

DuPage Youth & Adult Substance Use Qualitative Focus Group Findings and Recommendations



Engaging People with Lived Experience: Why Now?

As part of the Illinois opioid response, DCHD is conducting a mixed methods **needs assessment** across stakeholder groups. **Aim:** To respond most appropriately to local needs and ultimately reduce rates of opioid abuse, overdose and death

People with lived experience play a vital role in this information gathering process:¹

- Develop deeper understanding of conditions that promote and prevent risk
- Contextualize and inform policies, programs and practices
- Promote equity: Include PLEs at all decision-making points. “Not about us without us”

¹ ASPE-HHS, Engaging People with Lived Experience to Improve Federal Research, Policy and Practice: <https://aspe.hhs.gov/lived-experience>

Youth Focus Group Guiding Questions

- What are reasons that youth use substances?
- How are youth gaining access to substances?
- What is the relationship between mental health and substance use among youth?
 - Four focus groups with diverse range of youth ages 14-18 representing traditional and alternative high schools, career focused youth and LGBTQ+ youth (n = 28)
 - ***Aim:*** To intervene and prevent youth substance use

Adult Focus Group Guiding Questions

- What barriers do people in DuPage County face to accessing substance use treatment and recovery services?
- What gaps do DuPage County residents face during treatment and recovery?
- What facilitates people in DuPage County's engagement in treatment and recovery?
 - Two focus groups and 1 interview conducted with diverse adults at various length of time in recovery (n = 22)
 - ***Aim:*** To promote long term treatment and recovery for DuPage County adults

Adult Focus Group Findings and Recommendations

Many people experiencing substance use disorders in DuPage County who want to access detox and treatment are not able to. This results in loss to treatment. Increase access to these necessary services.

- Enhance capacity & coordination across all points of entry,
- Provide immediate support to people who don't meet "medically required" detox criteria, prevent loss to treatment
- Increase treatment capacity
- Address gaps in insurance coverage

"It takes a tremendous amount of courage or desperation, whichever way you want to look at it to walk into an emergency room and present that I am in trouble, and I have nowhere to go and, and there's something wrong. I need help. And at that point, nobody should be turned away and said, "Oh, you don't need help after that criteria. You can figure it out."

When gaps exist between levels of substance use treatment, many people are left to “figure it out” during a vulnerable physical and emotional juncture. This leaves many people without needed support and contributes to relapse. Close gaps across levels of care.

- Gaps in treatment can take place as patients are stepping down or even up across levels of care.
- Insurance determines length of stay at each level, often it feels not enough to patients.
- Lacking better options, some patients find work around solutions to get care and housing such as jail, psychiatric hospitalization, and making themselves detox eligible
- Provide interim housing, patient monitoring & support during gaps in care
- Advocate for increased detox and treatment services; address funding and access concerns

Provide stronger navigation support to people experiencing substance use disorders (detox, treatment, recovery)

- Treatment navigation was a strong access barrier for participants, especially while recovering from substance use (physical, cognitive, emotional recovery).

Develop more robust mental health support during treatment

- Substance use has a high comorbidity rate with mental health concerns and trauma; these needs must be effectively addressed as part of treatment.
- Utilize highly trained mental health professionals to address co-occurring mental health concerns, root causes, history of trauma
- Expand mental health services; explore potential professional pipeline and longevity barriers

“We were talking about the scariest parts right after we get out in that few days between all that and all these phone calls and paperwork... I know for a fact you're sitting there like, you gotta call every day...And you get nervous. And then of course we're addicts. So I'm like, (expletive) that. I'm just gonna drink. I'm not making these calls, man, they're not gonna call me back.”

Combat stigma for substance use treatment and recovery at the community level. Foster fact-based awareness building and collaboration.

- Community level stigma has contributed to blocking the development of treatment and recovery residences; can contribute to a hostile environment for existing residences
- Engage in intentional efforts to reduce stigma and build a sense of community and understanding.

People in treatment and recovery experience multiple, overlapping barriers to rebuilding their lives and integrating into the community. Legal, social, developmental and employment barriers exist. Foster supportive services to promote holistic, productive, healthy lives for people in treatment and recovery

- Social Support/Community Support
- Employment (criminal record, lack of employment history or skills)
- Housing (lack of affordable housing)
- Transportation (DUI history, cost)
- Life Skill Development (keeping a schedule, financial literacy, household mgmt.)
- Legal Services (ID, driver's license recovery, sealing/expunging records)