

Knox County Substance Misuse Response

# Strategic Plan Roadmap

August 2019

Compiled by:

Amy Dolinky, Substance Misuse Response Coordinator  
Knox County Health Department, Knox County, Tennessee





## Letter from Knox County Mayor Glenn Jacobs

Thank you for joining us today at the 2019 Mayors' All4Knox Summit. Your participation and support are critical to our success.

Like almost everyone, addiction and substance misuse have touched my life. One of my best friends has been in recovery for ten years. Sadly, out of the many people I know who have struggled with overcoming their substance misuse, he is the only one who has not relapsed, spiraled down the pit of self-destruction or, in the worst cases, died. Nevertheless, he spends every minute of his life with a Sword of Damocles looming over him. One bad choice and his life could careen out of control.

And my friend is not alone. Millions of Americans suffer from substance dependency. Public health officials have identified this problem as an epidemic. East Tennessee has been particularly hard hit.

If we are to confront this issue, we must have a frank discussion about the nature of substance misuse. That means that we must get rid of the stigma and misinformation that cripple our ability to appropriately deal with this problem. We must also join forces because no single agency, organization or effort can address this alone.

Fortunately, our community is coming together around this issue, mainly through the efforts of the Metro Drug Coalition and Knox County Health Department. This is not an issue that can be rectified overnight. If we are to put an end to this epidemic, it will require the involvement of the ENTIRE community. Thank you for playing a part in this important effort. Our strength is in our collaboration.

Sincerely,

A handwritten signature in blue ink that reads "Glenn Jacobs". The signature is written in a cursive, flowing style.

Glenn Jacobs  
Knox County Mayor



## Letter from City of Knoxville Mayor Madeline Rogero

Welcome to the 2019 Mayors' All4Knox Summit.

Many of you have been working on issues of substance misuse throughout your career. Others have become involved in these discussions because of a friend or family member.

Whatever your reasons, we are glad to have you join this effort to address substance misuse, specifically the opioid crisis, and related issues in our community.

While progress has been made in some areas, we have a long way to go. Our ability to collaborate as a community to address this challenging issue is critical to our success.

All4Knox is an important opportunity for organizations and individuals to engage on a new level. I look forward to working together to develop a strategic plan and shared goals.

Thank you for committing your time to make Knoxville a healthier city for everyone.

Sincerely,

A handwritten signature in blue ink that reads "Madeline Rogero". The signature is fluid and cursive.

Madeline Rogero  
Mayor



## Vision

Decrease the impact of substance misuse within Knox County, Tennessee.

## Mission

Create community-level change and a coordinated response to better address the substance misuse epidemic.

## Core Principle

Commitment to instilling hope and building community through collaboration, persistence and treating all with respect and care.

# Introduction

**Substance misuse in Knox County, Tennessee, continues to be an issue of great importance, impacting those who live, work and travel to the area.**

Knox County lost 326 individuals to overdose death from drugs in 2018, with an age-adjusted rate of 71.2 people per hundred thousand (Mileusnic-Polchan & Lott, 2019). Comparatively, the U.S. age-adjusted rate is 21.7 people per hundred thousand (Centers for Disease Control and Prevention [CDC], 2018). In 2017, our county had the highest percentage increase in opioid overdose deaths in the state at 41 percent (Mileusnic-Polchan & Lott, 2018). While death is a risk for those misusing substances, there are also many medical, social, economic and community issues from addiction. This problem touches nearly every aspect of our community, and it will take all of us working together to turn the tide.

This plan is intended to serve as a working document from which a three-year strategic plan will be developed with support from nine community sectors, chosen based on the guidance from the Substance Abuse and Mental Health Services Administration (SAMHSA), a national substance misuse prevention agency.

## COMMUNITY SECTORS

- Business
- Education
- Faith-based communities
- Family/community
- Government
- Health care professionals
- Justice systems
- Non-profit/service organizations
- Treatment/recovery/harm reduction

This plan is rooted in a desire to improve the health and well-being of the people of Knox County through a communitywide and coordinated response to the substance misuse epidemic. This will require changes to how we address substance misuse as a community. Every effort will be made to utilize evidence-based and best practices, strategies we know work in other communities, while also acknowledging innovation will likely be critical.

Addiction is a chronic relapsing illness requiring comprehensive approaches. Every person in our community has a role to play and can individually and collectively create change.

As new partnerships develop and more people become involved in addressing substance misuse, our collective awareness of the problem will increase, which will result in a reduction in stigma, encouraging more people to seek help. As more people engage with services, we should be able to more accurately capture the extent of the substance misuse problem in Knox County.

**■ This plan is a working document in which changes will be made as new collaborators join the initiative, new practices are created and as additional planning ensues. This plan represents the strategic roadmap, the pathway to a three-year strategic plan, developed from 2019 through 2020.**

# Scope of Substance Misuse in Knox County

The scope of substance misuse is broad and far-reaching. To explain this complicated issue, we must review the full spectrum. It is important to begin with the upstream causes, such as childhood trauma, then move into the behaviors and factors that can lead to substance use disorders. Finally, we must review both the devastating individual impacts and deaths, as well as the community outcomes and economic costs.

“  
Trauma is the  
gateway drug.”

- Children’s Mental  
Health Network

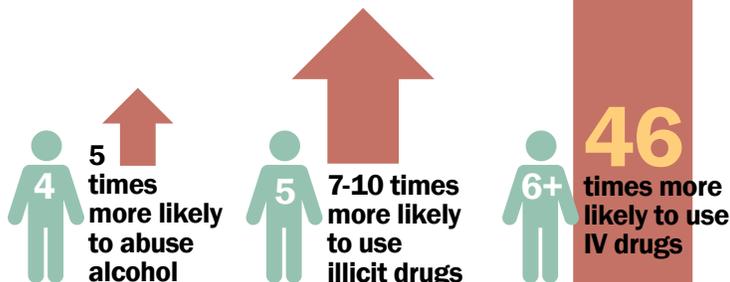
## Adverse Childhood Experiences – ACEs

According to the Tennessee Department of Health, Adverse Childhood Experiences, or ACEs, are stressful or traumatic experiences that disrupt the safe, nurturing environments that children need to thrive. Examples of ACEs include child abuse (physical, sexual or verbal), physical or emotional neglect, witnessing a mother being abused, divorce, and losing a parent to death. ACEs can also occur when family members are depressed or diagnosed with other mental illness, addicted to alcohol or another substance, or in prison. Exposure to ACEs can lead individuals toward the adoption of unhealthy habits and the onset of negative long-term health and economic issues, including smoking, obesity, asthma and substance misuse.

## Adverse Childhood Experiences and Long-term Health and Social Problems

### ACEs and Substance Misuse

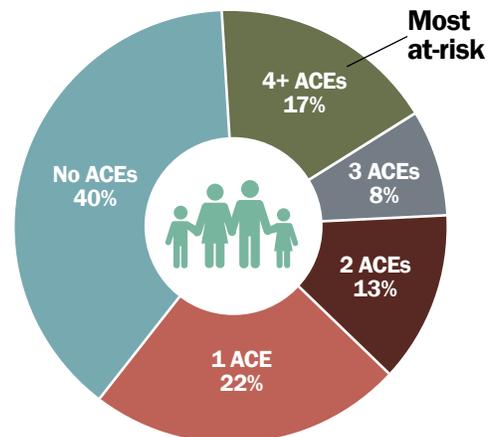
People who experience four or more ACEs are five times more likely to abuse alcohol. People who report five ACEs or more are 7-10 times more likely to report illicit drug use. Individuals who have six or more ACEs are 46 times more likely to use drugs intravenously (IV) than people who report no ACEs.



Source: *Origins of Addiction, Felitti*

### ACEs among Tennesseans, 2014-2017

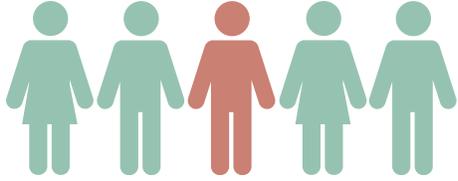
As the number of ACEs increases, so does the risk of long-term health and social problems.



Source: *Sycamore Institute analysis of Tennessee Department of Health’s Behavioral Risk Factor Surveillance System 2014–2017 data, provided by Office of Surveillance, Epidemiology, and Evaluation, Division of Policy, Planning, and Assessment.*

# Substance Misuse Behaviors among Knox County Youth

## MARIJUANA

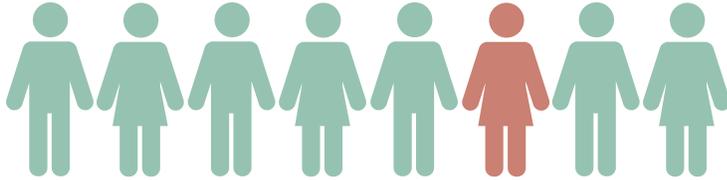


- One out of five high school students (20.7%) reported using marijuana during the past 30 days. (18.1% for Tennessee YRBS, 2017; 19.8% for U.S. YRBS, 2017)

## ALCOHOL



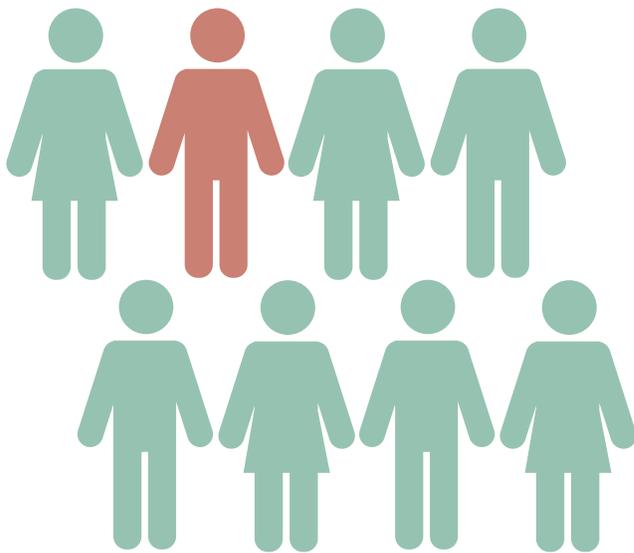
- One out of four high school students (25.2%) reported they had at least one drink of alcohol (excluding alcohol used for religious purposes) during the past 30 days (current alcohol use). (25.8% for Tennessee YRBS, 2017; 29.8% for U.S. YRBS, 2017)



- One out of eight high school students (13.5%) reported binge drinking (five or more drinks for males on one occasion and four or more for females) during the past 30 days. (11.0% for Tennessee YRBS, 2017; 13.5% for U.S. YRBS, 2017)

## OPIOIDS

- One out of eight high school students (13.0%) reported they had taken prescription pain medications (such as codeine, oxycontin, Vicodin, hydrocodone, and Percocet) without a prescription. (13.2% for Tennessee YRBS, 2017; 14.0% for U.S. YRBS, 2017)



MIDDLE SCHOOL STUDENTS

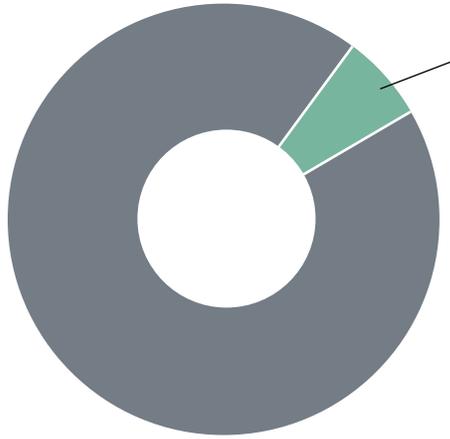
# 6.4%

More than six percent of **middle school students** reported they had taken prescription pain medicine without a prescription.

**Sources:** 2017 Knox County High School Youth Risk Behavior Survey (YRBS); 2018 Knox County Middle School Youth Risk Behavior Survey (MSYRBS); Tennessee Youth Risk Behavior Survey, 2017; U.S. Youth Risk Behavior Survey, 2017. The Knox County YRBS and MSYRBS are conducted in Knox County public schools.

# Substance Misuse Behaviors Among Knox County Adults

## MARIJUANA

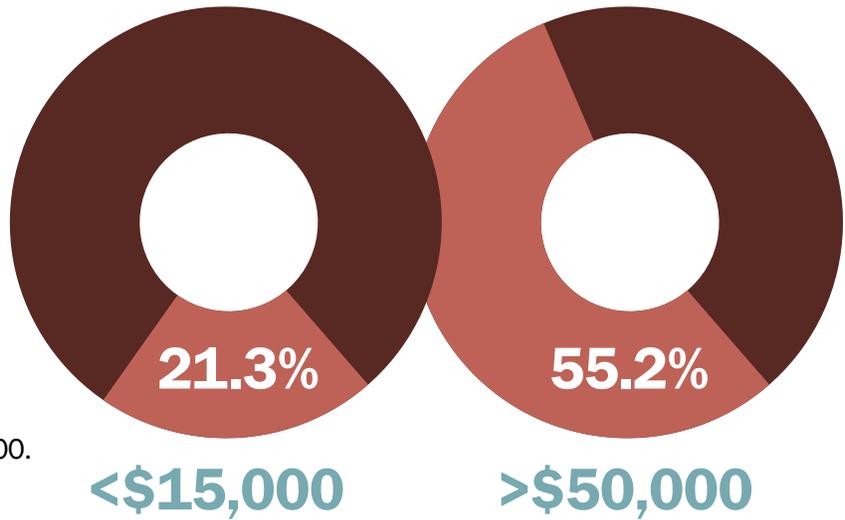


**6.4%** of adults **used marijuana** or **cannabis** one or more times during the past 30 days, 2018.

**Note:** No state or federal comparison data. This was a new question on the 2018 Knox County BRFS.  
**Source:** 2018 Knox County Behavioral Risk Factor Survey (BRFS)

## ALCOHOL

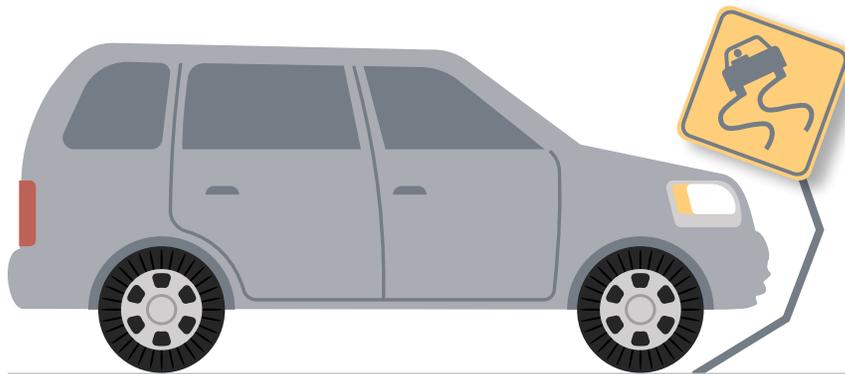
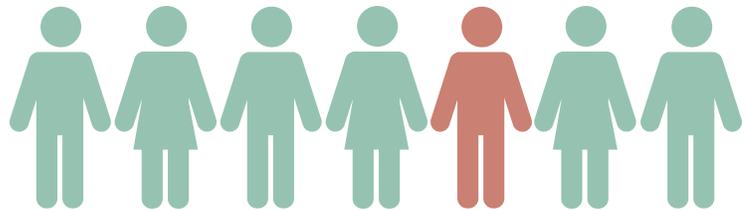
- **Alcohol consumption** (at least one drink of alcohol in the past 30 days, current alcohol use) is highest among those whose household income is greater than \$50,000, compared with those who have a household income less than \$15,000.



**Note:** No state or federal comparison data.  
**Source:** 2018 Knox County BRFS

**15.2%** of adults reported they **binge drink** (five or more drinks for men on one occasion and four or more for women) in the past 30 days, compared to 13.1% statewide, and 17.4% nationally.

**Source:** 2018 Knox County BRFS



Among adults who drink alcohol, **3.5%** reported **driving after drinking too much** in the past 30 days.

**Note:** No state or federal comparison data.  
**Source:** 2018 Knox County BRFS

Alcohol is related to **3.2 - 3.7%** of all cancers.

**Source:** Alcohol-attributable cancer deaths and years of potential life lost in the U.S.; CDC, 2013

OPIOIDS

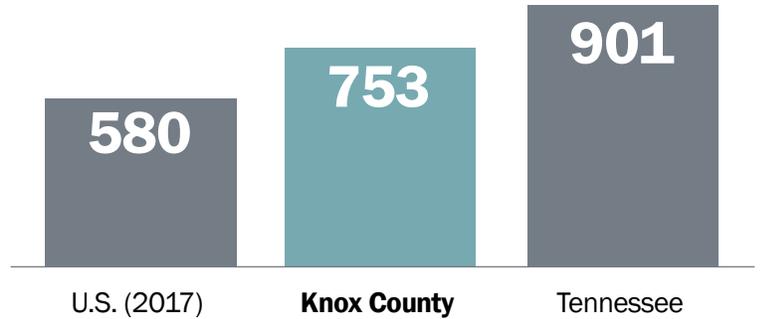
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*It's important to point out that, while opioid prescriptions are decreasing, our death rate continues to rise. We believe this is due to many factors including the increased use of illicit drugs. The rising overdose death rate underscores the need to address the overall issue of addiction and not focus solely on any specific substance.*

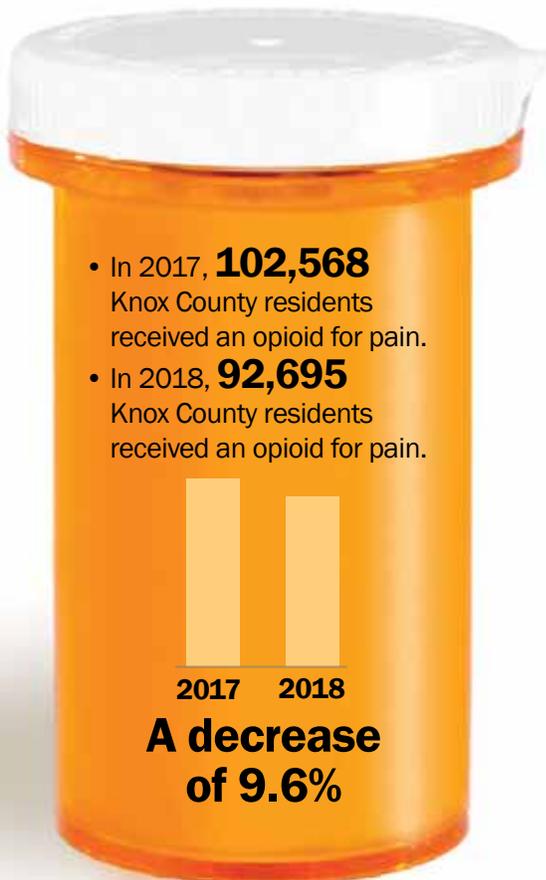
- **Dr. Martha Buchanan**  
Director, Knox County Health Department

”

Opioid Prescriptions, per 1,000 Population



- In 2018, 347,831 opioid prescriptions for pain were filled in Knox County. This is a rate of 753 prescriptions per 1,000 persons.



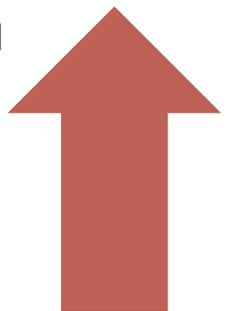
31.1%

Although opioid prescriptions decreased by 31.1% from 2014-2018 in Knox County ...



The age-adjusted opioid death rate climbed from 25.6 in 2013, to 71.2 in 2018.\*

71.2



deaths per 100,000

\*Knox County Regional Forensic Center

Sources: Tennessee Drug Overdose dashboard, 2018; Knox County Regional Forensic Center Drug Related Death report 2018 for Knox and Anderson Counties, August 2019; CDC Drug Overdose Deaths, 2018

## Adult Interventions

A snapshot of several measurable interventions occurring in our community

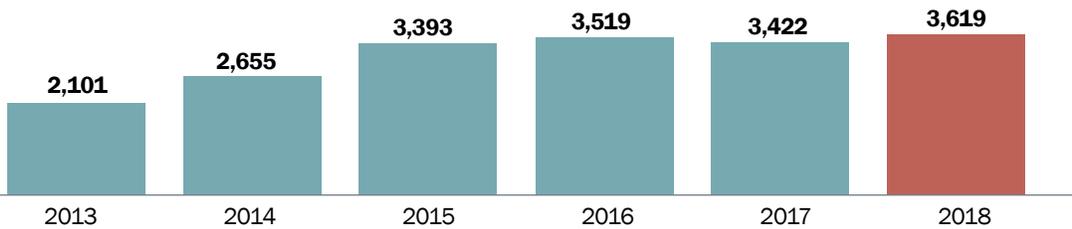
### MAT PRESCRIPTIONS

Medicated-assisted treatment (MAT), is the use of FDA-approved medications, in combination with counseling and behavioral therapies, to provide a "whole-patient" approach to the treatment of substance use disorders (SAMHSA, 2019).

**Intervention:** The ability to provide a range of brief, focused prevention, treatment and recovery services, as well as longer-term treatment and support for consumers with persistent illnesses.

- SAMHSA (2019)

### Patients Receiving Buprenorphine for MAT, Knox County, 2013-2018



Source: Tennessee Drug Overdose dashboard, 2018

### NALOXONE DEPLOYMENT

- Between October 2016 and September 2018 ...

**2,742** individuals required naloxone

by first responders to reverse a suspected opioid overdose, for an average of 114 individuals per month.

Source: Knox County Deployment by First Responders, October 1, 2016 - September 30, 2018.

Utilizing naloxone deployment as an indication of overdose burden in a community is a novel approach taken by the Knox County Health Department, in support of the Harm Reduction Coalition, to quantify the problem.

### INPATIENT AND OUTPATIENT HOSPITALIZATIONS

#### In Knox County in 2017:

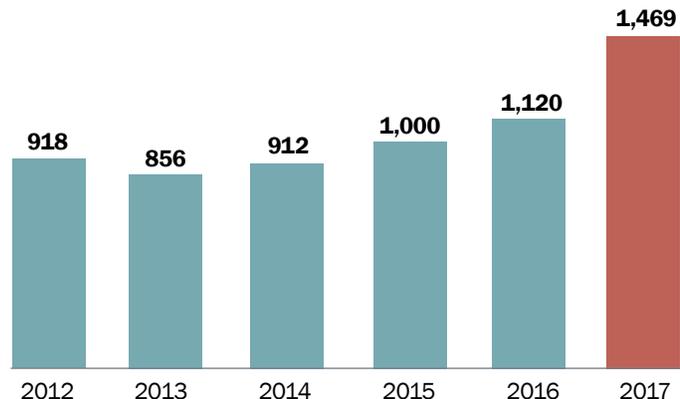
- There were **1,469 nonfatal outpatient visits** for overdose (328 per 100,000).
- There were **528 inpatient stays** for overdose (111 per 100,000)

#### Statewide in 2017:

- There were **15,949 nonfatal outpatient visits** for overdose in Tennessee (246 per 100,000)
- There were **7,708 inpatient stays** for overdose in Tennessee (111 per 100,000)

### NONFATAL OVERDOSE

#### Nonfatal Overdose Outpatient Hospital Visits, All Drugs, Knox County, 2012-2017



Source: Tennessee Drug Overdose dashboard, 2018

# Utilization of Existing Resources to Obtain Help



## By-the-Numbers: Annual Averages for Help-Seeking

**475 Referrals** (Knox and surrounding 15 counties)  The Lifeline Peer Project

**898 People** (All of East Tennessee - 36 counties)  Recovery Link

**500 Calls** (All of East Tennessee - 36 counties)  Peer Recovery Call Center

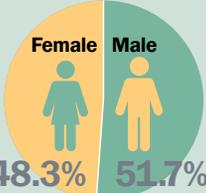
**292 Calls** (Total calls, Knox County only)  The Tennessee Redline

**The Lifeline Peer Project:** The Lifeline Peer Project seeks to reduce stigma related to the disease of addiction and increase access to substance misuse recovery. Lifeline representatives help start Alcoholics Anonymous, Narcotics Anonymous, Celebrate Recovery, and other self-help support groups. They help connect individuals to treatment, other recovery resources, and also speak publicly about their own experience with recovery. **865-321-7107**

**Recovery Link:** Recovery Link is designed to bridge the gap between addiction and recovery. The Recovery Link program is provided by Peninsula, a division of Parkwest Medical Center. It connects people who suffer from addiction to treatment, and directs them to the path to recovery. The program serves East Tennessee residents, and will assist anyone, free of charge, in finding the treatment program right for them. **865-374-LINK (5465)**

**Peer Recovery Call Center:** The Peer Recovery Call Center helps those who struggle with mental illness or substance misuse. It is a service of the Mental Health Association of East Tennessee. All calls are answered by peers – people who have firsthand experience with mental illness and/or substance abuse. The peers will follow up with support calls if given a caller’s permission. **865-584-9125**

**The Tennessee Redline** is a free, 24/7, statewide, confidential referral service to addiction treatment (also available in Spanish). **800-889-9789**

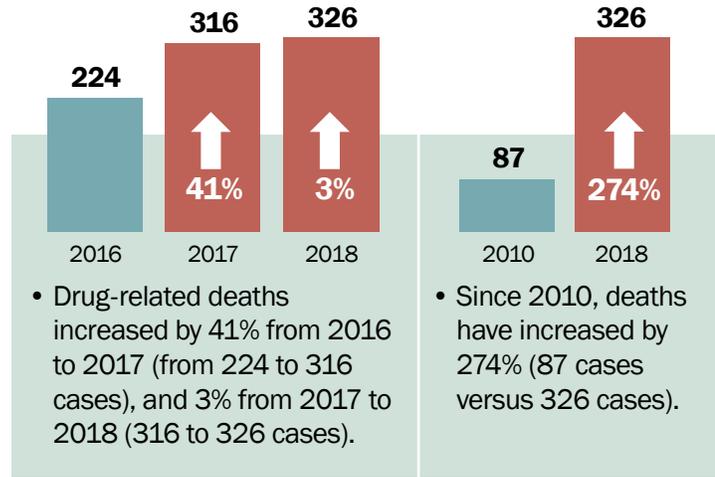
**Redline Calls by Gender, Knox County, June-December, 2018**  **48.3%** **51.7%**

# Community Impacts and Cost

## OVERDOSE DEATH

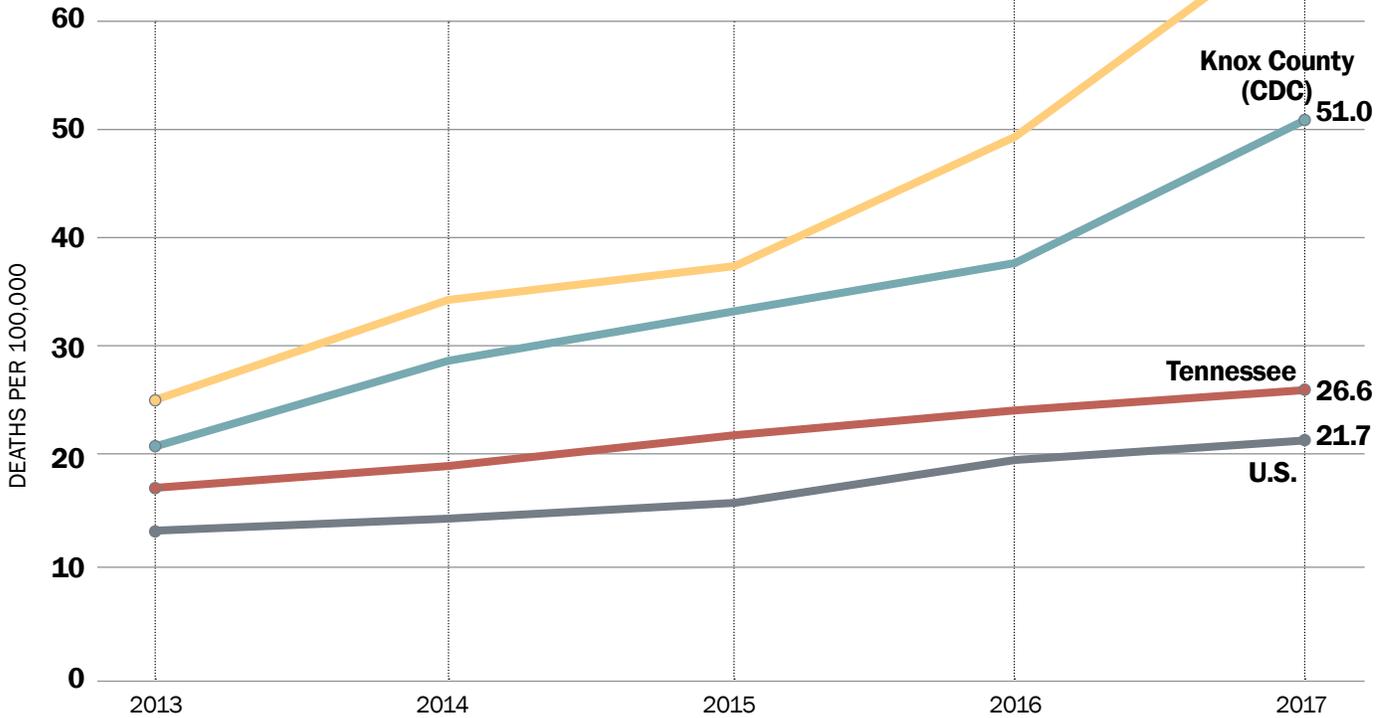
# 326 DEATHS

- In 2018, according to the Knox County Regional Forensic Center, 326 people in Knox County died from overdose-related causes, an age-adjusted overdose death rate of 71.2 per 100,000.



## Age-adjusted Overdose Death Rate (deaths per 100,000) in Knox County, Tennessee and U.S., 2013-2017

(2018 comparison data is not yet available.)

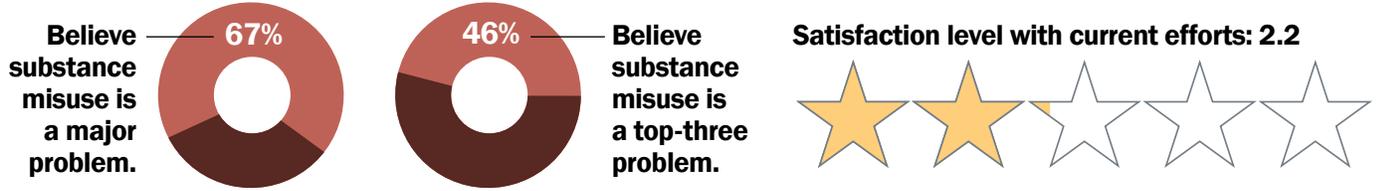


**Note:** State-level data identified 242 overdose deaths in Knox County, whereas the Knox County Regional Forensic center identified 316 overdose deaths for the same year. While the forensic center’s data provide a high level of detail, they do differ from counts provided by the Centers for Disease Control and Prevention (CDC). Not all deaths that were identified by the forensic center as overdose-related were coded by the CDC as drug-related overdose deaths, and so Knox County’s official CDC count of overdose deaths is lower than the forensic center’s.

**Source:** Tennessee Drug Overdose dashboard, 2018; Knox County Regional Forensic Center Drug Related Death report 2017 for Knox and Anderson counties, August 2018; Knox County Regional Forensic Center Drug Related Death report 2018 for Knox and Anderson counties, August 2019 CDC Drug Overdose Deaths, 2018

## KNOX COUNTY PERCEPTIONS

- A survey of Knox County residents was completed for the 2019 Knox County Community Health Assessment asking about their thoughts on a variety of issues, including substance misuse.



## NEONATAL ABSTINENCE SYNDROME

- Neonatal abstinence syndrome (NAS) is a condition of withdrawal that occurs when certain substances, specifically opioids, pass from the mother through the placenta into the fetus' bloodstream during pregnancy, causing the baby to become drug dependent and experience withdrawal after birth. The type and severity of a baby's withdrawal symptoms depend on the drug(s) used, how long and how often the mother used, how her body broke down the drug, and if the baby was born full term or prematurely. NAS can require hospitalization and treatment with medication to relieve symptoms (NIDA, 2018).

### Knox County

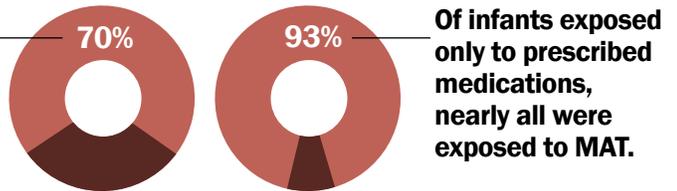
- Average number of annual NAS cases, 2014-2018:

106

Source: Neonatal Abstinence Syndrome Surveillance System, Division of Family Health and Wellness, Tennessee Department of Health, 2018

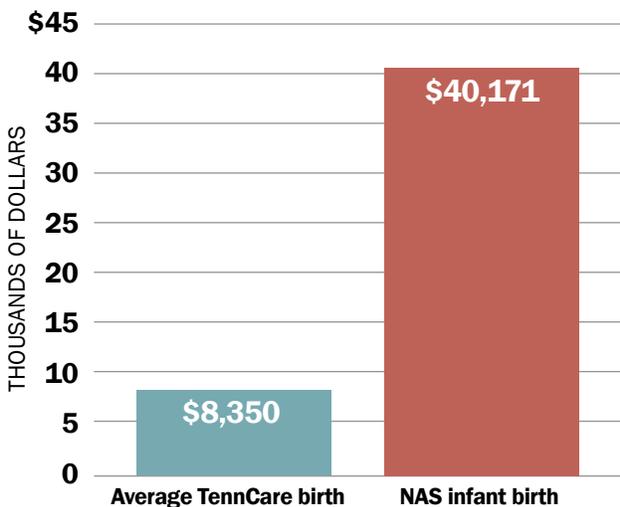
### Tennessee

Statewide in 2018, more than two-thirds of infants with NAS were exposed to MAT for substance use disorders.

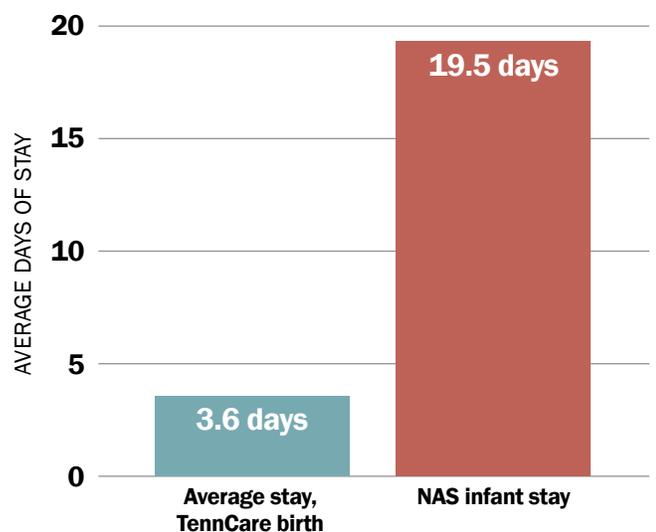


Source: Tennessee Department of Health Neonatal Abstinence Syndrome Surveillance Annual Report, 2018

## Average Hospital Cost,\* 2016



## Average Hospital Stay, 2016



\*Average cost TennCare paid for a hospital birth in 2016.

Source: Neonatal Abstinence Syndrome among TennCare enrollees, 2016, Tennessee Division of Healthcare Finance and Administration.



**TENNESSEE'S ECONOMIC BURDEN**

- \$46,000,000** for babies born in Tennessee with NAS
- \$422,500,000** for hospitalizations associated with opioid misuse
- \$138,000,000** associated with hospitalizations with alcohol as first diagnosis
- \$122,600,000** for adult incarceration for drug- and alcohol-related offenses
- \$1,290,000,000** in lost income from having estimated 1 percent out of workforce

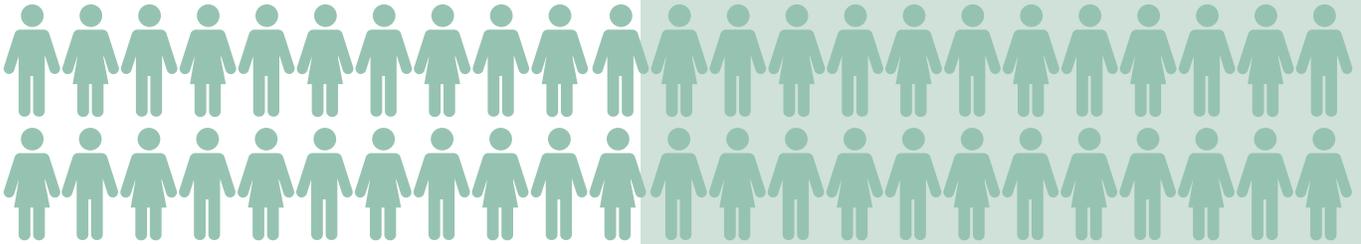
**\$2 billion** cost to Tennessee for substance misuse

Source: Teresa Waters, chair of preventative medicine at the University of Tennessee Health Science Center

**WORKFORCE IMPACTS**

Knox County population: **461,860**

Knox County workforce: **235,771**



Source: U.S. Census Bureau, American Community Survey one-year estimate, 2017

Three-quarters of adults (18-64) with a substance use disorder are in the workforce



Source: 2016 National Safety Council, Safety+Health magazine

**Impacts of Employees in Recovery**

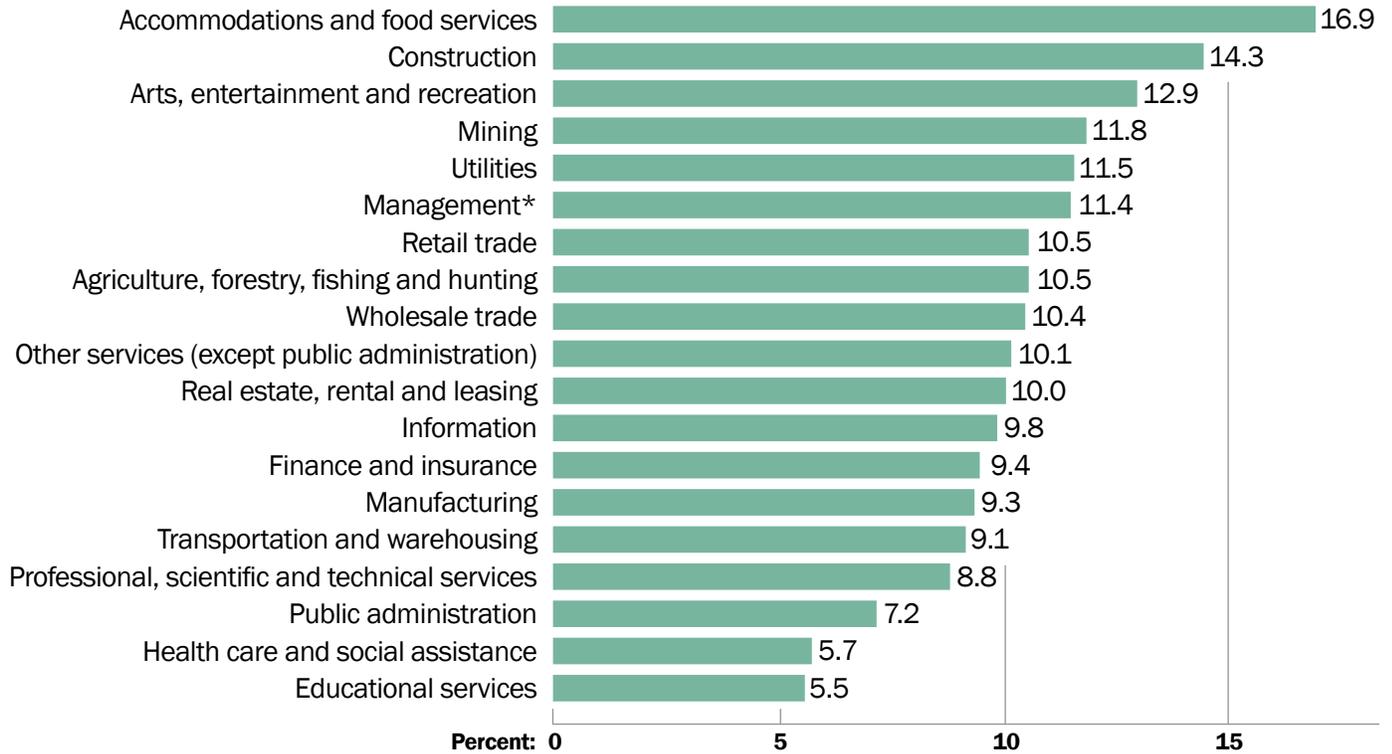
- Workers in recovery help employers **avoid \$1,626** in turnover and replacement costs.
- Workers in recovery **miss five fewer workdays** per year than workers with a substance use disorder.
- Each employee who recovers from a substance use disorder **saves a company more than \$3,200** per year.

Source: 2019 National Safety Council, Substance Use Employer Calculator

■ **Determine the cost to your company:** <https://www.nsc.org/forms/substance-use-employer-calculator>

## Substance Use Disorder Among Adults by Industry

Chart depicts percentage of adults (aged 18-64), employed full time, who have been diagnosed with a substance use disorder, by industry category; combined 2008-2012. Respondents answered questions about their industry in 2012, reflecting on their past 12-months.



\*The full title of this category is "Management of companies and enterprises, administration, support, waste management, and remediation services."

Sources: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs) 2008 to 2010 (revised March 2012) and 2011 to 2012.

## JUSTICE SYSTEM



- **26%** of those who died from an overdose had been released from (Knox County) jail sometime in the year before their death.

Source: Overdose Victims and the Criminal Justice System report, 2017

- Tennessee ranks

**fourth**

in the country for drug arrest rate.



- Tennessee ranks

**fifth**

in the country for drug-related imprisonment.

Source: Pew, FBI, FBP, CDC, FBI, SAMHSA, National Survey on Drug Use and Health, 2018

“

*Strategic prevention and intervention measures, in addition to law enforcement, should be utilized to reduce crime, recidivism, and overdose deaths in our community.*

- Overdose Victims and the Criminal Justice System 2017 report

”

# All4Knox Overall Purpose

## GOAL

Create and implement a communitywide strategic plan to reduce substance misuse and its impact on individuals, families and our community.

## METHOD

Following the guidance set forth by the Substance Abuse and Mental Health Services Administration (SAMHSA), a national substance misuse prevention agency, we will convene nine community sectors that will each develop strategies for their sector on how they will contribute to the above-stated goal. Individual sector strategies will be created between 2019 and 2020, beginning at the August 2, 2019, Mayors' All4Knox Summit and provide the details for a three-year strategic plan.

## DESIRED OUTCOMES

- Reduce stigma around substance misuse
- Increase engagement and coordination within and among sectors
- Enhance how we share information for improved coordination of effort

## MEASURABLE RESULTS

- Decrease the number of overdose deaths by 10 percent by September 2023
- Decrease the number of nonfatal overdoses by 5 percent by September 2023
- Increase utilization of existing resources to obtain help by 20 percent by September 2023

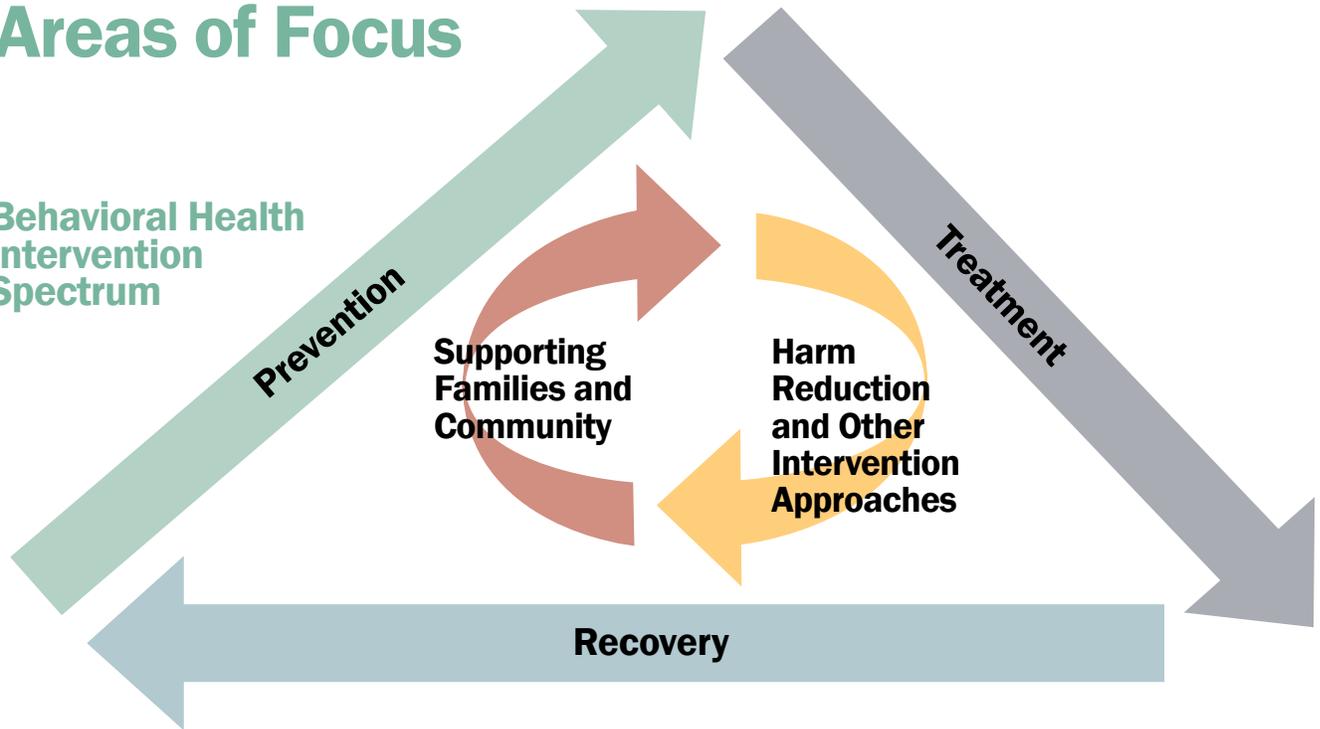
## BACKGROUND

Beginning in 2018, at the direction of both Knox County Mayor Glenn Jacobs and City of Knoxville Mayor Madeline Rogero, All4Knox began. This joint initiative would become the basis for addressing the opioid and overall substance misuse epidemic in Knox County. Leaders from the city, county, Metro Drug Coalition, health department, and district attorney general's office began meeting to discuss ways in which the needs of the community could be met, and lives could be saved. This resulted in the 2018 Mayors' Community Summit: A Community Discussion on Substance Misuse. This summit began the initial planning process that would encompass a communitywide plan.

Initial priorities and themes were developed at the 2018 summit and resulted in a proposal to develop a strategic plan (more details on the discussions and outcomes of the 2018 summit are available at [All4Knox.org](http://All4Knox.org)). Key stakeholders from the city, county, public health, and Metro Drug Coalition continued to meet and discuss progression toward a healthier and safer community. Stakeholders in each identified community sector were contacted to create subcommittees that were willing to tackle collaboration within their respective sectors. In April of 2019, a substance misuse response coordinator was hired at the Knox County Health Department to facilitate the communitywide strategic plan.

# Areas of Focus

## Behavioral Health Intervention Spectrum



The areas of focus (sometimes referred to as the Continuum of Care) highlight several points at which individuals, sectors and the community can engage to help address substance misuse. Each sector can implement strategies at any point or multiple points along or within this continuum. To expand on this, we have included more information below about the areas of focus in an effort to increase opportunities for connectivity and interaction. A primary goal for each area is also outlined below.

## Prevention

SAMHSA (2019) explained that, “Prevention approaches focus on helping people develop the knowledge, attitudes, and skills they need to make good choices and change harmful behaviors.” SAMHSA highlights that, “prevention and early intervention efforts promote informed decision-making and health behaviors” (SAMHSA, 2019). Examples of this include community education and outreach.



**Expand prevention services to reduce new incidence of substance misuse across the county.**

## Treatment

Defined by the American Society of Addiction Medicine (ASAM, 2010), as:

The use of any planned, intentional intervention in the health, behavior, personal and/or family life of an individual suffering from alcoholism or from another drug addiction, and which is designed to enable the affected individual to achieve and maintain sobriety, physical, spiritual and mental health, and a maximum functional ability. (p. 1)



**Expand and increase access to evidence-based, recovery-oriented, treatment services.**

## Recovery

Defined by the ASAM (2013) as:

A process of sustained action that addresses the biological, psychological, social and spiritual disturbances inherent in addiction. Recovery aims to improve the quality of life by seeking balance and healing in all aspects of health and wellness, while addressing an individual's consistent pursuit of abstinence, impairment in behavioral control, dealing with cravings, recognizing problems in one's behaviors and interpersonal relationships, and dealing more effectively with emotional responses. (p. 2)

Examples of recovery services include 12-step and other best-practice recovery meetings, sober living, peer support, and educational and vocational opportunities.



**Expand the continuum of recovery services countywide.**

## Engagement can also occur in two additional categories:

"Harm Reduction and Other Intervention Approaches," as well as "Supporting Families and Community."

These two additional categories, as illustrated in the diagram on page 17, can be implemented throughout the three "Areas of Focus."

Definitions, examples and primary goals for each are outlined below.



## Harm Reduction and Other Intervention Approaches

Defined by the National Harm Reduction Coalition (NHRC) as, "a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use" (2019). These negative consequences can include the spread of infectious disease, drug and alcohol-exposed infants, harmful relationships, and overdose death. Other interventions may include approaches such as clinical screenings for substance misuse risk, peer support and judicial diversion programs.



**Decrease adverse health and social impacts associated with substance misuse.**

## Supporting Families and Community

The Merriam-Webster Dictionary (2019) defines community as, "a group of people living in the same place or having a particular characteristic in common," although it also notes, "a feeling of fellowship with others, as a result of sharing common attitudes, interests, and goals." Families and communities can support primary prevention efforts as well as reducing stigma and increasing and coordinating access to resources.



**Expand and increase services to support individuals, families and communities affected by substance misuse.**



## Support for Sectors

Each sector will have support from Metro Drug Coalition and the Knox County Health Department, including:

- Dedicated project manager to support all sectors
- Subject matter expertise
- Template documents and sample strategies
- Compilation of strategies that are understood to be effective, also known as evidenced-based practices
- Data collection and reporting

## Collaborators

**Thank you to those who have provided guidance and background on the ongoing work and gaps in the community.**

- Knox County Mayor Glenn Jacobs
- City of Knoxville Mayor Madeline Rogero
- Metro Drug Coalition
- Knox County Health Department
- Knox County District Attorney General's Office
- Drug Enforcement Administration
- The University of Tennessee System
- Leadership Knoxville
- Tennessee Voices for Children
- Mental Health Association of East Tennessee
- Cornerstone of Recovery
- Cumberland Heights
- East Tennessee Council on Children and Youth
- Helen Ross McNabb Center
- Cherokee Health Systems
- Village Behavioral Health
- Peninsula: A Division of Parkwest Medical Center
- Knoxville Leadership Foundation
- Tennessee Suicide Prevention Network
- Behavioral Health Group

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