

Community in Crisis: Confronting Our Heroin Epidemic and Leveraging Community Engagement to Address a Pressing Issue

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Abstract

In the fall of 2015, Northern Kentucky University began a sustained, multidimensional effort to explore our region's devastating heroin epidemic. The goal was to engage NKU's students, faculty, and staff with the community through public dialogue, experiential learning, and research. Taken together, our engagements would contribute to public understanding of the crisis and its scope, as well as to evidence-based solutions in every relevant sector, including social and human services, education, public policy, and health care. The initiative began as all such engagement should: with the university listening to the community and then structuring our plans according to that counsel. The purpose of this article is to describe this effort and its outcomes, thus providing a template for colleges and universities wishing to engage deeply around an important community topic.

Keywords: heroin, opioids, community engagement

Introduction

America's heroin crisis has reached epidemic proportions recently and rapidly. The Centers for Disease Control reported 3,036 overdose deaths from heroin in 2010 in the United States, a number accounting for just 7.9% of all drug overdose deaths. Five years later, in 2015, heroin deaths had risen fourfold to 12,989. What's more, heroin accounted for a higher proportion of U.S. drug deaths overall: 24.8% (*Hedegaard, Warner, & Miniño, 2017*).

Matters have only gotten worse. Officials have begun to compare the heroin epidemic to the onslaught of HIV and its resulting deaths in the 1980s and 1990s. In 2015, heroin deaths surpassed gun-related homicides, a significant shift given that in 2007 gun homicides outnumbered heroin deaths by more than 5 to 1 (*Ingraham, 2016*).

Northern Kentucky University (NKU), a regional comprehensive public university, is located 7 miles southeast of Cincinnati, Ohio, in an area hit especially hard by the epidemic. The tri-state region (Ohio, Kentucky, and Indiana) is part of a larger section of

the nation that has become a sort of Bermuda Triangle of heartland heroin, stretching north to Columbus, east to Portsmouth, Ohio, and into West Virginia. In West Virginia, the death rate from drug overdose in 2015 was 41.5% and in Kentucky and Ohio 29.9%, placing the three states among the nation's five worst for this measure (CDC, 2016). All three states also had a statistically significant increase in drug overdose rates from 2014 to 2015, with opioids—prescription and illicit—the main driver of drug overdose deaths (CDC, 2016).

Three counties—Boone, Kenton, and Campbell, collectively known as “northern Kentucky”—make up the Kentucky portion (population 384,790) of Greater Cincinnati (population 2.1 million). Heroin's impact, although severe statewide, has been disproportionately severe in northern Kentucky; 140 people died of a heroin overdose in 2014 and 2015 (*Kentucky Office of Drug Control Policy, 2016*). Though having twice the population, metropolitan Louisville had 111 such deaths in that same period, and Lexington, with roughly the same population as northern Kentucky, reported only 81 heroin overdose deaths in the same period (*Kentucky Office of Drug Control Policy, 2016*).

Behind the unabated statistical upswing is a story of strained resources as the legal, social services, and health care systems try to keep up. Police report that many of their arrests involve drugs and, increasingly, the drugs involved are opioids. In 2011 in northern Kentucky, the numbers of drug-related incidents and other incidents were nearly equal (*Kalapasev & Young, 2016*). In 2015, 66.3% of incidents were drug-related. From 2011 to 2015 the hospital system that serves northern Kentucky reported a nearly fivefold increase (252 to 1,168) in the number of patients brought to its emergency rooms for overdoses (*Kruetzkamp, 2016*).

The numbers confirm the scale and scope of the heroin crisis in northern Kentucky, but it is the personal stories of loss that drive home the devastation. No gathering, whether at church, school, or even the sidelines of a youth soccer game, is immune from stories of shared loss. Mention a family or friend touched and others listening will tell of their own acquaintances who are struggling with addiction or who struggled and lost. Those interactions are not just anecdotal. The Kentucky Health Issues Poll asks people whether they have family or friends who have experienced problems as a result of heroin. In northern Kentucky, 29.5% of the respondents answered yes in 2016; the next highest region was Lexington at 8.5%, and other regions hovered between 7% and 8% (*Foundation for a Healthy Kentucky, 2017*).

Heroin's relentless and ravaging toll would be a clarion call to any university to get involved, but especially to a university committed to community engagement, as NKU is. Community engagement is one of the five primary goals listed in the university's strategic plan, and it is embedded in both the academic and cocurricular structure. When the Carnegie Foundation created a new designation for community engagement, NKU was part of the inaugural class in 2006. Also drawing NKU to the heroin crisis was an interest in population health, exemplified by construction on campus of the \$97 million Health Innovation Center. Scheduled to open in fall 2018, the center signals NKU's intention to examine population health through a transdisciplinary lens since complex problems require collaborative approaches that free expertise from silos that inhibit innovative solutions. NKU's focus on heroin was designed to demonstrate the value of this approach. How can we prepare students to think differently about the full range of health issues, from wellness to care and policy? And how can the university contribute to community understanding and solutions?

Activities

Community in Crisis launched in September 2015 when the NKU provost convened two planning meetings, one with faculty from across disciplines and one with community members. The morning meeting established an internal team of champions; the afternoon brought the community voice to the table. Author and journalist Sam Quinones attended both sessions. His book *Dreamland: The True Tale of America's New Opiate Epidemic* is widely considered a "must read" to understand how heroin made it to the heartland. The book became a touchstone as NKU and our partners mapped our collaboration, and Mr. Quinones became our frequent collaborator. A portion of the reporting for his book took place in northern Kentucky, so he knew the extent of the crisis here.

Our first meeting with community members proved especially key as we asked them how the university could join them in raising awareness and finding solutions to the heroin crisis. Many at the table were advocates, having taken up the cause after losing a loved one or after seeing heroin's impact on schools, the job market, and health care. All were deeply appreciative of NKU's involvement because it validated and amplified their cause. They advised NKU on general themes that should get attention, including erasing the stigma of addiction as essential to gaining community support for evidence-based solutions, such as a needle-exchange program. One suggestion was to mobilize churches; in response, NKU and local

government coorganized “The Heroin Epidemic: A Conversation with Northern Kentucky’s Faith-based Community,” which drew 135 participants to a local social services center in February. Clergy from a diversity of faiths (Christian, Jewish, Muslim, and Hindu) attended to learn about the heroin epidemic and carry that learning back to their respective institutions and audiences. Speakers provided an outline of the epidemic, its impact, and the efforts to address it. Small-group discussion followed. Agencies addressing addiction had display tables outside the meeting rooms. Faith leaders also were invited to consider ways to collaborate and to exchange ideas on how to do so.

The faith-based conversation was one of several events leading up to a culminating week of events in April 2016. Among the other precursor events were two writing workshops, also held in February—one on campus and one in the community. Mr. Quinones conducted both in collaboration with members of the NKU English Department and its nonfiction writing program. Participants were encouraged to tell their own experiences with heroin and addiction. March brought two additional events. NKU cosponsored a community luncheon honoring the cofounders of Northern Kentucky Hates Heroin, a grassroots group that advocates for public policies that address the heroin epidemic. The university also cosponsored a town hall meeting to discuss evidence-based solutions to the heroin crisis, including needle-exchange programs and supervised injection facilities.

The centerpiece of Community in Crisis came in April 2016, when Mr. Quinones visited campus for 3 days, during which he met with students and community partners both for small-group discussion and in larger settings (15 sessions total). NKU also connected Mr. Quinones with local media for interviews in the Cincinnati market and on Kentucky Educational Television. The main event of the visit was Mr. Quinones’s public talk on April 18, which packed NKU’s 650-seat concert hall to standing room capacity. Mr. Quinones spoke first, explaining how the heroin crisis unfolded nationally as cheap, powerful powder made its way from Mexico to the Midwest with a sales model that made ordering black tar heroin as easy as ordering pizza. He spotlighted community-driven approaches to reverse the tide, including an evidence-based treatment program housed in Kenton County’s jail. Mr. Quinones then joined a reflection panel that included an NKU graduate student (and former addict) who is operating the jail program that Mr. Quinones had mentioned; a parent who had lost an adult child to a heroin overdose; an NKU professor who studies the

science of addiction; and the director of the Northern Kentucky Health Department, which has adjusted its resources in response to the heroin crisis. Drawn by the gripping stories told from the stage, the audience stayed put for 2 hours, taking full advantage of a 30-minute question and answer period to engage with Mr. Quinones and the panel. NKU arranged for social workers and health counselors to be present to talk with any audience members who wanted that service afterward.

The next morning, NKU cohosted “Breakfast with Sam Quinones: A Discussion with Northern Kentucky Public Officials,” attended by 65 local and state public officials. Afterward, Mr. Quinones returned to campus to speak to an audience of 200 educators, social workers, and civic leaders. They were gathered for an all-day think tank on heroin and stigma—a theme suggested by our community advisers.

The year of engagement around addiction wound down with NKU faculty, staff, and friends participating as a team in the NKY Hates Heroin 5K Walk & Run. This was the third year for the benefit but the first year for NKU to organize campus participation. The total count of direct participants in NKU’s engagement events over the academic year was approximately 1,200 people in addition to the radio and TV audiences, which occurred in a regional market of 2.1 million people.

Lessons Learned

NKU has derived some “how-to” lessons from *Community in Crisis*, beginning with personnel capacity. Although leadership and commitment from university administration is key in agenda-setting and ensuring academic buy-in across campus, the desired alignment also takes coordination. A point person is required: someone who can take ownership in organization, follow through, and ensure audiences for the activities. Having the key university players as part of a planning committee is important (the marketing office, for example, worked with our team to design postcards and a website); however, the overall effort requires someone who thinks about it every day, all year, and who stays in touch with team members to keep the project moving forward and on schedule. NKU found this support initially in the existing Scripps Howard Center for Civic Engagement, which is accustomed to coordinating campus–community activities. For the longer term, initiatives related to the Institute for Health Innovation will rest

with an executive director, a position now being filled in anticipation of the Health Innovation Center's fall 2018 opening.

Of equal importance to a point person is a robust and inclusive team. We found both internal and external partners to be essential.

- **Internal partners:** Support of the academic administration was important from the beginning; other vital elements included the university's advancement office to help raise funds as well the university's government and corporate relations office to ensure buy-in from the public and business sectors and frequent contact with deans, chairs, and the faculty in general.
- **External partners:** We tried to engage early and often with population health players in our region: nonprofit agencies providing health and social services; community advocacy groups; and government officials at the city, county, state, and federal levels. All of those partners were part of our planning, practically from Day 1. Their voices were crucial in guiding what we did and, importantly, in ensuring attendance at our events and participation in our programming. There was no doing this without them.

Outcomes

Community in Crisis brought tangible results beyond the discussion fostered. Public policy in northern Kentucky is being rewritten around evidence-based solutions, including a nascent needle-exchange program that the NKU activities did not initiate but did help build political will to support. The faith community is more engaged and more collaborative. Our engagement also produced tangible outcomes involving our students:

- A student journalist focused on heroin in the campus newspaper. In a unique collaboration, her stories appeared jointly in an online "newspaper" operated by a Cincinnati TV station. This also resulted in a summer internship for the student at the TV station, which in turn led to her full-time employment at the station.
- NKU operates a nationally recognized student philanthropy program, in which classes invest in local nonprofits. One class invested its \$2,000 in a residential addiction treatment center. Before investing, students visited with the center's staff to learn about the work there. The funds

bought furniture for a support group room that the center could not have afforded otherwise.

- The on-campus writing workshop mentioned earlier ended with a call for submissions for a special publication, *True NKU: Nonfiction Poetry and Prose Inspired by the Sam Quinones Writing Residency*. There was a 34% acceptance rate for submissions. This publication (500 copies) was distributed in the lobby of the concert hall before the public talk by Mr. Quinones in the spring.
- Two NKU students majoring in broadcasting made a 90-minute documentary on the heroin epidemic in northern Kentucky. They followed a fellow student addicted to heroin on a buy—and then interviewed her later when she entered recovery. NKU hosted a premiere of the documentary on campus, drawing about 80 people. Portions of the students' work were also included in a second documentary coproduced by an NKU faculty member and broadcast statewide on Indiana's public television network.
- In February, NKU's chapter of the Society of Professional Journalists hosted "The Heroin Addiction Story," a forum on how the media can report on the issue with skepticism and sensitivity while resisting the urge for sensationalism. More than 75 students attended, hearing from journalists, a police chief, and addiction treatment specialists.
- Twenty posters illustrating student research on addiction topics were part of an expo in the lobby prior to the community talk by Mr. Quinones. For example, one student team surveyed 295 NKU students about harm-reduction strategies (respondents were reluctant to accept needle-exchange programs, as is the public generally, but open to improved access to medication-assisted treatment).
- On the day of the Quinones lecture, an NKU team organized a lunch-hour expo in the Student Union that included 15 agencies involved in antiaddiction and heroin education. Outside, an old Volkswagen microbus was parked on the plaza. "Casey's Bus" belonged to a 22-year-old college student who died of a heroin overdose in 2002. From the bus, Casey's parents and other volunteers distributed information about addiction treatment and support; they also trained visitors on the use of the opiate overdose antidote Narcan (naloxone). Those who were trained received overdose response kits (60 kits were distributed).

The internal outcomes resulting from Community in Crisis also involved broader academic impacts:

- The nursing program is revising how it teaches about addiction. The program is in the process of developing a simulation in which the students will be confronted with teaching opportunities or other interventions related to patients who have been sent home on opioids.
- The Department of Counseling, Social Work and Leadership, and the Department of Psychological Science have proposed a new certificate program. The 21-credit, graduate certificate will focus on addictions research and practice. It targets people with undergraduate degrees in helping professions, such as human services, social work, counseling, psychology, and nursing, and will prepare them for work as counselors or researchers. As one member of the proposal team explained: “While planning events about the opioid epidemic, we discovered previously unrecognized and complementary areas of interest and expertise.”
- NKU has a new Signature and Emerging Research Area competition to identify areas of strength and potential growth. One of the projects selected is “Population Health: Opioid Dependent Pregnant Women & Neonatal Abstinence Syndrome.” It is led by faculty from NKU’s College of Informatics, and it includes contributions from Education and Human Services, Nursing and Health Professions, Arts and Sciences, and Business. The NKU team is evaluating infrastructure and gaps in care for 60 pregnant women who are being treated for addiction at a local clinic.
- The College of Education and Human Services collaborated with the Kenton County Detention Center to secure grant funding to monitor and improve the center’s heroin prevention and treatment efforts with the goal of ensuring evidence-based practices that work. The work includes a focus on Quick Response Teams that intervene during and after a 911 overdose call as a way to encourage treatment rather than incarceration.

Community in Crisis did not end with the academic year. Rather, the year was a catalyst for ongoing engagement and effort. In February 2017, NKU cohosted a follow-up town hall on the

opioid crisis. “Heroin by the Numbers” showcased a state database providing ready access to statistics about the crisis that would be useful to health and social services professionals, researchers, and advocates. The forum was repeated as a lunch-and-learn on campus later in the day for faculty. The town hall drew about 65 people; the lunch-and-learn about 20. Also, the Scripps Howard Center for Civic Engagement and the Kentucky Campus Compact worked with the National Issues Forum in Dayton, Ohio, to develop a discussion guide that can be used to foster civil, informed dialogue about policy options for addressing the opioid epidemic. The Forum had discussion guides on a range of topics (end-of-life care, income inequality, hunger, safety, and justice, to name a few) but not on the heroin crisis in America. In late 2017, a guide was released and is now in use nationally as a tool for small-group discussion around public policy approaches to addressing the epidemic. Also as a result, NKU arranged to train facilitators to use the guide for discussions at civic clubs, libraries, church basements, and other community venues.

NKU also has remained deeply engaged with its community partners. The Northern Kentucky Heroin Impact Response Task Force was formed in 2012 to bring various agencies working on the opioid epidemic together to coordinate effort and focus. NKU faculty members were involved from the inception, but *Community in Crisis* boosted NKU’s involvement in the task force, including in planning its 2016 annual conference that drew nearly 200 people for an update on regional efforts.

The most lasting outcomes of *Community in Crisis* are still ahead. The first involves the formation of the Ohio River Valley Addiction Research Consortium (ORVARC), which seeks to find ways for colleges and universities in the “heroin belt” of the Ohio River Valley to collaborate on research initiatives related to the opioid epidemic. Mr. Quinones suggested such a consortium in an op-ed written in preparation for his NKU visit. An NKU team has developed a proposed structure for the consortium and hosted initial meetings to launch it with an eye toward intercollegiate and interdisciplinary cooperation on research projects and an annual conference. Although this consortium remains a work in progress, initial support has included colleges and universities in Illinois, Indiana, Kentucky, Ohio, Tennessee, and West Virginia, and scholars from medicine, social work, addiction treatment, nursing, and other fields. NKU hosted 135 people from higher education and community agencies in those states in late 2017, for an inaugural ORVARC symposium. Though still in start-up

phase, ORVARC has an advisory board and is on track to host a second symposium on another campus in 2018. Our work in launching ORVARC also connected NKU to the annual National Rx Drug Abuse & Heroin Summit in Atlanta. NKU will be lead sponsor of the 2018 summit—a role that will permit us to discuss our engagement on this topic and to strengthen our ties to regional and national partners as we embed addiction teaching and research into the NKU academic core.

One of the most significant lasting changes brought about by *Community in Crisis* is internal and far more generalized than the topic of heroin. By working together in real time to marshal university resources around a single theme, NKU's administrators and faculty created an internal template for collaboration across disciplines and colleges. The template already is in use again. For 2018, NKU has invited author and researcher Matthew Desmond to campus to talk about his book *Evicted: Poverty and Profit in the American City*. The book looks at housing insecurity, which—like heroin and addiction—is a population health topic, as being homeless or spending a disproportionate share of personal income on housing represents a threat to individual and family health and, when multiplied across a community, represents a threat to population health. As *Dreamland* was for heroin addiction, *Evicted* is for housing insecurity. Certainly we could have engaged around heroin and housing without them, but the books, their authors, and the expertise they bring provided a common understanding of the themes and issues among all players (on campus and off) and a focal point for programming, activities, and teaching.

Thinking about the internal changes more broadly, the activities described in this article have reframed our thinking around our Health Innovation Center as opening day approaches. We've stepped away from thinking about it as a building and instead have focused on what will happen inside—a space where transdisciplinary approaches connect to real-life community issues and needs.

Conclusion

Community in Crisis was intended to amplify the existing efforts in our community to inform the public, foster collaborations, and contribute to evidence-based solutions while also having meaningful impact on campus. A successful year also would position NKU to remain engaged on this topic while simultaneously establishing a template for similar comprehensive engagement

around other topics important to our community. Those goals were met. Doing so required an open dialogue at the start with key stakeholders who could guide our efforts; it required executive-level leadership to ensure resources and commitment; and it required a willingness on the part of our students, faculty, and staff to align with the common goal of elevating public understanding of the deadly, devastating heroin crisis in northern Kentucky.

Through the efforts outlined in this document, NKU provided a platform for in-depth and ongoing discussions about the challenges associated with this epidemic. Our community is now more educated on this topic. New connections and partnerships are forming throughout our region to address these challenges. And our university is now more experienced in multidimensional engagement on a population health issue as our Health Innovation Center moves closer to its opening day.

NKU brought some strengths to this effort, including an existing university infrastructure committed to community engagement. Ours is the youngest of Kentucky's eight state universities, founded in 1968 with a commitment to give back to the community that sought state funding for a regional, comprehensive, public university. Subsequent decades saw unprecedented community engagement and new strategic partnerships, all of which brought national recognition to the university for its contribution to the economic and social vitality of northern Kentucky. The Community in Crisis initiative in the 2015–2016 academic year followed in this tradition and also demonstrated new ways that NKU could take a lead role in educating the community on the issue and on practical, workable solutions.

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