



BJA's
Comprehensive
Opioid, Stimulant,
and Substance Abuse
Program



Iowa
Iowa Governor's Office of Drug Control Policy
Iowa Pathways to Addiction Recovery

10/01/19 Grant Start → 09/30/22 Grant End

Overview

Iowa is a state of approximately 3.2 million people in 99 counties covering almost 56,000 square miles; according to the U.S. Census Bureau, nearly 36 percent of Iowans reside in rural areas. Together, heroin and prescription pain relievers represent the fastest-growing form of substance abuse in Iowa. And it is rampant across the state, particularly in rural areas, including the three partner counties:

- Black Hawk County (population 132,638): fourth-largest county
- Story County (population 97,502): midsized county that includes Iowa State University
- Jones County (population 20,536): rural county located between several larger cities

Just a few years ago, opioid deaths were extremely rare in Iowa; however, they have increased more than 200 percent, from 71 deaths in 2005 to 206 deaths in 2017 (the U.S. Centers for Disease Control and Prevention

reported that Iowa's overdose death rate for all drugs was 11.5 per 100,000 in 2017). Relatedly, the number of known naloxone rescue doses administered by Iowa emergency medical services nearly tripled from 2015 to 2017. The Division of Criminal Investigation laboratory reports a ninefold increase in heroin and illicit opioid case submissions in fewer than four years.

From 2005 to 2017, the number of Iowans seeking substance abuse treatment for all forms of opioid addiction has tripled. During this same period, the number of clients seeking treatment specifically for heroin addiction has increased nearly fourfold.

Grant Focus

- Expand law enforcement diversion and first-responder models that connect individuals to substance abuse treatment and recovery support services.

- Employ the use of alternatives to incarceration programs for nonviolent drug offenders.
- Prioritize real-time data collection, analysis, and dissemination.
- Build capacity in underserved regions impacted by the opioid epidemic.

Program Approach

This project has two major components:

- A Pre/Post-Arrest Diversion (PAD) to treatment program in three Iowa counties will be the first of its kind in Iowa. A local multidisciplinary coordinating board will be responsible for planning and oversight of the project in each county. The county attorney, local law enforcement, substance abuse treatment centers, social services, corrections, and the courts will play key roles and be represented on the local coordinating boards. All projects will be customized to the local community but based generally on nationally recognized program models.
- Goal: Reduce substance abuse and criminal involvement involving nonviolent individuals through the PAD. This outcome will be demonstrated through reduced arrest/rearrest rates, increased access to evidence-based treatment and other services, reduced criminal justice system resource utilization, and evaluation outcomes.
- Expansion of an existing project to add 25 new medication drop-off locations throughout the state in both pharmacies and law enforcement centers. Placement will focus on counties experiencing above-average prescription opioid-related deaths.
 - Goal: Expand citizen access to medication disposal in underserved areas of the state.

Data collection: The local oversight boards in each of Iowa's participating PAD communities will be responsible

for developing individual objectives and for identifying specific measures to be used in assessing the progress toward stated goals for each site (e.g., number of participants diverted to treatment services). The research partner will assist each of the projects in identifying project performance measures, collecting baseline data, and (if one is not already in place) establishing a mechanism for collection and review. The lead agency will be responsible for tracking and reporting project performance on a quarterly basis.

Evaluation plan: The research partner will conduct evaluations of sites involved in this program. The process evaluation will describe program components and examine the way in which the program was implemented. The outcome evaluation will use a quasi-experimental design evaluating variations in criminal involvement between the pre/post-arrest participants and a comparison group. A cost analysis will also be conducted to determine fiscal variance between PAD projects and a comparable cohort to determine whether there are financial benefits to program participation.

Project Partners

- Iowa Pre/Post-Arrest Diversion to Treatment (PAD) Communities (Black Hawk, Story, Jones counties)
- Iowa Board of Pharmacy
- Midwest Counter-Drug Training Center
- Criminal and Juvenile Justice Planning Statistical Analysis Center (the project's research partner)

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