinct goals leaving the Mayors’ Institute in May 2018, they also shared common areas of focus including expanding access to treatment, better utilization of data, diversifying funding to support this work, incorporating prevention into their existing plans, and ensuring ways to evaluate current efforts to gauge progress. Cities need specific support in these and other areas, as well as the ability to connect as peers. NLC will continue to look for ways to continue and expand support for city leaders as they seek to address substance use and mental health issues more broadly.

This effort also led to stronger collaboration between NLC and the U.S. Department of Health & Human Services (HHS) as we co-convened city and faith leaders to explore how to better support individuals in recovery through innovative workforce approaches and jobs. We will continue to work with HHS to promote stronger collaboration between city and faith leaders to ensure individuals in recovery have greater supports for ongoing success.

Finally, NLC was only able to meet the depth and breadth of cities’ technical assistance needs our partnership with the Bloomberg American Health Initiative and the leadership and engagement of Dr. Joshua Sharfstein and Amanda Latimore, PhD. It is only through their knowledge and resources that we could adequately support cities in the diversity of needs to address what is still a challenging epidemic.

As we look ahead, NLC is pleased to be working with Arnold Ventures on a research effort to promote greater awareness of promising local approaches to address substance use, mental health and homelessness through emergency response and crisis stabilization. We are planning a policy convening and subsequent briefing to engage federal, state and local officials on these topics during the fall of 2019. We will also continue to work to bring cities together as part of our recurring NLC conferences, including City Summit and the Congressional Cities Conference.
NLC Staff Contributors

Clarence E. Anthony
Executive Director and CEO

Clifford M. Johnson
Executive Director, Institute for Youth, Education and Families

Sue Pechilio Polis
Director, Health and Wellness
Institute for Youth Education and Families

Kitty Hsu Dana
Senior Health Policy Advisor
Health and Wellness, Institute for Youth, Education and Families

Leah Ettman
Senior Associate
Health and Wellness, Institute for Youth, Education and Families

Sharie Wood
Senior Meeting and Event Planner
Institute for Youth, Education and Families

Jim Brooks
Director, City Solutions
Center for City Solutions

Stephanie Martinez-Ruckman
Program Director, Human Development
Center for Federal Advocacy

Yucel Ors
Program Director, Public Safety
Center for Federal Advocacy

Bloomberg American Health Initiative Staff

Amanda Latimore, PhD
Public Sector Initiatives Lead
Assistant Professor
Johns Hopkins Bloomberg School of Public Health

Joshua Sharfstein
Vice Dean for Public Health Practice and Community Engagement
Johns Hopkins Bloomberg School of Public Health
National League of Cities would like to extend our deepest gratitude to the following partners for their contributions to our technical assistance efforts.

Reverend Jeffrey Allen  
*West Virginia Council of Churches*

Michael Botticelli  
*Executive Director, Grayken Center for Addiction*  
*Boston Medical Center*

Monty Burks, Ph.D.  
*Director of Special Projects and Faith Based Initiatives*  
*Tennessee Department of Mental Health and Substance Abuse Services*

Heidi Christensen  
*Public Affairs Specialist*  
*U.S. Department of Health and Human Services Center for Faith and Opportunity Initiatives*

Greg Delaney  
*Outreach Coordinator/Hope Director/Faith Partner*  
*Woodhaven/Reach for Tomorrow/Attorney General Mike DeWine’s Office of Drug Abuse Outreach*

Trevor Henderson  
*Opioid Coordinator*  
*Metro Public Health Department of Nashville and Davidson County*

Shoshanna Levine  
*Program Director*  
*City Health Dashboard, NYU School of Medicine*

Carol McDaid  
*Principal*  
*McShin Foundation/Capitol Decisions, Inc.*

William C. Moyers  
*Vice President*  
*Public Affairs and Community Relations*  
*Hazelden Betty Ford Foundation*

Rita Noonan  
*Chief, Health Systems and Trauma Systems Branch, Division of Unintentional Injury Prevention Centers for Disease Control and Prevention*

John O’Brien  
*Senior Consultant*  
*Technical Assistance Collaborative*