
SHEBOYGAN COUNTY HEROIN INITIATIVE

COMMUNITY PRE-SURVEY RESULTS

OCTOBER 2013

Sheboygan County Service Providers



Partnering with our Community



Prepared by:

Sergeant Kurt Zempel
Sheboygan Police Department
1315 N. 23rd Street, Suite 101
Sheboygan, WI 53081

The Sheboygan Police Department, in cooperation with local school districts, health care providers, social services, non-profit agencies, and local law enforcement throughout Sheboygan County, conducted a community survey from September 13 to October 7, 2013 as a pre-assessment of community indicators and attitudes regarding the heroin problem. Community participation in the online survey, utilizing the online survey service, SurveyMonkey, was promoted with a 3,000-piece postcard mailing to randomized addresses from the list of more than 48,000 tax parcels provided by Sheboygan County. Administrators of participating education, healthcare, social service and law enforcement agencies also encouraged participation by their employees, and the survey included targeted questions for professional service providers based on their response to an employment category question.

The survey received an overwhelming response from the community, gathering complete survey data from 1,354 respondents. This included 406 participants who identified themselves as a teacher or education professional, 312 as a healthcare provider, 75 as a law enforcement or criminal justice professional, and 16 as a substance abuse counselor or treatment provider. The survey was restricted to residents of Sheboygan County, and included 36 questions covering five topical areas of inquiry:

- 1. *Community perceptions of the local heroin problem***
- 2. *The extent of harm of the heroin problem and its impact on the community***
- 3. *The public's perception of common interventions to the heroin problem***
- 4. *The public's understanding of heroin addiction and its link to prescription opiate abuse***
- 5. *Public awareness of treatment options and resources***

Most of the survey questions asked respondents to rank their reaction to a statement by choosing one of five responses on a Likert Scale from "Strongly Agree" to "Strongly Disagree." The remaining questions employed multiple-choice where respondents selected the best choice or choices from a list of categories.

The survey also included six demographic questions to gauge representativeness of survey participants. The gender of survey respondents was skewed female (73.7%) compared to the nearly even gender split of the Sheboygan County population as a whole. Over 97% of respondents were white, compared to 92.7% of the county population. More than 93% of the survey sample was from the age groups of 25-44 or 45-64 (compared to 52% of the population as a whole), likely due to the heavy response rate from working professionals in the participating agencies and service providers. Three-quarters of survey respondents reported being married, which is also significantly higher than the county-wide rate of 58%. Nearly 95% of respondents reported living in Sheboygan County for at least 5 years, with 69.5% having lived in Sheboygan County for 20 years or more.

COMMUNITY PERCEPTIONS OF THE HEROIN PROBLEM

Alcohol (31%) was the leading response when participants were asked to choose what they saw as the most serious drug problems in our community. Heroin (28.8%) was a close second, with prescription drugs (19.2%) being third. More than two-thirds of respondents agreed that there is a significant problem with heroin use in our community, compared with just 3% who disagreed. Seventy percent reported becoming more aware of the heroin problem in our community over the past year, with nearly 72% having read or viewed news coverage about heroin addiction.

When asked about whether there are heroin problems in our schools, 43.8% agreed or strongly agreed with 49% of participants choosing the response, "Neither Agree nor Disagree." More than 48% reported that they have talked to their child about the dangers of prescription drug and heroin abuse, against just 23% who disagreed with this statement. Nearly 40% of respondents felt it was easy to get heroin in our community and would be able to obtain it themselves within 24 hours, against just 20.8% who disagreed.

COMMUNITY IMPACT AND EXTENT OF SOCIAL HARM

Questions gauging the impact of the heroin problem on the community were directed to the respondent's personal exposure to its effects, including questions about personal use, knowledge of addiction among their family and friends, and victimization from property crimes associated with heroin addiction.

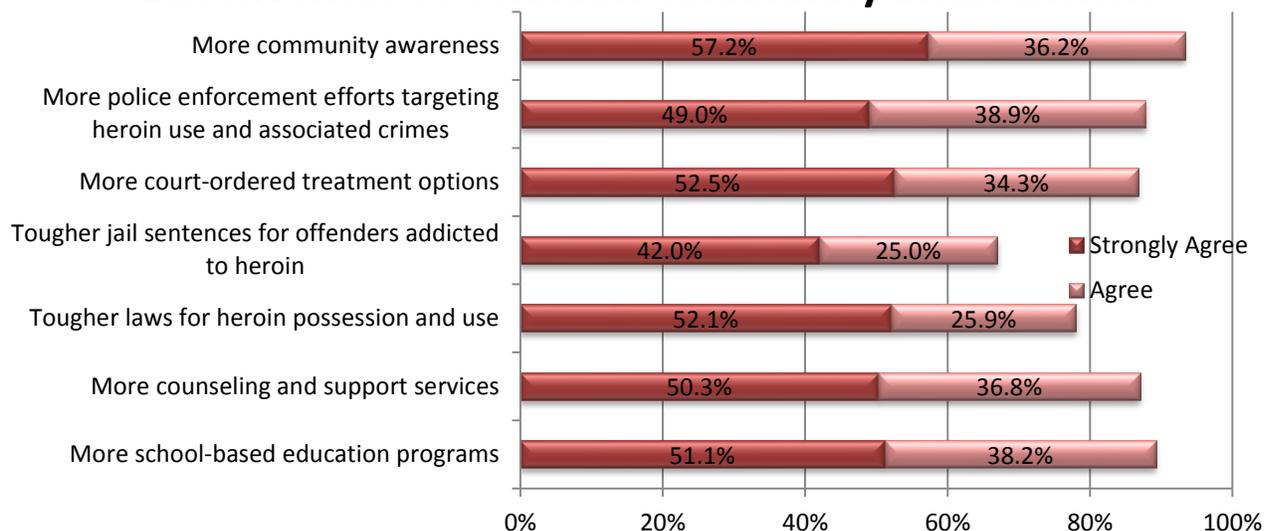
More than 27% of respondents indicated that they personally knew someone who had been a victim of crime related to heroin addiction. Twenty-seven percent also indicated that they personally knew someone who had sought treatment for heroin addiction, and 12% reported having spoken with a close friend or family member to help them seek treatment for heroin addiction. Four percent reported having seen heroin in the past 30 days, and almost 9% were aware of a close friend or family member who had used heroin in the past 30 days. Five survey respondents (0.3%) reported personal use of heroin in just the past 30 days.

COMMON INTERVENTIONS

Survey participants were provided a broad-description list of typical community interventions to combat the heroin problem, and asked to gauge whether they felt it would be effective at reducing the heroin problem in our community. Although a significant majority of respondents felt that each of the interventions would be effective, the relative popularity of each choice is telling of the community's likely response to such efforts.

The most popular interventions were "more community awareness" (93.4%) and "more school-based education programs" (89.3%). However, "more counseling and support services" (87.1%) and "more court-ordered treatment options" (86.8%) were chosen less frequently than "more police enforcement efforts targeting heroin use" (87.8%). The least popular interventions were "tougher jail sentences for offenders addicted to heroin" (67%) and "tougher laws for heroin possession and use" (78%). However, the fact that overwhelming majorities still felt that these interventions would be effective may point to an opportunity to educate the community about the expected success of these types of programs as compared to education, treatment and prevention efforts. An overwhelming majority of respondents agreed that action is necessary to combat the heroin problem, with 87% agreeing that the community needs to do something.

Effectiveness of Common Community Interventions



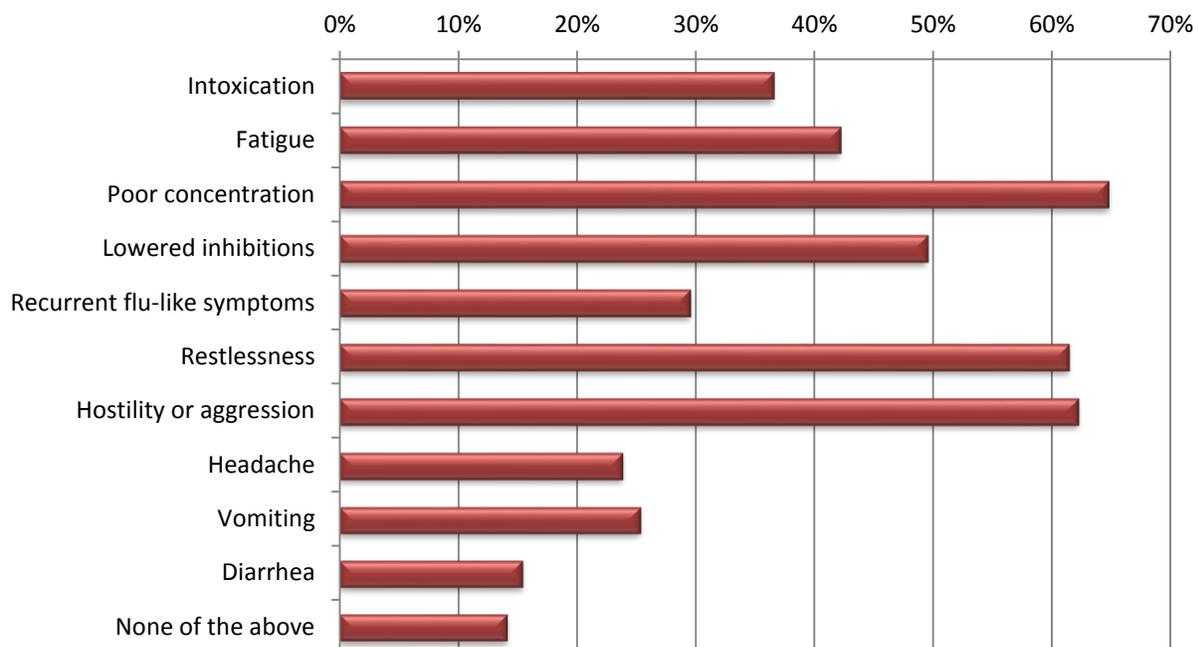
HEROIN ADDICTION AND PRESCRIPTION OPIATE ABUSE

The next section of the survey included questions regarding the respondent's knowledge of symptoms and characteristics of heroin abuse, as well as the abuse of prescription medications and common prevention steps. More than 70% agreed that heroin is an opiate, and 84.7% were aware that some prescription pain medications are opiates. More than a quarter (25.7%) of respondents reported being aware of a close friend or family member who had abused prescription pain medication in the past 30 days, where only 7.9% reported taking a prescription drug that wasn't prescribed to them by a doctor. However, more than 97% of respondents agreed that there was a risk of harm in taking a prescription drug that they were not prescribed. Sixty-Five percent of participants agreed that those who abuse prescription pain medication are more likely to become addicted to heroin.

When asked about the source of prescription drugs that are being abused, 30.8% thought the medication was being obtained through family, 19.6% through a friend, and 18.1% through a doctor. Only 9.3% believed that those who were abusing medications obtained them through theft, and 12.2% believed they were obtained from drug dealers. Just under 28% of respondents reported keeping medications locked away in their homes, and 30.9% reported keeping track of the number of pills they had left to prevent theft or abuse. More than two-thirds of respondents (68.1%) were aware of the drug disposal and drug drop-off locations in the community.

Sixty-eight percent of participants agreed that heroin addiction is a disease, with fully 78% indicating agreement that it is possible for individuals to recover from heroin addiction. However, only 35% agreed that they would recognize the signs and symptoms of heroin abuse in a close friend or family member. When asked about the ability to identify a list of common symptoms of heroin abuse, only "poor concentration" (64.8%), "hostility or aggression" (62.2%), and "restlessness" (61.4%) garnered greater than a majority response. Nearly half of respondents believed they would recognize the paraphernalia associated with heroin abuse, however.

Recognition of Heroin Abuse Symptoms

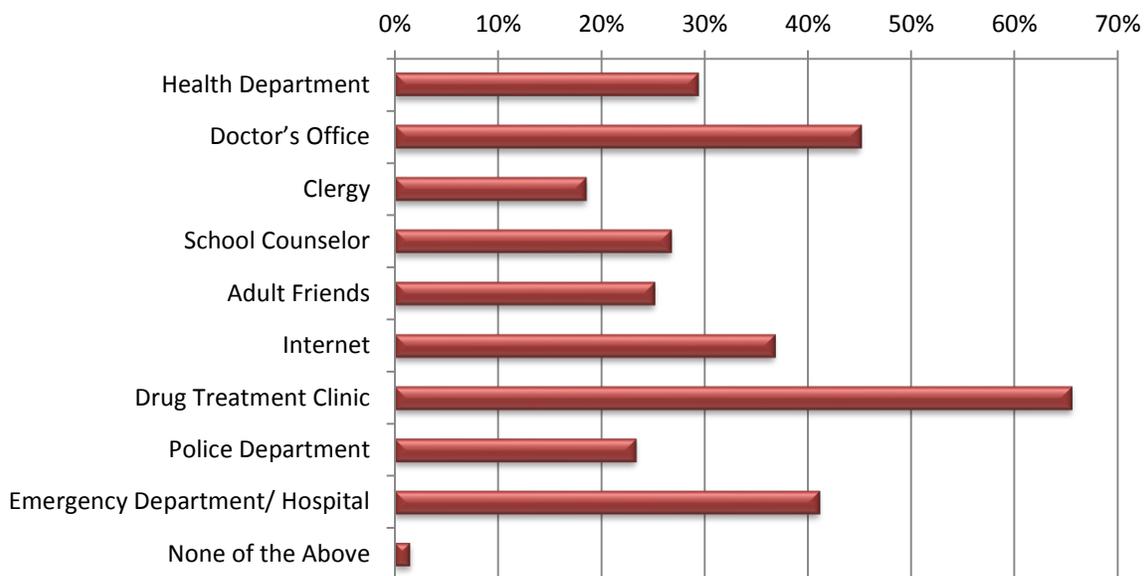


TREATMENT OPTIONS AND RESOURCES

The last group of questions for all respondents was intended to measure public awareness of available resources in the community for heroin addiction. A majority (56.6%) of respondents agreed they would know how to get a friend help if approached by the friend with a heroin problem, but only 16.3% agreed strongly with this statement. A similar majority was unsure whether their insurance would cover heroin addiction treatment for themselves or a family member; 56.4% responded with “neither agree nor disagree”, against 27.4% who agreed or strongly agreed. Just 23.9% of respondents agreed that they would know how to pay for treatment services if they or a family member needed them.

Twenty-one percent of survey participants agreed that they were familiar with heroin treatment clinics in our community, compared to 56.5% who disagreed. However, “Drug Treatment Clinic” was by far the leading response when participants were asked where they would go if a friend or family member needed help with heroin addiction. After drug treatment clinics, healthcare options were the leading sources of help for participants seeking information about heroin abuse. Forty-five percent of respondents selected “Doctor’s Office” and 41% also chose “Emergency Department/ Hospital” as preferred sources of treatment information.

Treatment Information Sources



SERVICE-PROVIDER CAREER SPECIFIC QUESTIONS

Following the demographics questions, survey participants were asked to self-identify whether they fell into one of the “service provider” employment categories of substance abuse treatment counselor, healthcare provider, teacher or education professional, or law enforcement or criminal justice professional. Those who answered “None of the above” (40.3% of respondents) completed the survey at that point. For each of the service provider categories, an additional group of three or four questions were posed regarding the respondent’s perspective on the prevalence of heroin addiction and treatment resources from their professional standpoint.

The survey sample included 16 respondents (1.2%) who self-identified as substance abuse counselors or treatment professionals. Of this group, 88% agreed that they have noticed an increase in clients seeking treatment for heroin addiction over previous years, with 65% strongly agreeing that this was the case. None of the respondents disagreed. Eighty-two percent of treatment professionals reported contact with a client who admitted recent heroin use or addiction within the last 30 days, while 88% indicated that the community did not have adequate treatment resources for those seeking treatment for heroin addiction. All respondents in this category agreed that they were familiar with what information they could share with other service providers or treatment professionals about a client's heroin addiction.

The survey sample included 312 individual respondents (23%) who identified as healthcare providers. Of these participants, 40.1% agreed that they have noticed an increase in patients seeking treatment for heroin use over recent years, against 21.5% who disagreed. Twenty-two percent indicated that they had contact with a patient admitting recent heroin use or addiction within the last 30 days, while only 34% reported never having contacted a patient who admitted heroin use. Just 9.9% of respondents in this professional category agreed that the community had adequate treatment resources, while 35.9% disagreed. Sixty-four percent of healthcare providers who participated in the survey agreed that they were familiar with what information the Health Insurance Portability and Accountability Act (HIPAA) allowed them to share with other providers or treatment professionals regarding a patient's heroin addiction.

Of the 406 teachers or education professionals who participated in the survey (30%), 78.5% responded they have never had contact with a student or family member who admitted heroin use or addiction, but more than 11% indicated that this had occurred within the last year. The vast majority of these respondents were unsure about the adequacy of treatment resources in the community, with 71.1% selecting "neither agree nor disagree" while 23.2% disagreed that treatment options were adequate. Forty percent of education professionals agreed that they would know where to refer a student or family member for help with heroin addiction, while 34.3% disagreed.

The survey respondents also included 75 law enforcement or criminal justice professionals (5.5%). More than 90% of this group agreed that there has been an increase in arrestees, defendants or clients admitting heroin addiction or use over previous years, and two-thirds indicated they had contacted an arrestee, defendant or client within the last 30 days who admitted recent heroin use or addiction. Just 10.7% reported never having contact with a subject admitting heroin addiction. More than 53% disagreed that the community has adequate treatment resources for those seeking help for heroin addiction, against 14.7% who agreed that the resources were adequate. Sixty-four percent of law enforcement or criminal justice professionals participating in the survey agreed they would know where to refer someone seeking help for heroin addiction, with 13.3% in strong agreement.

CONCLUSIONS AND FURTHER ANALYSIS

Survey responses indicate that there is broad public support for community action to combat the heroin problem, and that the problem of heroin addiction is perhaps more widespread than most community members would believe. While there is solid understanding among respondents of the connection between heroin addiction and prescription drug abuse, simple prevention measures do not appear to be widespread. This suggests an opportunity for education on prevention measures to be implemented. It also appears there is a need to educate the public on recognizing the symptoms of heroin addiction. Finally, most respondents indicated their first source for help with heroin addiction would be a treatment clinic, but most were unfamiliar with the treatment clinics in the community. This suggests that publicity of available treatment options is likely best accomplished through healthcare channels, since these sources were the next most prevalent choices among survey respondents.

Full survey response data is available for additional analysis that may help direct education and intervention efforts. For example, crosstab analysis of responses would be able to indicate whether participants who had spoken with a close friend or family member about heroin treatment were more apt to recognize symptoms of heroin abuse, or whether those who were aware of someone who had abused prescription medications were more likely to adopt simple prevention measures. Such analysis could be useful in identifying and targeting the greatest needs for a community awareness and prevention campaign.