

Treatment & Recovery Support for a Healthy PA

Approximately 316,000 Pennsylvanians struggle with a substance use disorder (SUD)¹. The opioid epidemic has rapidly become one of the worst public health crises in Pennsylvania—and the nation. In 2020, drug overdose deaths in Pennsylvania totaled 5,067—the second highest number of overdose deaths in a single year since the opioid epidemic began in the 1990s.

Pennsylvanians of all backgrounds, incomes and races struggle with alcohol and other substance abuse disorders. And no community, whether rural or urban, is exempt from its impact. In order to build a safe and healthy Commonwealth for every resident, a comprehensive approach is needed to treat those who are suffering, reduce harm, and promote sustained recovery. To this end, Partnership for Better Health supports the following policies.

Strengthen Existing Substance Use Disorder Treatment Systems

Integrate medication-assisted treatment (MAT) into all levels of care.

Research has demonstrated that medication-assisted treatment (MAT)—the use of FDA-approved medication in combination with counseling and behavioral therapies—can successfully treat opioid use disorder, prevent or reduce overdose, lower a person’s risk of contracting HIV or Hepatitis C, and help sustain recovery². Despite its benefits, MAT is not always recognized as an acceptable treatment option by all providers. In line with best practices for the treatment of substance use disorder, Pennsylvania should eliminate barriers that prevent providers from offering MAT at all levels of care and ensure ongoing provider education at all levels regarding the benefits of MAT.

Increase treatment providers trained in evidence-based practice.

Emerging research shows that motivational approaches can help clients with substance use disorder achieve better outcomes³. When used as part of other evidence-based interventions such as cognitive-behavioral therapy (CBT), motivational interviewing (MI) can help people with SUD achieve positive long-term outcomes⁴. By allocating additional funding to the PA Departments of Drug and Alcohol Programs (DDAP) and Human Services (DHS) to promote collaboration with health care provider associations, expand provider training in MI, CBT, and other evidence-based practices, we will strengthen our treatment systems and improve outcomes for people with SUD.

Expand access to treatment, especially in rural areas.

Forty-eight of Pennsylvania’s 67 counties are rural, and individuals with SUD in these communities face unique challenges when attempting to access treatment, especially MAT. Barriers to treatment in rural counties are due to a variety of factors, including a limited number of MAT clinics and providers. These clinics and providers are often dispersed across large geographic areas that further complicate access for individuals without transportation. We can minimize these barriers to treatment by expanding funding for current services to add additional clinics, increasing incentives to providers to serve in rural areas through student loan forgiveness programs or other benefits, and expanding funding for public transportation, including medical assistance reimbursement, in rural communities.

Expand Harm Reduction Strategies

Legalize syringe service programs across Pennsylvania.

Syringe service programs (SSP) are public health programs that help meet the health and medical needs of individuals with SUD. These programs—currently authorized in only Philadelphia and Pittsburgh—provide access to clean syringes, referrals to drug treatment and other social services, HIV and Hepatitis C virus testing, naloxone, and a number of other services. A proven harm reduction strategy, SSPs lower the likelihood of death by overdose and decrease risk of HIV transmission. Furthermore, users of SSP programs are five times more likely to enter SUD treatment⁵. Pennsylvania lawmakers must make provisions to legalize SSPs and amend the state’s drug paraphernalia law to exempt syringes used by these programs.

Legalize fentanyl test strips for personal use.

Fentanyl is a synthetic opioid that is approximately 50 times as potent as heroin and can contaminate other drugs. According to a recent study that examined opioid overdose deaths in ten states, more than half of the deaths involved fentanyl⁶. With a test strip, a person using drugs can determine whether the drug contains fentanyl and if they risk greater likelihood of an overdose. In 2021, the Center for Disease Control and Prevention and the Substance Abuse and Mental Health Services Administration began to allow the use of federal funds to purchase and distribute test strips to curb overdose deaths.⁷ However, test strips are illegal for individuals in Pennsylvania to possess and use because they are classified as drug paraphernalia under state law. The General Assembly should decriminalize test strips.

Support Sustained Recovery

Incentivize businesses to hire individuals in recovery.

Stigma or a criminal history can complicate steady, gainful employment for individuals in recovery from SUD. A steady stream of income isn’t only essential for someone to provide for their families and meet their most basic needs—employment, inclusion in the workforce and a sense of accomplishment and productivity are critical components for individuals in recovery. In a survey conducted by DDAP in 2019, many individuals in recovery reported that several of their unmet needs centered around employment, including the need for job assistance and career training⁸. Incentivizing businesses to hire individuals in recovery would allow more people in recovery from SUD to thrive professionally and contribute to their community.

Promote pardon process for past drug-related criminal convictions.

A criminal record can prevent individuals in recovery from obtaining housing, employment, the ability to volunteer or work with children, and more. Approximately 70% of individuals applying to the Pennsylvania Board of Pardons (BOP) are seeking a pardon for drug-related convictions, with 60% of applicants reporting a substance use disorder⁹. Expediting the pardon process is critical to reintegrating individuals with SUD back into society and advancing their sustained recovery.

¹ Commonwealth of Pennsylvania (2021). Opioid Data Dashboard. <https://www.health.pa.gov/topics/disease/Opioids/Pages/Opioids.aspx>

² Substance Abuse and Mental Health Services Administration (2021). Medication-Assisted Treatment (MAT). <https://www.samhsa.gov/medication-assisted-treatment>

³ Substance Abuse and Mental Health Services Administration (2021). Using Motivational Interviewing in Substance Use Disorder Treatment. *Advisory*.

⁴ Naar, S., & Safren, S.A. (2017). *Motivational interviewing and CBT: Combining strategies for maximum effectiveness*. Guilford.

⁵ Scotti, R. (2020). *Syringe service programs* [Powerpoint slides]. Pennsylvania Department of Health. <https://www.paproviders.org/wp-content/uploads/2020/03/SSP-Power-Point-v.2.11.20.pdf>

⁶ Gladden, R.M., Goldberger, B.A., Halpin, J., Mattson, C.L., & O’Donnell, J.K. (2017). Deaths Involving Fentanyl, Fentanyl Analogs, and U-4770—10 States, July-December 2016. *Morbidity and Mortality Weekly Report* (66), 1197-1202. <https://www.cdc.gov/mmwr/volumes/66/wr/mm6643e1.htm>

⁷ Federal Grantees May Now Use Funds to Purchase Fentanyl Test Strips, CDC, April 7, 2021. <https://www.cdc.gov/media/releases/2021/p0407-Fentanyl-Test-Strips.html>

⁸ Pennsylvania Department of Drug and Alcohol Programs. (2020). Recovery Needs in Pennsylvania. https://www.ddap.pa.gov/Documents/Agency%20Reports/RecoveryNeedsSurveyReport_Sep_2020.pdf

⁹ Pennsylvania Department of Drug and Alcohol Programs. State Plan: 2019-2022. <https://www.ddap.pa.gov/Documents/Agency%20Reports/State%20Plan%20and%20Annual%20Reports/2019-2022%20DDAP%20State%20Plan.pdf>