

**Title of the Satellite Meeting: Education and Training Section**

**Date: 30 July 2022**

**Location: University College Dublin**

## **Fighting opioid use disorder, one library and community at a time**

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### **Abstract:**

*Opioid-related deaths increased by 28.5% in the US in 2020 from the year before. Two health crises, Covid-19, and an increase of fentanyl, have worked synchronously to create a public health disaster. While the opioid crisis has exploded since the introduction of fentanyl, people who use these narcotics have traditionally been medically underserved due to the stigma and illegality of their substance abuse issues. Despite evidence that this is a public health catastrophe, this issue has received insufficient attention in the past 18 months. The OCLC has created a toolkit to arm public libraries to assist in the opioid epidemic. This toolkit aids library staff to use local data to understand the opioid epidemic in their communities, identify community partners, offer community engagement, and promote self-care for library professionals. This paper describes the adaptation of the OCLC's opioid response toolkit at public libraries in the southern US- including the creation of the social justice-oriented curriculum, to the delivery in libraries around the region hit hard by opioids. As anchors of the community, libraries are a natural partner for information provision and outreach related to the opioid crisis.*

**Keywords:** Opioid use disorder; public libraries, health information outreach, community partners

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### **EXTENDED ABSTRACT**

Opioid use disorder (OUD) is at a crisis point in the United States and in the Southeast. Opioid related deaths increased by 22,250 across the United States in 2020 from the year before- a 28.5 percent increase. Currently, provisional data predicts that 2021 deaths will be even higher (Ahmad, Cisewski, Rossen, and Sutton, 2022). In 2017, Florida's increase across the state was closer to 27 percent with some areas in the north being particularly hard-hit (Ahmad, Rossen, and Sutton, 2022). Jacksonville, for example, had a 36 percent increase in overdose deaths (The Drug Overdose Toll in 2020 and Near-Term Actions for Addressing It, 2021). It is projected by the Florida Department of Health that actual drug overdose deaths have increased by 43 percent in Florida since the onset of the pandemic. Two health crises, Covid 19 and an increase of readily available fentanyl, have worked synchronously to create a public health disaster.

Likewise, homelessness in the Florida panhandle has been on the rise since the beginning of the pandemic with a 17 percent increase in the unsheltered homeless population as of last September first (Thomas, 2020).

Despite evidence that this public health crisis is imminent, this significant issue has received insufficient attention in the past two years while the pandemic has been the focus of the majority of public health interventions. During this time, the Online Computer Library Center (OCLC) created a toolkit to arm public libraries to assist in the opioid epidemic. And rightfully so. Success has been demonstrated when community organizations, such as libraries and homeless shelters, implement health information outreach programs targeting underserved groups (Barr-Walker, 2016; Mi, Stefaniak, & Afonso, 2014). This paper describes the adaptation of this toolkit to public libraries in North Florida and South Georgia of the United States, to conduct information outreach to the traditionally underrepresented populations of the homeless and people with OUD, by designing and disseminating replicable educational materials to librarians working at public libraries in particularly hard-hit areas of the opioid epidemic.

This paper will discuss people who suffer from OUDs and people who experience homelessness as being similar in vein. People who experience homelessness have a statistically significant higher likelihood of experiencing OUD and opioid overdose (Yamamoto, 2019). For this reason, this project jointly focused on the homeless and OUD populations as paths to opioid harm reduction. While it is often difficult to isolate populations that suffer from OUD because of stigma and their fear of legal consequences, it is simpler to work directly with the homeless population through community organizations that serve them- which are prevalent in the United States. In doing so, people who experience homelessness and are more likely to suffer from OUD are being targeted with resources and assistance.

The goal of this project was a cohesive curriculum utilizing the OCLC toolkit that would be of benefit to librarians in order to aid this highly at-risk population. The author worked with a graduate assistant in health communication to create the curriculum, and a public health consultant who evaluated and made recommendations for the project regarding its efficacy and technical accuracy. The training was designed to assist librarians working with people currently experiencing homelessness and those who suffer with OUD, thereby preparing public librarians to improve their health literacy and address their health information needs. In addition, this project will prepare public library staff to effectively respond to the opioid epidemic by developing training modules that address the following:

- using the United States Centers of Disease Control and local health department data to understand the opioid epidemic in their local community;
- identifying the key partners, programs and resources-particularly from the National Library of Medicine and National Institutes of Health- available within the support network within their communities;
- strategically positioning themselves within this network;
- developing an understanding of how the long-standing systemic health and social inequities have put many people from racial and ethnic minority groups at increased risk of becoming homeless and developing OUD, and
- assessing the critical needs, including those of health literacy, of these groups in order to offer community engagement and programming options for the target population.

This project aims to support and improve a traditionally underserved community's access to health information, therefore enabling them to make informed decisions about their own health. Much of the OCLC toolkit focuses on building community partnerships. Therefore, this curriculum emphasizes a strategic focus to develop collaborative relationships with public libraries and community stakeholders in public health and enhance the skills of library staff to train a target population on locating and evaluating health information. This project was also undertaken to provide access to quality health information for consumers and developing and implementing an outreach and education program that focuses on promoting health literacy to an underserved community. This resultant educational intervention has the potential to address the harm reduction health information needs of a traditionally underserved group. Finally, this project is meant to create replicable programming for other libraries and community organizations.

**The following were the major goals of this project:**

Goal 1: Development and completion of an effective program, using the OCLC toolkit, for library staff to impact the health literacy and health information needs of people who are experiencing homelessness or suffer OUD, so that they will be better equipped to seek health information and, ultimately, care in the US.

Goal 2: Promotion of opioid harm reduction and community health information resources to public librarians.

Goal 3: Dissemination of the resultant curriculum to public libraries so that they will be able to implement this programming in their communities.

Goal 4: Promotion of the final curriculum.

To create the curriculum, the author worked with her partners from public health, medicine, and education. She was able to interview and hire a graduate student from the School of Information due to a grant from the National Network of Libraries of Medicine. This funding also paid for a consultant in harm reduction from the School of Public Health to assist with this project. The development of the curriculum took several months and was just recently completed. In completing this curriculum goal 1 has been achieved. The rest of the goals rely upon the actual delivery of the curriculum to public librarians, then the follow-through of promotion afterwards. Currently, this project is in the phase of being promoted to libraries with several interested. By the time the author presents at IFLA, she will have delivered the curriculum and will be able to discuss the experience then.

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