



CCJ Corrections Officer Education Program: Medication Assisted Treatment in Jail

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Objective

Our goal is to improve perceptions of SUD and expand knowledge surrounding the use of MAT in corrections officers at the Cumberland County Jail.

Background

Substance Use Disorder (SUD) has a profound physical, social, and financial impact on people in the United States. The National Survey on Drug Use and Health reported that 19.7 million Americans were struggling with SUD in 2017¹. Furthermore, SUD's annual cost to society totals more than \$740 billion in workplace productivity, healthcare expenses, and crime².

Medication Assisted Treatment (MAT) is one way the healthcare community is responding to the SUD crisis³. MAT is composed of behavioral therapy and the use of FDA-approved medications such as methadone, naltrexone, and buprenorphine to help individuals cope with Opioid Use Disorder (OUD)⁴. Full recovery from OUD is more likely with MAT⁵. Research also demonstrates that MAT appears to reduce suicidality and crime during treatment of alcohol use disorder and OUD⁶. In the prison system specifically, MAT has been proven effective in treating OUD and preventing overdose upon release from incarceration. Overall, MAT is an incredibly useful, yet underutilized resource - especially in prisons and jails³.



Figure 1. The Cumberland County Jail in Portland, Maine⁷. The jail is in the process of introducing Medication Assisted Treatment for inmates.

The Cumberland County Jail (CCJ) in Portland, Maine recently received a grant to implement MAT for inmates who require this treatment. CCJ is in the early phases of incorporating the use of MAT for inmates who are pregnant or who have previously-established treatment with MAT prior to their incarceration. CCJ also provides Naloxone (a medication used to treat opioid overdose) to individuals upon their release.

Due to lack of training on the subject, the security staff at the jail is experiencing issues such as misinformation and skepticism about the MAT process. They also have difficulties challenging their perceptions of people with SUD/OUD, which are rooted in the stigma attached to this chronic disease. Our research demonstrates that corrections officers (COs) often have negative perceptions of MAT and SUD in general⁸. Through an educational program created by UNE health professions students, we hope to improve the COs general knowledge and attitudes about SUD and MAT. Hopefully, our educational series will facilitate better medical treatment for the inmates and a healthier, more amicable work environment for the COs.

Unfortunately, we had to postpone the delivery of our educational series until Summer or Fall 2020. Due to COVID-19, the Cumberland County Jail is not allowing visitors at this time. We are hopeful that students will be able to continue our mission in Summer or Fall 2020.

Introduction

This project is the result of a collaboration with the University of New England and the Cumberland County Jail. In late 2019, the warden at the jail contacted UNE and identified the jail's need for staff education about MAT for inmates.

As an interprofessional student-led team including the Physician Assistant, College of Osteopathic Medicine, Social Work, and Pharmacy programs, we developed a curriculum that will educate corrections officers about MAT and SUD. With the help of experts in the field, we have developed relevant learning objectives into two topics that will be presented to the corrections officers. Each of the two topics will be offered to each of the three shifts on three separate occasions, for a grand total of eighteen educational sessions. After curriculum delivery, a retrospective pre-post survey will be administered to gauge if our curriculum accomplished this goal.

Methods

Curriculum Development:

- **Learning Objectives** - A lesson template, learning objectives, and feedback were provided by Prof. Jenifer Van Deusen of the College of Osteopathic Medicine.
- **Design** - An evidence-based curriculum was developed by an interprofessional student team targeting the concerns and questions identified by a CCJ survey given to the COs.
- **Medium and Topics** - Two simple, 10-minute PowerPoint presentations with a standardized script for presenters.
 - **SUD and Stigma** - Promotes "disease model" of addiction and introduces the concept of Adverse Childhood Events. Encourages the use of non-stigmatizing language.



Figures 2 & 3. Above are original graphics from the SUD and Stigma presentation. The graphic on the left demonstrates the factors that contribute to SUD. The graphic on the right contrasts stigmatizing language with the preferred terms.

- **MAT and Myths** - Describes the medications used in MAT, focusing on those used in CCJ. Addresses myths and misconceptions about MAT and the benefits of MAT implementation for individuals, the prison system, and society as a whole.
- **Consultation with Local Experts** - Community health specialists at the Portland Needle Exchange offered their assistance to ensure our curriculum is accurate and consistent.
- **Faculty Communication** - Weekly or bi-weekly meetings with Prof. Van Deusen, Trisha Mason, and student participants allowed for discussion of logistics and project curriculum development.

Curriculum Delivery:

- **Date** - Due to COVID-19, the delivery of our curriculum will be postponed until a later date.
- **Participation Incentives** - Each session will offer free food and raffle tickets for prizes.

Pre-Post Survey:

- **Study Population:** COs at CCJ who have attended both curriculum presentations and who have signed an informed consent.
- **Survey:** Will consist of 7-10 questions and resemble existing surveys used in corrections facilities. The survey will be voluntary, anonymous, and address the COs thoughts and attitudes toward SUD and MAT. The survey will ask participants to reflect back on their initial perceptions before the presentations and if/how those perceptions have changed after completing the curriculum.
- **Survey Delivery:** To be given to COs willing to participate in the research portion of this project. The survey will be administered and collected by a CCJ employee after the second presentation.
- **Data Analysis:** The survey will use Likert scale answers. The responses will be analyzed for changes in attitudes toward topics discussed in the curriculum.

Results

This study will include results about changes in attitudes towards both SUD and MAT (methadone, buprenorphine, naltrexone). Pre and post survey questions will be modeled after the survey below⁸:

<p>SUBSTANCE reduces relapse SUBSTANCE reduces crime and re-incarceration SUBSTANCE does not reward criminals for being drug users SUBSTANCE does not prolong addiction SUBSTANCE should be used to maintain clients who have OUD SUBSTANCE is more effective than non-pharmacological approaches to retaining clients in treatment SUBSTANCE does not interfere with one's ability to drive a car SUBSTANCE reduces or blocks the effect of heroin</p>
<p>Methadone Methadone reduces relapse Methadone reduces crime and re-incarceration Methadone does not reward criminals for being drug users Methadone does not prolong addiction Methadone should be used to maintain clients who have OUD Methadone is more effective than non-pharmacological approaches to retaining clients in treatment Methadone does not interfere with one's ability to drive a car Methadone reduces or blocks the effect of heroin</p>

Figure 4. The above survey is comparable to the survey we will administer at the Cumberland County Jail.

The Results and Conclusions of this project will be determined after the curriculum is delivered and the survey results are collected and analyzed.

Conclusion

Medication assisted treatment is an evidence-based practice that is underutilized in the jail system. Only recently has it been implemented at the Cumberland County Jail. Our research demonstrates that MAT is often perceived negatively in the corrections community. With our educational program, we hope to improve perceptions of SUD and MAT by providing accurate information and reducing stigma. Ultimately, our goal is to improve treatment for the inmates and facilitate a safer, more amicable work environment for the COs at CCJ.

We made the difficult decision to postpone our curriculum delivery in order to preserve engagement and authentic discussion between the COs and student presenters. Although we must work within the limitations of the COVID-19 pandemic, we plan to deliver our curriculum in Summer or Fall 2020. After our curriculum is delivered, we will utilize the survey to determine if we met our goals for this project. We also hope that the results of our survey will contribute to the body of knowledge surrounding this topic to be used in similar projects across the United States.

Citations

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