

## Key Takeaways

- **Kelly Primus, Deputy Secretary, Pennsylvania Department of Drug and Alcohol Programs:** Highlighted the launch of comprehensive SUD programs focusing on prevention, intervention, treatment, and recovery, particularly through mobile treatment and expanded drop-in centers for rural areas.
- **Dr. William Santoro, St. Luke's University Hospital Network and Immediate Past President of the Pennsylvania Society of Addiction Medicine:** Emphasized the need for flexible prescribing of various types of medications for opioid use disorder (MOUD) and the integration of harm reduction strategies to improve treatment access and outcomes.
- **Kim Botteicher, Executive Director, FAVOR-Western PA:** Stressed the importance of grassroots, locally-driven recovery options and the need for consistent funding streams to support rural organizations addressing substance use disorders.
- **Brian Michael, Director, Liberty Mid-Atlantic HIDTA:** Identified fentanyl as a major concern in the region and called for improved data tracking to enhance law enforcement and stakeholder responses to the opioid crisis.
- **Rebecka Rosenquist, Health Policy Director; Dr. Jennifer Whittaker, Research Scientist, PolicyLab, Children's Hospital of Philadelphia:** Underscored the critical role of childcare access in supporting mothers dealing with SUD, suggesting models like the Leeman Crisis Nursery in York County to integrate childcare into treatment programs.

## Background

On October 16, 2024, The Center for Rural Pennsylvania Board of Directors hosted a public hearing at Kutztown University in Berks County to address the pressing challenges of the opioid crisis and substance use disorders in the Commonwealth. This marked the Center's 20th hearing focused on opioid and SUD issues, coinciding with its 10-year anniversary of addressing the public health emergency. The Center's ongoing commitment to tackling the opioid crisis is crucial for gathering insights and informing effective solutions for our rural communities affected by these challenges.

### Panel 1: State Government Perspectives on Opioid/SUD Policy

**Kelly Primus, Deputy Secretary, Pennsylvania Department of Drug and Alcohol Programs**

Primus highlighted the Pennsylvania Department of Drug and Alcohol Programs (DDAP) initiatives targeting substance use disorder (SUD) services, particularly in rural areas. DDAP is leading the

development and implementation of a comprehensive SUD plan focused on prevention, intervention, treatment, and recovery, structured around four key pillars: reducing stigma, intensifying primary prevention, strengthening treatment, and empowering sustained recovery.

Primus highlighted another significant DDAP initiative, the launch of the "Driving Recovery for PA" program in partnership with Gaudenzia, which is the first mobile licensed treatment program covering Central and Northern Pennsylvania. This program aims to serve 400 adults and 200 families over the next five years. Additionally, DDAP has announced \$26 million in grant funding to expand drop-in center services for uninsured and underinsured individuals. These centers will provide harm reduction, treatment, and general social services, with a strong emphasis on health equity.

To address workforce shortages, DDAP has allocated \$22 million for a loan repayment program aimed at retaining educated professionals in the SUD field. Furthermore, Primus emphasized the importance of connecting individuals to care, pro-

moting the “PA Get Help Now” hotline at 1-800-662-HELP (4357), which assists uninsured individuals in accessing necessary services.

Overall, DDAP is dedicated to enhancing SUD services in rural areas through targeted strategies, ensuring high-quality and equitable care for all Pennsylvanians.

## **Panel 2: SUD Treatment Providers**

**Dr. William Santoro, St. Luke’s University Hospital Network and Immediate Past President of the Pennsylvania Society of Addiction Medicine**

Dr. Santoro addressed the urgent issue of the opioid crisis, emphasizing the need for a compassionate, evidence-based approach to addiction treatment coinciding with medications for opioid use disorder (MOUD). He highlighted the importance of harm reduction strategies, such as the widespread availability of naloxone and MOUD, safe consumption sites, and needle exchanges, which aim to save lives while connecting individuals to treatment. Dr. Santoro challenged the misconception that MOUD is incompatible with traditional recovery approaches like 12-step programs, advocating that both can coexist and enhance recovery outcomes.

Access to treatment remains a significant barrier, necessitating increased funding for treatment facilities, telemedicine, and mobile units, particularly for incarcerated individuals. Dr. Santoro advocated for modernizing methadone delivery by allowing primary care providers to prescribe it. He also noted support for the use of telehealth for maintenance care. Additionally, he suggested the removal of unnecessary regulations that hinder the prescribing of buprenorphine and stressed the need for education to combat stigma surrounding medication-assisted recovery.

Dr. Santoro suggested legislators support harm reduction initiatives, enhance access to MOUD, and promote a unified approach to treatment that values diverse recovery pathways. Dr. Santoro concluded that the opioid crisis is a public health issue requiring a collaborative, science-driven response to save lives and aid in recovery.

**Kim Botteicher, Executive Director, FAVOR-Western PA**

Botteicher reflected on her journey as a mother with a son in long-term recovery, highlighting the

challenges faced in rural communities where services for addiction recovery were nearly nonexistent 18 years ago. Motivated by her experiences, she took classes from a local family coach, which led her to valuable resources such as “The Addicted Brain.” This foundation inspired her to establish a family support group, creating a peer-governed environment where individuals with lived experience make decisions about recovery services. Her approach emphasizes the importance of personal narratives and recognizing that recovery paths vary for everyone.

FAVOR-Western PA has developed a pilot program in partnership with Allegheny Health Network, featuring a mobile unit that provides essential services like medication-assisted treatment (MAT) and harm reduction strategies. This initiative includes a registered nurse practitioner and phlebotomist for testing, reinforcing the necessity of peer support. The organization addresses significant social determinants of health, particularly housing and transportation, which are critical barriers in their rural area. Additionally, its partnership with the community crisis food bank and programs like “Babies in the Burgh,” help to support new and expectant mothers through free services.

Botteicher noted the pressing issue of dwindling grant funding, which poses a threat to their operations. Her organization’s focus remains on follow-up services that address housing, job placement, and transportation. Organizations like FAVOR-Western PA are vital in filling the gaps in recovery support, highlighting the necessity of grassroots efforts to empower individuals and families affected by SUD in underserved rural regions.

## **Panel 3: Updates from the Liberty Mid-Atlantic High Intensity Drug Trafficking Area (HIDTA)**

**Brian Michael, Director, Liberty Mid-Atlantic HIDTA**

The Liberty Mid-Atlantic HIDTA (LMA HIDTA) encompasses a 12-county area in the Philadelphia metropolitan region, a major hub for drug trafficking with a population of six million and an additional 100 million within a day’s drive. This HIDTA comprises 31 law enforcement initiatives involving over 90 agencies, focusing on a wide range of criminal activities, from local narcotics dealers to international smuggling cartels. The LMA HIDTA has also prioritized evidence-based substance use prevention by appointing

a Prevention Coordinator and supporting the National HIDTA Overdose Response Strategy.

Michael discussed that the narcotics landscape in the LMA HIDTA is complex, primarily dominated by Mexican and Dominican trafficking organizations. The region faces a significant opioid crisis, alongside ongoing issues with cocaine, marijuana, and methamphetamine use. Fentanyl remains the most pressing threat, frequently found in counterfeit pills and often mixed with substances like xylazine. The prevalence of cocaine is at record levels, with a notable rise in reports of cocaine and opioid co-abuse, while methamphetamine usage has surged dramatically, affecting both urban and rural areas.

Michael emphasized that the crisis continues to affect many in Pennsylvania, including rural communities. Cartels are evolving their production and distribution methods, utilizing sophisticated money laundering techniques and technology like encrypted apps and cryptocurrencies, which pose ongoing challenges for law enforcement. Michael highlighted the need for continued collaboration among state and federal agencies, enhanced data tracking, and housing options for those in recovery as crucial steps toward addressing these issues effectively.

**Panel 4: Linkages Between SUD, Childcare Access, and Maternal Health**  
**Rebecka Rosenquist, Health Policy Director, PolicyLab, Children’s Hospital of Philadelphia**

Rosenquist noted that PolicyLab’s research found mental health conditions, primarily substance use disorders, to be the leading cause of maternal deaths, with around 40% of cases identifying substance use as a factor within the first year postpartum. This underscores the urgent need for better mental health care during and after pregnancy. The connection between caregiver SUD and adverse health outcomes is concerning, as many caregivers struggle with their own SUD. Despite MOUD being the standard treatment, a troubling number of pregnant individuals do not receive the necessary support.

Rosenquist highlighted that rural areas face heightened challenges, with higher rates of SUD and limited access to treatment options for both pregnant individuals and their caregivers. This lack of access is often compounded by the prevalence of domestic violence, which further complicates the situation.

To address these critical issues, better coordination between health care systems and support services is essential to ensure that pregnant individuals and their families receive the comprehensive care they need.

**Dr. Jennifer Whittaker, Research Scientist, PolicyLab, Children’s Hospital of Philadelphia**

Dr. Whittaker discussed that access to affordable and high-quality childcare is a pressing issue, especially in rural areas where approximately 75% of families are located in childcare deserts. This lack of accessible childcare significantly hampers parents’ ability to engage in crucial treatment programs. With only 16% of postpartum programs offering childcare, many parents find it challenging to find these necessary services. Furthermore, the need for childcare extends beyond the treatment period, highlighting the importance of wraparound services that support families holistically.

Dr. Whittaker emphasized that there are considerable barriers to providing childcare within treatment and therapy centers. Many facilities struggle with securing adequate staff and space, and the costs associated with childcare can be prohibitively high, particularly without clear funding sources. Childcare is not only vital for child development but also plays a critical role in detecting and preventing issues like abuse and neglect. Additionally, individuals with substance use disorders (SUD) often experience strained family relationships, which can lead to a reliance on informal care arrangements that are less stable and reliable.

To tackle these challenges, Dr. Whittaker suggested that there are promising opportunities for care and treatment providers to collaborate more effectively. Adjusting licensure requirements could facilitate the integration of childcare services within treatment programs, ensuring families receive the support they need. SUD treatment should focus on involving the whole family and aiding parents in finding dependable childcare options. Innovative solutions like mobile units that provide childcare and initiatives, such as the Leeman Crisis Nursery in York County, could serve as effective models. Increased funding, particularly through federal block grants, is essential to support these initiatives, especially in rural areas. Embracing intergenerational approaches can further strengthen family dynamics, fostering a more supportive environment for both parents and children.

## Thank You

Thank you to the *President of Kutztown University*, Dr. Kenneth Hawkinson, for providing hearing opening remarks, and to all the testifiers who participated in the hearing and for their invaluable contributions and ongoing work on this critical issue.

Thank you to the hearing participants: Kelly Primus, *Deputy Secretary, Pennsylvania Department of Drug and Alcohol Programs*; Dr. William Santoro, *St. Luke's University Health Network, and Immediate Past President of the Pennsylvania Society of Addiction Medicine*; Kim Botteicher, *Executive Director, FAVOR-Western PA*; Brian Michael, *Director, Liberty Mid-Atlantic HIDTA*; Tamar Wallace, *Public Health Analyst, Liberty Mid-Atlantic HIDTA*; Van Jackson, *Drug Intelligence Officer, Liberty Mid-Atlantic HIDTA*; Andrew Thompson, *Intelligence Support Center Manager, Liberty Mid-Atlantic HIDTA*; Rebecka Rosenquist, *Health Policy Director, PolicyLab at Children's Hospital of Philadelphia*; Dr. Jennifer Whittaker, *Research Scientist, PolicyLab at Children's Hospital of Philadelphia*; Kathy Noll, *Executive Director, Council on Chemical Abuse (Written Testimony)*.

*Scan the QR code for the public hearing agenda, testimony, and recording.*



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