

#### **Unity in the Community**

The Houston Recovery Center and it's TTOR team, Chad Armstrong, Calita Payne and Melissa

Tucker, sponsored an April, Unity in the Community Networking event bringing together people from a

variety of organizations that serve the substance use community. Sharing an overview of the services

and capabilities of HRC along with additional information provided by some of the attending

organizations, made for a very informative session. The highlight of the morning was Chelsea's emotional
recovery story.





### **Leading the Way: CHW Early Adopter Learning Cohort**

Lovinah Igbani-Perkins joined The Health Equity Collective's Early Adopter Learning Cohort to celebrate achieving significant milestones. By incorporating diverse perspectives and insights, the cohort has successfully developed actionable strategies that promote equity and excellence in Community Healthcare Workers' (CHW) employment practices. As this pioneering group continues to lead the charge, their collaborative efforts promise to shape and elevate CHW workforce development and organizational equity strategies in the Greater Houston region and beyond.

The CHW Employer Early Adopter Learning Cohort is a self-selected group of organizations within the Greater Houston region, leading the charge in shared development of organizational equity enhancement strategies for CHWs. The group includes the Houston Recovery Center, Harris Health System, Memorial Hermann Health System, The African American Health Coalition, Equity Bridge LLC, Network of Behavioral Health Providers, Community Health Choice, and Harris County Public Health.

## JUST FOR YOUR INFORMATION

#### THINGS NOT TO STORE ON YOUR PHONE

You can't argue with the convenience of having your schedule, method of payment, entertainment hub, GPS, and communication with the world at your fingertips. But while smartphones certainly offer the storage space for our data, they are far from guardians of the personal information fortress.

Here are 5 things that you should never store on your smartphone to protect yourself from hacking, identity theft, and blackmail.

- 1. Sensitive Personal Information: Personal identification information (or PII for short), is the most critical thing to not store on your smartphone. Any document that can identify who you are, your residence, and anything else that can be used to replicate or spoof your identity in a credible enough manner to make you vulnerable to exploitation including: Driver's licenses, Passport data, Social security numbers, Birth certificates, Tax returns, Health data, Sexual orientation, Race or ethnicity, or Religious/Political beliefs
- 2. **Banking Information**; Keeping your app's login information, routing numbers, and account details readily available is risky.
- 3. **PINs and Passwords:** Many users fall into the flawed practice of storing their information on their phones in an unprotected, unencrypted manner.
- 4. **Work-Related Data:** Storing work data on personal smartphones is very risky for the employer as sensitive corporate information getting out can be damaging, or even ruinous to a company.
- 5. **Private Conversations:** It is very important to keep such communications in check and out of the potential sight of others. This is especially vital if the communications include explicit material.
- 6. **Private Sensitive Photos and Videos:** It's never a good idea to save private photos and videos on your phone. **Remember: Never share explicit photos or videos of yourself or others without their consent. Doing so can have serious legal and emotional consequences.**

Not taking careful action to guard your smartphone against unauthorized invaders is bad enough, but it's worse when there is actually something of value for them to find on your device. It can result in financial loss, ruined credit, professional hardships, embarrassment, personal problems, and a host of other unwanted, stressful dilemmas. For those reasons, anything that does not need to be kept on your smartphone should not be, especially personal information.

## **NEWS**

# Faster approach for starting extended-release naltrexone to treat opioid use shown effective

In 2022, over 107,000 people died of a drug overdose, with 75% of those deaths involving an opioid. The overall rise in overdose deaths is largely attributable to the proliferation in the drug supply of illicit fentanyl, a highly potent synthetic opioid. Decades of research have shown the overwhelming benefit of three existing medications for opioid use disorder: methadone, buprenorphine, and XR-naltrexone.



A recent report stated that starting people with opioid use disorder on extended-release, injectable naltrexone (XR-naltrexone) within five to seven days of seeking treatment is more effective than the standard treatment method of starting within 10-15 days, but requires closer medical supervision, according to results from a clinical trial supported by the National Institutes of Health's (NIH) National Institute on Drug Abuse (NIDA). Published in JAMA Network Open, the findings suggest that this rapid treatment protocol could make XR-naltrexone more viable as a treatment option for opioid use disorder, which continues to take lives at an alarming rate.

"When someone is ready to seek treatment for opioid use disorder, it is crucial that they receive it as quickly as possible," said Nora Volkow, M.D., NIDA director. "This study paves the way for more timely care with one of the three medications for opioid use disorder we have available, better supporting people in their ability to choose the treatment option that will work best for them."

Researchers tested the effectiveness of a more rapid procedure to start people with opioid use disorder on XR-naltrexone. Doctors also used medications such as clonidine and clonazepam throughout the process to manage withdrawal symptoms. "Time has been an important barrier that we've seen hinder the use of extended-release naltrexone for opioid use disorder in the past, both among individuals and treatment providers," said Matisyahu Shulman, M.D., lead author on the study. "We hope that these findings can help

encourage more treatment settings to offer extended-release naltrexone as a safe and effective option for patients, to help prevent overdose and support recovery."

Read the entire article at:

https://faster-approach-for-starting-extended-release-naltrexone

# More than 321,000 U.S. children lost a parent to drug overdose from 2011 to 2021



The rate of children who experienced this loss more than doubled during this period, from approximately 27 to 63 children per 100,000. The highest number of affected children were those with non-Hispanic white parents, but communities of color and tribal communities were disproportionately affected. The study was a collaborative effort led by researchers at the National Institutes of Health's (NIH) National Institute on Drug Abuse (NIDA), the Substance Abuse and Mental Health Services Administration (SAMHSA), and the Centers for Disease Control and Prevention (CDC).

"It is devastating to see that almost half of the people who died of a drug overdose had a child. No family should lose their loved one to an overdose, and each of these deaths represents a tragic loss that could have been prevented," said Nora Volkow, M.D., NIDA director. "These findings emphasize the need to better support parents in accessing prevention, treatment, and recovery services. In addition, any child who loses a parent to overdose must receive the care and support they need to navigate this painful and traumatic experience."

From 2011 to 2021, 649,599 people aged 18 to 64 died from a drug overdose. Despite these tragic numbers, no national study had previously estimated the number of children who lost a parent among these deaths. "Children who lose a parent to overdose not only feel personal grief but also may experience ripple effects, such as further family instability," said Allison Arwady, M.D., M.P.H., director of CDC's National Center for Injury Prevention and Control. "We need to ensure that families have the resources and support to prevent an overdose from happening in the first place and manage such a traumatic event."

Read the entire article at:

https://more-than-321000-us-children-lost-a-parent-to-drug-overdose

# Researchers say future is bright for treating substance use through mobile health technologies

Despite the high prevalence of substance abuse and its often devastating outcomes, especially among disadvantaged populations, few Americans receive treatment for substance use disorders. "According to the Substance Abuse and Mental Health Services Administration, only 6% of people with substance use disorders receive any form of treatment." However, the rise of mobile health technologies can make treatments more accessible.

Mobile health technology has disadvantages, such as the potential lack of a therapeutic relationship that can develop between patient and therapist, and because some people may need more intensive treatments than mobile health can provide. However, mobile health is still in its infancy. "Mobile health interventions may reduce stigma because people do not have to attend treatment in person, because there is a severe shortage of qualified therapists, always-available behavior change apps could become a first line of treatment for substance abuse, with traditional counseling being reserved for those who do not respond to mobile health interventions."

Read the entire article at:

https://future-is-bright-for-treating-substance-abuse-through-mobile-health-technologies

### **FORWARD TO A FRIEND**

The mission of Houston Recovery Center is to provide compassionate care to underserved individuals affected by substance use through early intervention and community care coordination to help them achieve lifelong recovery.

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