**Prevention Targeting Use Case**

Prevention: Identifying geographic or demographic focal points for substance abuse prevention Strategies

**Use Case Description:**

The Department of Human Services is responsible for managing the Commonwealth’s child welfare and

child development and early education programs, as well as providing benefits to individuals who

struggle with mental health and substance abuse issues, as well as various types of disabilities, including

intellectual, developmental, and physical. The opioid epidemic has impacted people from all walks of life

in Pennsylvania, and therefore has impacted each of these programs and benefit types. Children are

being removed from their parents’ care because of opioid abuse in increasing numbers. Children are

being born with developmental delays because of exposure to opioids in utero. People of all ages are

increasingly in need of substance abuse benefits to address addictions to opioids. The increased impact

on individuals and families across the Commonwealth, along with the increased strain on DHS’s systems

and resources make a strong case for the necessity of preventing future exposure to opioids for the

people we serve. Knowing where there is the most risk or exposure to opioids will help us identify where

to focus our prevention efforts. DHS has traditionally relied on analysis of a few key data points to

identify high-risk areas, but the time is right to bring our full data analysis capabilities to bear to

determine where the most help is needed. By layering various data sets that could indicate risk of

exposure to opioids as evidenced by high incidence of adverse consequences of opioid use and

organizing that data geographically, DHS can identify places to focus prevention resources.

**Actors:**

* DHS prevention program staff
* Other Commonwealth agency prevention program staff
* Funders of prevention work

**Triggers:**

* There is a limited amount of money to spend on prevention activities, which requires prioritization of target populations.

**Preconditions for Use:**

* DHS or another Commonwealth agency applies for or receives funding for prevention activities that should or must be allocated according to priority

**Post-conditions:**

* DHS or another Commonwealth agency determines the geographic locations where prevention dollars are most likely to yield positive results based on exposure to risk factors

**Normal Flow:**

1. A Commonwealth agency applies for or receives funding for opioid use prevention-related activities.
2. The agency staff consults a heat map or assessment of at-risk populations to determine geographic or demographic areas in most need of prevention support based on data demonstrating a high incidence of adverse consequences of opioid use.
3. Agency staff focus prevention dollars and resources in areas of most need, getting the biggest impact per dollar spent.

**Summary:**

Using the recommended and any other relevant available datasets, layer data that demonstrate adverse

consequences of opioid use, such as overdose death, drug crime-related arrests, neonatal abstinence

syndrome (babies who are born dependent on substances), overdose reversals, exposure to drug use

among youth, child welfare system involvement, or receipt of an Opioid Use Disorder diagnosis.

Evaluate the layered data to determine geographic or demographic “hot spots” where the highest

incidences of adverse consequences of opioid use are experienced.

Present the layered data in an easy-to-understand visual representation of geographic areas or

demographic groups that experience the highest levels of exposure to adverse consequences of opioid

use so that state officials or funding entities may target their prevention activities to yield the greatest

results.

**Recommended Sources:**

1. DDAP’s Youth ATOD surveys: https://isra.hbg.psu.edu/ddapdashboards/Dashboards/tabid/2589/Default.aspx
2. DDAP’s Arrest data: https://isra.hbg.psu.edu/ddapdashboards/Dashboards/tabid/2589/Default.aspx
3. Command Center NAS data: https://data.pa.gov/stories/s/9q45-nckt/
4. Command Center Overdose data: https://www.overdosefreepa.pitt.edu/know-the-facts/viewoverdose-death-data/
5. DEA Overdose Death data: https://www.dea.gov/docs/DEA-PHL-DIR-034-17%20Analysis%20of%20Overdose%20Deaths%20in%20Pennsylvania%202016.pdf
6. Treatment admissions: http://www.ddap.pa.gov/Agency%20Grant%20Infomation/OpioidSTR%2021%20Century%20Cures%20Grant%20Needs%20Assessment%20Data/Cures%20Opioid%20Treatment%20Demographics%20Rates.pdf
7. Command Center naloxone reversal data: https://data.pa.gov/stories/s/Rescue/dji6-fb2x
8. MA individuals with OUD diagnoses: http://www.ddap.pa.gov/Agency%20Grant%20Infomation/OpioidSTR%2021%20Century%20Cures%20Grant%20Needs%20Assessment%20Data/MAP%20-%20MA%20Indiv%20w%20OUD%20-%20Rate%20per%201000%2013%20July%202017.pdf
9. PA Coroners Association report: http://www.pacoroners.org/Uploads/Pennsylvania\_State\_Coroners\_Association\_Drug\_Report\_2015.pdf
10. Children removed from parents’ care due to parental substance abuse data (forthcoming on data dashboard in September)
11. General protective services reports of parental substance abuse data (forthcoming on data dashboard in September)