

Principles for the Use of Funds from the Opioid Litigation: Best Practice in Action



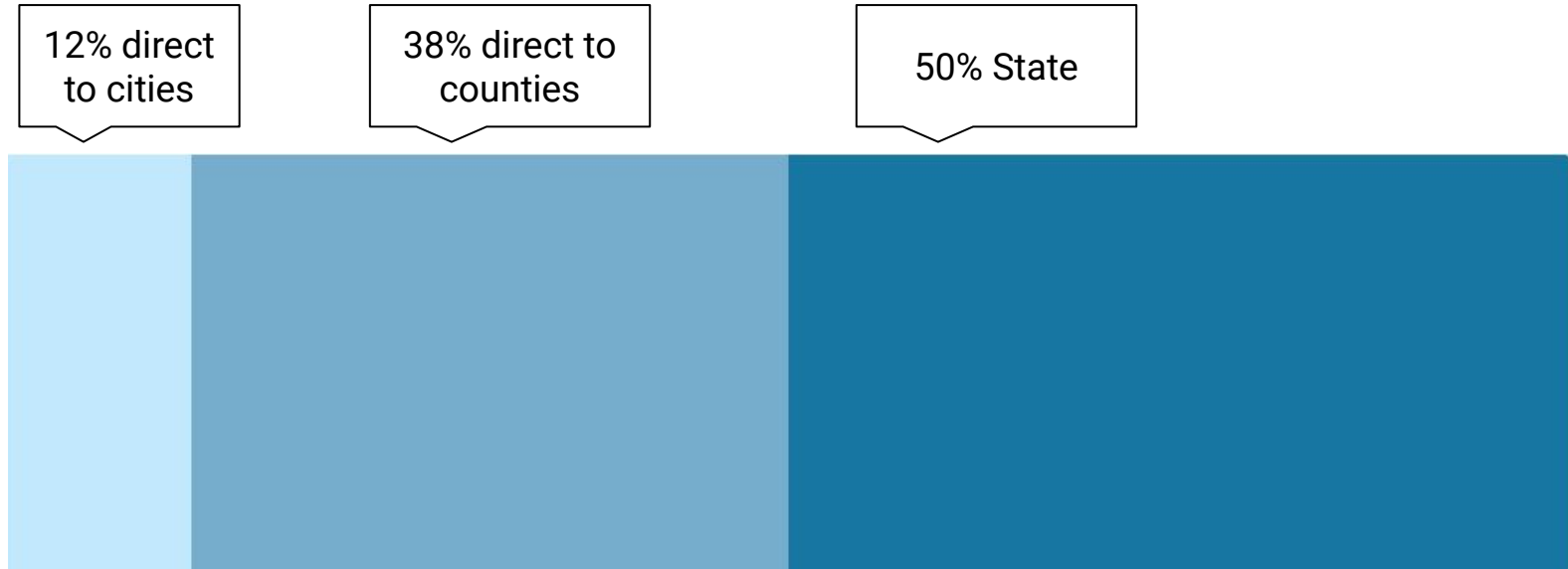
Sara Whaley, MA, MPH, MSW
Senior Practice Associate, Dept HPM
Director of Programs, Bloomberg Overdose Prevention Initiative
Johns Hopkins Bloomberg School of Public Health

Tobacco Settlement

- \$246 billion over 25 years ... but less than 3% spent on tobacco prevention & cessation
- Many outstretched hands: settlement funds spent on roads, helicopters, and even subsidizing tobacco farming.
- Case study of "what not to do"



Across the country- ~\$56 Billion



**NATIONALLY RECOGNIZED GUIDANCE FOR
OPIOID SETTLEMENT FUNDS**

Principles for the Use of Funds From the Opioid Litigation

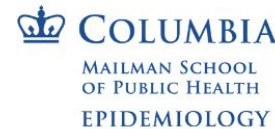
Developed by a coalition of organizations across the spectrum of the substance use field including physicians, addiction medicine specialists, recovery, treatment, and harm reduction. The Principles for the Use of Funds From the Opioid Litigation provide planning and process level guidance for state and local policymakers on how to effectively spend money from the opioid settlements.

Explore the Principles

www.opioidprinciples.jhsph.edu



More than 60 National Groups



Use of Principles to Date

- Tailored briefings to 28 states
- Incorporated or referenced in 22 state plans or boards



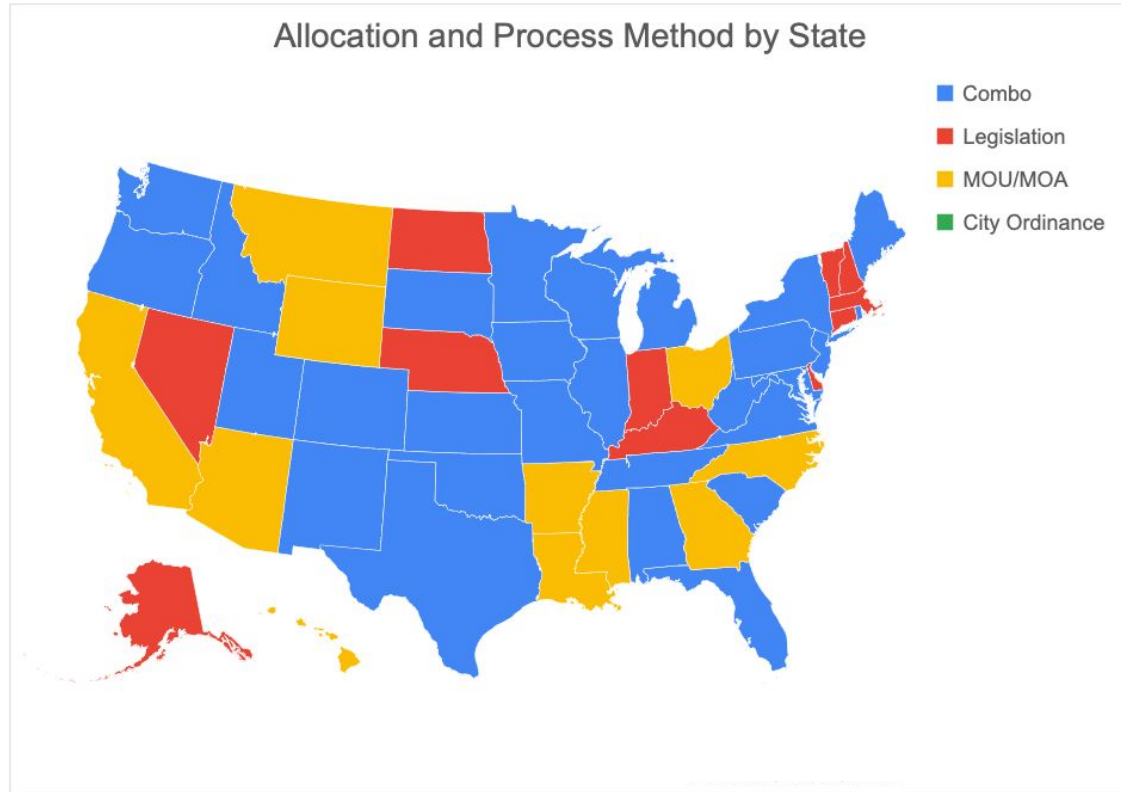
Principle 1: **Spend Money to Save Lives**

Invest in programs, not pay-backs

Supplement > Supplant



Varied Approaches



Principle 2: Use Evidence to Guide Spending

Some programs are proven

Some programs are promising

Some programs are poor choices



Example: Needs Assessment



- Quantitative Data + Key Stakeholder Interviews
 - Currently available abatement strategies
 - Existing funding
 - Service gaps & key challenges
 - Effectiveness

Principle 3: **Invest in Youth Prevention**

Align investment with intended outcomes



Example: Addressing the Social Determinants of Health



- 1. Cambria County, PA - Supporting School Mental Health**
 - Needs Assessment
 - Long Waitlist
 - Partnership with local University

- 2. Boston, Massachusetts - Economic Support for Impacted Families**
 - Family Overdose Support Fund
 - funeral expenses, therapy, legal services, childcare, and other financial burdens

Principle 4: **Focus on Racial Equity**

Include voices of those most impacted by current and historical harms



COMMUNITY ENGAGEMENT SPECTRUM



Presentations on opioid settlement funds at the overdose prevention coalition

Participatory budgeting

Town hall to inform opioid settlement spending decisions

Monthly Opioid Settlement Office Hours

Opioid Settlement Advisory Group that informs the planning process

(Kitlas, 2024)

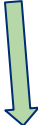


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Representation in Decision-Making

Legend:

- Law enforcement and criminal justice
- Elected officials
- Government representatives
- Medical and social service providers
- Public health and human services
- Private health and human services
- Lived or shared experience
- Other

Nationwide total



(KFF, 2023)

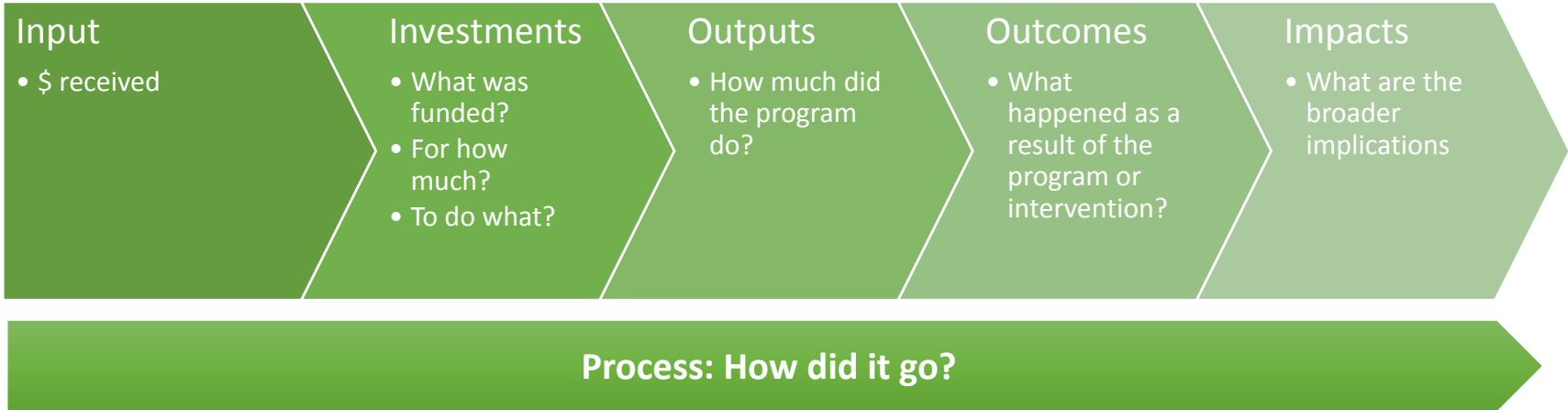


Principle 5: **Create a Fair and Transparent Process**

Listen, Disclose, Evaluate



Building Blocks for Transparency



Resources

The Principles: A Quick Guide to Conducting a Needs Assessment



The Principles for the Use of Funds From the Opioid Litigation are nationally recognized guidance for states, counties, and cities receiving money from the lawsuits against entities that contributed to the opioid epidemic. These planning Principles, coordinated by faculty at the Johns Hopkins Bloomberg School of Public Health, can help jurisdictions create a foundation for effective spending of the monies to save lives from overdose.

The Principles for the Use of Funds From the Opioid Litigation encourage communities to use settlement funds to supplement existing opioid abatement work (Principle 1) and invest in effective evidence-based interventions (Principle 2). Conducting a needs assessment is an important early step in determining how to distribute these limited resources for maximum impact.

What is a needs assessment?
A needs assessment is a systematic process for identifying a community's health needs and assets. In the context of opioid settlement planning, a needs assessment is used to identify the areas in which interventions can save the most lives.

Needs assessments rely on local data. Both quantitative data (e.g., number of overdose events, number of individuals receiving treatment, and length of waitlist for care) and qualitative data (e.g., community-identified priorities) help tell the story of a community's opioid challenges and current methods for navigating them. Needs assessments use this data to identify discrepancies between a community's needs and its system capacity that warrant further investigation and investment.

Who conducts a needs assessment?
In many counties, needs assessments are entirely administered by the local health department, though it may also contract with other organizations to conduct all or part of the assessment (e.g., schools of public health, non-profit organizations).

When should a needs assessment be conducted?

The Substance Abuse and Mental Health Services Administration suggests conducting a needs assessment *before* (Principle 2). As we have seen during the COVID-19 pandemic and with the introduction of synthetic opioids like fentanyl into the drug supply, the substance use landscape in the United States can change quickly. Periodic needs assessments help counties tailor their opioid response strategies to their population's evolving needs.

Why is a needs assessment important for planning opioid settlement spending?

Opioid settlement funds are arriving after years of county-led opioid response efforts. A needs assessment can provide critical information to expand the reach of currently funded solutions and close gaps in services, either where needs are not being met or where new needs arise. These funds will be disbursed annually over many years depending on the settlement terms. A needs assessment is a powerful tool counties can use to ensure settlement funds create sustainable, long-term reduction in opioid misuse and overall substance use disorder.

Many jurisdictions already possess sufficient data to inform a needs assessment. This guide will serve as a quick reference to aid counties in conducting such an assessment to invest in their opioid litigation funds.

The Principles Quick Guide to Creating a Settlement Council



The Principles for Use of Funds From the Opioid Litigation are nationally recognized guidance for states, counties, and cities receiving money from the lawsuits against entities that contributed to the opioid epidemic. These planning Principles can help jurisdictions create a foundation for effective spending of the monies to save lives from overdose.

The Principles for the Use of Funds From the Opioid Litigation encourage communities to Spend Money to Save Lives (Principle 1) and Create a Fair and Transparent Process (Principle 3). Creating a council with expertise in issues related to substance use can help create an informed process that ensures dollars from the litigation are going toward identified areas of need. Establishing a council that represents the diverse needs, strengths, and experiences of community members can help address health disparities (Principle 4).

What is a settlement council?

In the context of the opioid litigation, a settlement council is an entity that works with county decision-makers to decide how best to use dollars from the opioid settlements. Settlement councils may take on an advisory role and provide advice or feedback to the county or the best use of the dollars, or they may have the authority to directly allocate funding.

Why have a settlement council?

By bringing together people from various backgrounds, the council can lead forward recommendations that reflect both the scientific evidence and the needs and desires of the community.

A settlement council can engage members of the public by attending events hosted by other community-based organizations as well as holding open meetings that include time for members of the public to speak. Counties can also solicit public input by administering surveys or creating a digital platform to receive written comments. Counties can specifically solicit input from traditionally underserved communities by reaching out to community-based providers, nonprofit leaders,

or outreach workers who interact directly with people who use drugs, and encouraging their participation in the decision-making process. The inclusion of representatives from organizations with underrepresented communities can help members of those communities engage throughout the process.

Who should be on a settlement council?

When composing a settlement council, counties should seek representatives from the communities that are most affected by the opioid epidemic and organizations that specialize in opioid abatement. These groups may include:

- People with lived/living experience of opioid use disorder, including those receiving medications for opioid use disorder
 - Public health practitioners who specialize in substance use and overdose prevention, from organizations such as local health departments or schools of public health
 - Primary prevention specialists, such as primary care providers or school-based clinicians
 - Treatment providers, particularly those that engage with traditionally underserved populations.
 - Recovery and other social service organizations, for example, a local housing First program.
- In addition to representing a variety of subject matter expertise, the council as a whole should represent the diversity of the county in its personal characteristics (such as gender, race, ethnicity, and sexual orientation), professional backgrounds, and life experiences of its members.

The Principles Quick Guide to Removing Policy Barriers



The Principles for the Use of Funds From the Opioid Litigation are nationally recognized guidance for states, counties, and cities receiving money from the lawsuits against entities that contributed to the opioid epidemic. These planning Principles, coordinated by faculty at the Johns Hopkins Bloomberg School of Public Health, can help jurisdictions create a foundation for effective spending of the monies to save lives from overdose.

The Principles for the Use of Funds

From the Opioid Litigation encourage governments to consider both empirical evidence (Principle 2) and public testimony (Principle 3) when allocating funds from the opioid settlements. After decades of research into effective interventions for opioid use disorder, there are now many evidence-based solutions to the prevention, treatment, recovery, and reduction of harms associated with opioid use. For an evidence-based program to produce the intended results, it may first be necessary to remove laws and regulations that interfere with or impede implementation of the program. By conducting a policy review, county leaders can proactively identify and amend policies that may otherwise limit the impact of opioid settlement investments.

What is a policy barrier?

A policy barrier is a law or regulation that impedes the implementation of evidence-based interventions. By conducting a policy review, counties can ensure they are aware of any policies that may go against the scientific evidence or have an adverse effect on certain demographic groups. For example, a prior passed decedent's age may need to be amended to reflect new findings or lessons learned that have emerged since then.

What is a policy review?

A policy review examines policies concerning substance use and determines whether these policies are blocking the implementation of evidence-based interventions. These reviews should be done periodically and are often completed by participatory boards or committees. (e.g., a citizens advisory board or departments (e.g., health department) within the county.)

A policy review can assess either state and/or county policies, as both can play a role in promoting or obstructing the use of evidence-based programs. A policy review can also be done in collaboration with a needs assessment. Findings from the review will identify policy language and equip county officials to revise these laws through the amendment process.



Access the Principles Quick Guide to Creating a Settlement Council

The Principles Quick Guide to Monitoring Opioid Settlement Spending



The Principles for the Use of Funds From the Opioid Litigation are nationally recognized guidance for states, counties, and cities receiving money from the lawsuits against entities that contributed to the opioid epidemic. These planning Principles, coordinated by faculty at the Johns Hopkins Bloomberg School of Public Health, can help jurisdictions create a foundation for effective spending of the monies to save lives from overdose.

The Principles for the Use of Funds From the Opioid Litigation encourage governments to use data to determine areas of need (Principle 2) and direct funding to programs supported by evidence (Principle 3). As discussed in a separate Quick Guide, counties can get started by conducting a needs assessment to inform initial funding decisions. From there, counties can establish a set of indicators to monitor if the funded programs, services, and interventions are producing the intended results.



Scan the QR code to access the Principles Quick Guide to Monitoring Opioid Settlement Spending.

What are indicators?

Indicators are the foundation of evaluation. The [Principles Quick Guide to Monitoring Opioid Settlement Spending](#) describes indicators as measurable outputs that can be used to determine if a program is being implemented as intended and achieving its expected outcomes. In the context of opioid settlement spending, indicators are a tool that counties use to count the outputs of their investments. For the purpose of this resource, indicators are defined as activities that have taken place, products that have been distributed, and activities that have been delivered as a result of settlement expenditures.

How can use indicators to count the outputs of their opioid settlement investments?

Counties can use indicators to count the outputs of their opioid settlement investments. For example, imagine that County A conducted a needs assessment and found that access to naloxone (a. overdose reversal medication) is a top area of need. Based on this information, County A decides to purchase a bulk order of naloxone for distribution in the community. County A can then select one or more indicators to monitor how much of this naloxone has been distributed in the community (e.g., number of naloxone kits distributed at community events and/or number of naloxone kits dispensed by harm-reduction vending machines).

Where does the data come from?

Much of the data involved in monitoring opioid settlement investments already exists. For example, county coroners or medical examiners can provide data on opioid-related deaths, emergency medical services agencies can provide data on overdose-related calls for service, and county health departments can provide data on screening for opioid use disorder. Counties may also request data from private health systems, correctional facilities, and schools, as appropriate. In addition to existing data sources, counties can obtain new data through the information reported by funded entities. For example, counties can incorporate indicators into requests for proposals and require that grantees report on specified outputs.

www.naco.org/opioid

Principles Website and Resources

www.opioidprinciples.jhsph.edu



[Sara Whaley](mailto:swhaley6@jh.edu)
swhaley6@jh.edu