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Maryland's approach to the opioid crisis

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TAKFAWAYS

Barriers associated with systems, and with service needs and availability, present challenges to addressing the opioid crisis at the state level.



To better address the opioid crisis, Maryland officials are working to provide family-focused services that include both

working to provide family-focused services that include both parents and children.

Barriers to serving families struggling with substance use disorder in Maryland

The state of Maryland has identified multiple challenges in its efforts to address the opioid crisis. Some of these challenges have to do with systems. There is a lack of coordination across state agencies, and it can be difficult to share information across agencies because of privacy restrictions. There are also many alternate funding streams, which can be difficult to understand and align. In addition, historically there has been an emphasis on collecting specific data points rather than looking for patterns; this may result in missing public health lessons about the population as a whole.

Other challenges have to do with service needs and availability. When assisting people with substance use disorder, trauma-informed services are needed. Because a large proportion of people with this issue also have a history of trauma, service providers need to be aware of what has happened to their clients and provide services in a way that addresses ongoing effects of that history. There has also been a steady increase in the number of substance-exposed newborns in Maryland. The additional barriers specific to treating these newborns include inconsistent testing and reporting practices among hospitals.¹ Finally, when an individual is ready for help with a substance use disorder, they should be able to access treatment immediately, but that is often not the case. Available services differ greatly by geographical location. There is also a notable shortage of inpatient treatment slots for parents with children.

Social safety net challenges and barriers

Policymakers need to acknowledge the intersection between poverty and opioid use disorder and take steps to address it. For example, individuals who are on assistance such as Temporary Assistance for Needy Families (TANF), may not ask for help related to their addiction for fear of losing benefits. For those who do seek help, there is a lack of opioid use disorder programs tailored specifically to the needs of low-income single mothers. Further, compliance-focused programs such as TANF have program rules—such as work requirements—that may be incompatible with providing a continuum of care services.

Child support challenges and barriers

Low-income noncustodial parents—generally fathers—often face multiple barriers to employment, including substance abuse, that hinder their ability to financially support their children. Like the social safety net, the child support system has focused heavily on compliance. Maryland is working to engage noncustodial parents in a different way by identifying and addressing the factors that stand in the way of their paying child support. Shifting from an

enforcement-oriented to a service-oriented approach will require allocating additional funding for noncustodial parent employment and training programs.

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Maryland faces a number of challenges in providing services to families struggling with the effects of opioid use disorder. The Maryland Department of Human Services is working to address these challenges. For example, we are providing cross-systems training for staff working in programs serving children to increase awareness of the rules and procedures in related programs and agencies, increasing coordination between systems, and understanding and aligning funding streams.

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For a summary of Dr. Stephen Patrick's keynote address from the Forum, covering the topic of substance-exposed infants and their mothers in detail, see: S. W. Patrick, "Understanding the Needs of Families During the Opioid Crisis," *Focus* 36, No. 1 (2020): 7–14.