Steering Committee Members

The Steering Committee is made up of scientists, clinicians, RCC leadership and persons with lived experience from multiple organizations and institutions from across the US.

Principal Investigators:

John F. Kelly

Bettina B. Hoeppner

Robert D. Ashford

Patty McCarthy

Julia Ojeda

Philip Rutherford
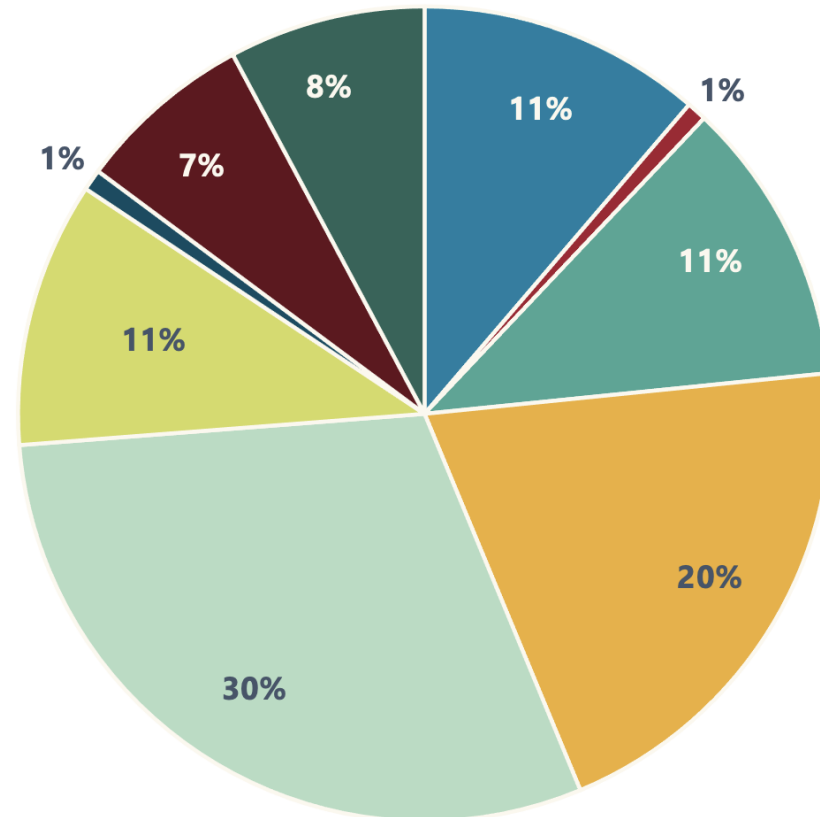
Brandon G. Bergman

Lauren A. Hoffman

Vinod Rao

Amy A. Mericle

Seminar Attendee Demographics

Legend:
- Healthcare decision maker (e.g., hospital leadership, department of health, etc.)
- Prescriber (of medications for OUD)
- Clinician
- Scientist
- RCC leader / staff
- Peer support worker / volunteer
- RCC participant
- Recovery advocate
- None of the above

Pie chart values: 11%, 1%, 11%, 20%, 30%, 11%, 1%, 7%, 8%

Polling Questions
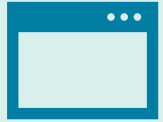
A pop-up Zoom window will appear with the poll questions

? You must complete all questions before clicking to submit

⋯→ Remember to scroll down to see all the questions!

We will share the poll results after a few minutes

Your responses will remain anonymous

The Consortium on Addiction Recovery Science (CoARS)

CoARS collective mission: https://www.recoveryanswers.org/coars/

(PI: Aaron Hogue, Partnership to End Addiction - https://drugfree.org/staff/aaron-hogue/)

To advance the science on recovery support services through research networking, training and mentoring students and early career scientists, and building community partnerships.

- **Pilot study funding**
  - On RCCs (Ours: https://www.recoveryanswers.org/addiction-research-summaries/funding-for-pilot-studies/) – LOI deadline extended to May 16
 - On recovery housing (https://istarr.arg.org/pilot-studies/)

- **Training**
  - 2-year adjunctive training for recent/soon-to-be PhDs pursing NIH-funded careers on recovery support services (https://www.jeapinitiative.org/training-institute/)

RCC Live Feature
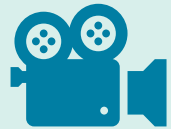
We are featuring a different RCC at the start of each of our seminars in order to allow all participants to learn first-hand about RCCs
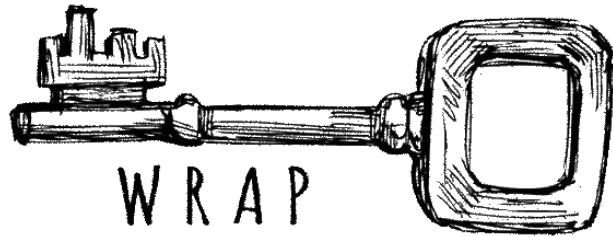
The Washtenaw Recovery Advocacy Project

Chris Rosewarne-Sudduth, BA, CPRC

WRAP Program Manager & Recovery Coach

Presenters

Dr. Hannah S. Szlyk
Instructor
Washington University School of Medicine in St. Louis

Dr. Patricia Cavazos-Rehg
Professor, Department of Psychiatry
Washington University School of Medicine in St. Louis

Discussants

Dr. Davida Schiff

Physician
Massachusetts General
Hospital

Dr. Roger Vilardaga

Associate Professor
Duke University

Pastor Marsha Hourd

Director of CAFE &
LIFE Recovery Center

Ty Bechel

Executive director of
Amare Recovery

The *uMAT-r ("You Matter") Mobile App*

- Free, supportive app for adults in any stage of recovery
  - Contingency management, compensation
  - Clinical service grant
  - HIPAA compliant, vetted by Information Security Dept.

- Opioid Use Disorder
  - Stimulant Use Disorder or Hallucinogen Use Disorder

- A supplement to in-person treatment/recovery services

- We have been implementing *uMAT-R* across Missouri and southern Illinois for over 4 years

- **Version of the app just for Pregnant and Postpartum Women and People (PPWP)**
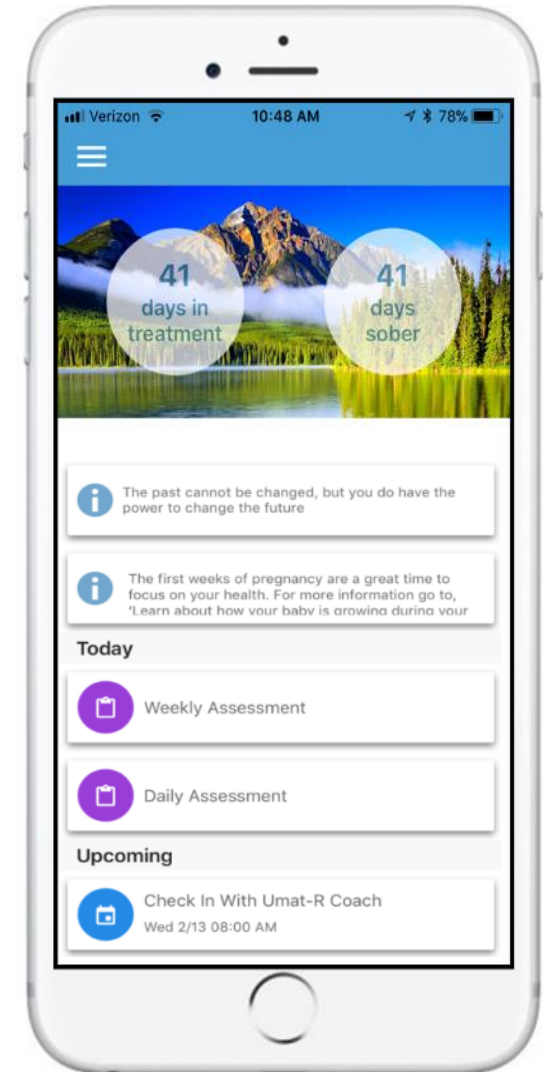
PPWP have specific and time-sensitive needs, which translate to specific app components and content.
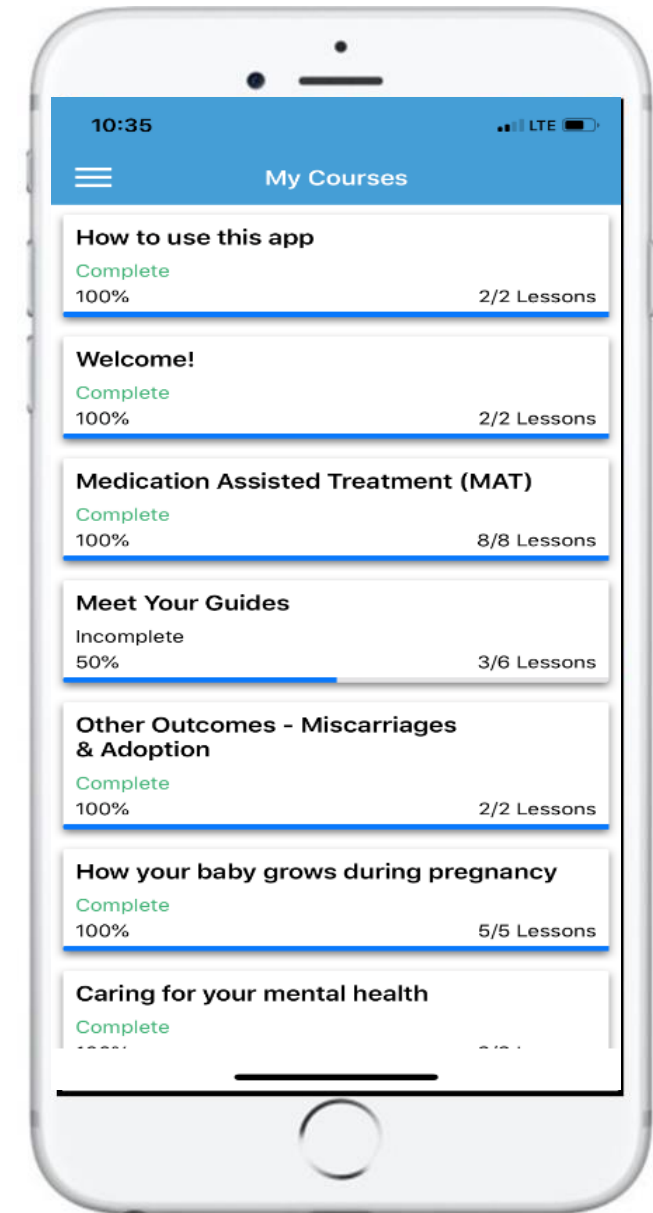
- Many barriers to short and long-term care, including medication for OUD (MOUD)

- Life-threatening implications for person and baby

Findings from earlier community-based study by Cavazos-Rehg

51% lifetime overdose

N= 58

34% lifetime suicide attempt

60% very worried about baby's health & impact of SU

79% insured by Medicaid
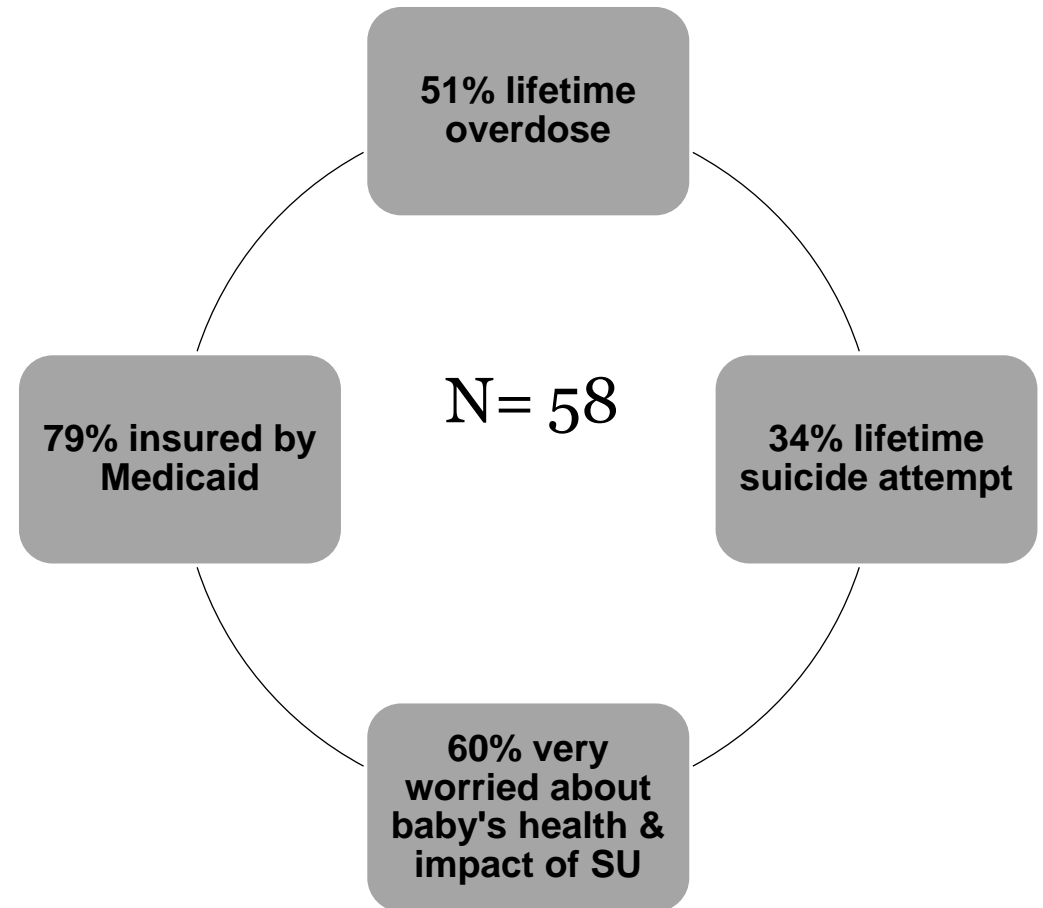
uMAT-R contains education to support PPWP and their recovery

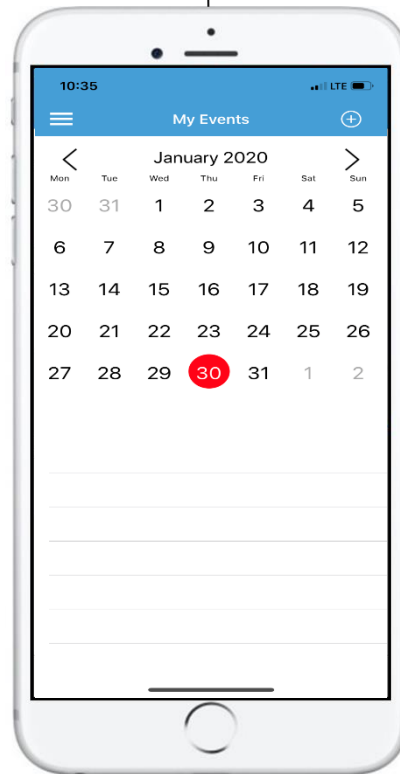- The recovery information in *uMAT-R* uses a framework that is based on CDC and SAMHSA Federal Guidelines for Substance Use Treatment for PPWP

- Educational content topics*: stages of pregnancy and postpartum, OUD recovery, medication for OUD, care for baby, neonatal withdrawal syndrome, custody, and more.*

- The content is presented in different formats including video, audio, PowerPoint slides
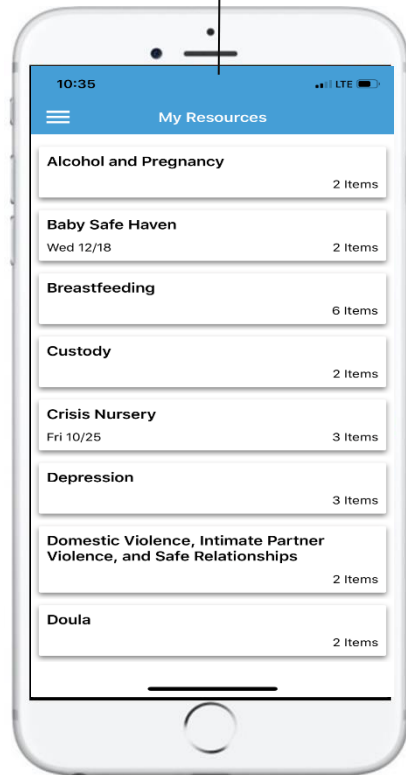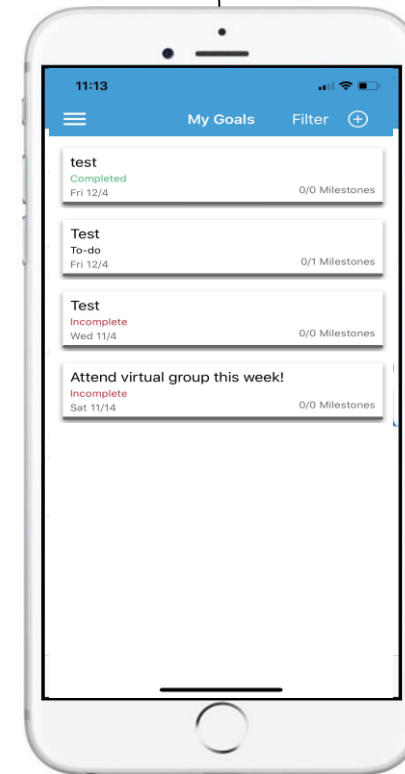
Every PPWP client is assigned a supportive e-coach within *uMAT-R*

- E-coaches check-in with clients.

- Clients can message their e-coach at any time.

- E-coaches are trained in person-centered therapy techniques, motivational interviewing, and crisis intervention.

- Support with substance use plus recovery capital

- All conversations are kept confidential unless the client indicates a crisis.

Early *uMAT-R* Outcomes among PPWP

- Demographic Characteristics
    - 1/3 identified as Black/ African American
    - 60% has less formal education than a high school diploma/GED
    - 78% were unemployed
    - 37% had history with law enforcement

- 12 participants (out of 27) engaged with their *uMAT-R* coach over the course of the one- month study period

    - Sent an average of **14 messages** to their *uMAT-R* coach.

- Participants who engaged with their coach were **less likely to crave opioids** and they reported having **more of their basic needs met** versus those with no interaction with their coach

Recovery Community Centers provide longer-term recovery support and have a lower barrier to entry.

1. Can an mHealth tool be used to support decreased use from opioids AND increase recovery capital among PPWP?

2. Can an mHealth tool be used to link PPWP from clinics to Recovery Community Centers?

   • Complete provider recruitment
   • Tailor app
   • Pilot with local PPWP sample
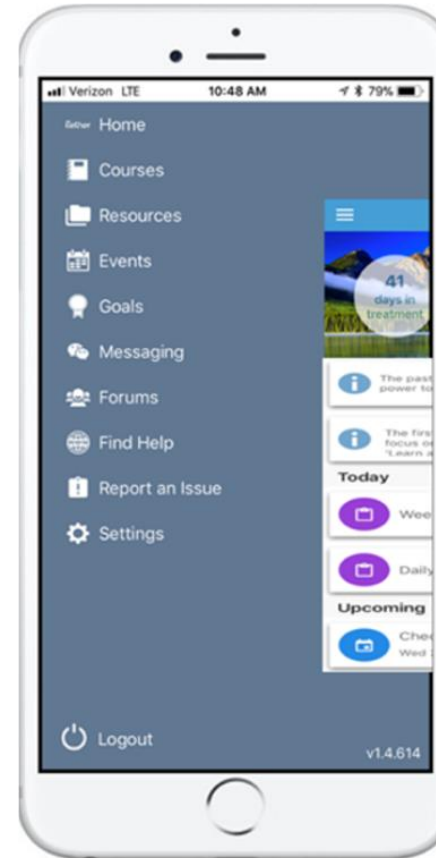
Select Psychoeducation Content

Opioid Use Disorder
• What is OUD
• How do drugs impact your body
• What is MOUD and how it works
• The process of withdrawal

Mental Health Disorders
• What is depression
• What is anxiety
• How to change anxious thoughts
• How to manage depressive symptoms
• Building resilience
• Role of individual and group treatment

Recovery Tools
• Tips to avoid substance use
• Trigger coping plan
• How to prevent overdose
• How to ask for support
• Harm reduction
• Managing cravings and urges
• How to address stigma

Research & Community Partnerships

Director: Ty Bechel
Wood River, Illinois

Director: Pastor Marsha Hourd
St. Louis, Missouri

Provider and PPWP App Feedback

Providers and PPWP accessed same app content and received the same interview guide questions

Providers
- 16 completed survey, 13 completed the study
- 50% serve PPWP clients, over 50% work at an RCC

PPWP with OUD and/or Stimulant Use Disorder
- 5 completed study
- 60% on a MOUD regime (buprenorphine or methadone)
- 80% pregnant
- 20% ever been to an RCC

Provider Perspectives on App Experience

Categories	RCC Providers (n=6)	Non-RCC Providers (n=7)
Favorite format for Information	A mixture of text, video and audio	A mixture of text, video and audio
What to change/add ?	App glitches; none, overwhelming amount of content; navigation; plain	Glitches; navigation; reading level; patient-centered language; breast feeding; nurse hotline
Favorite *uMAT-r* Feature	Quote of the day, e-coach, resources, educational content; sober tracker	Home page (sober tracker); educational content; e-coach; calendar
Least Favorite Feature	Goal setting	Goal setting
How often to message a coach	At least weekly	At least weekly
What to message about	issues related to recovery – specifically mood, triggers for using	Help with baby questions; drug use; housing; daily check-ins
Problems with the App	Considering limited time of clients; limitations with technology	Pages freezing; issues with broken links; app crashing
Motivators to Use the App	E-coaching support	Resources offered; encouragement

Provider Exemplary Quotes

"If someone's not comfortable yet going physically and seeking out help, whoever is working with them through the app maybe can kind of reduce stigma"

- **Peer recovery coach at an RCC**, how e-coach can help initiate help-seeking for OUD

"I think even the word Subutex was left out, terminology was a little outdated, it's M-O-U-D, or just 'treatment for OUD'"

- **OB-GYN,** ways to make the app more useful and understandable

PPWP Perspectives on App Experience

Categories	App Users (n=3)	Non-App Users (n=2)
Favorite format for Information	Videos and Tutorials	Videos and Tutorials
What to change/add?	custody resources, skipping content, more colors	N/A
Favorite uMAT-r Feature	quote of the day, e-coach, resources, educational content	N/A
Least Favorite Feature	Goal setting	N/A
How often to message a coach	at least weekly	N/A
What to message about	issues related to recovery – specifically mood, triggers for using	N/A
Problems with the App	None	Problems with app/loading app on phone; forgot to use it; illness
Motivators to Use the App	baby, support provided in the app, personal investment	Free time, cravings

PPWP Exemplary Quotes

"This pregnancy is my motivation - I have to stay sober - I do not want to lose my baby."
-App user, talking about motivation to use the app

"I guess to try to keep my mind off of things... if I try to sway into drinking or doing drug stuff I just get on... Remember, I'm pregnant, stuff like that."
**-Non-app user,** possible motivations to use the app)

Can an mHealth tool be used to support decreased use from opioids AND increase recovery capital among PPWP?

- Overall, **Yes**

- Providers and PPWP have similar perspectives
  - Role of e-coach; help with triggers/tough situations
  - Preference for more audio/videos
  - Motivational/daily quotes are helpful
  - Wide variety of recovery-related content and resources

- PPWP: do not know about RCCs- **NEED FOR LINKAGE!!**

- Baby is big motivator for recovery and using app
 - Time is limited during the day

Refinements in Response to Feedback

- Recruitment:

  - More active screening

  - Recruiting from new partnerships outside of region

- Switched app platform

  - Easier to navigate app/ more colorful

  - Where to find AA/NA meetings

  - More about child custody and state services

  - More reminders and personalized updates
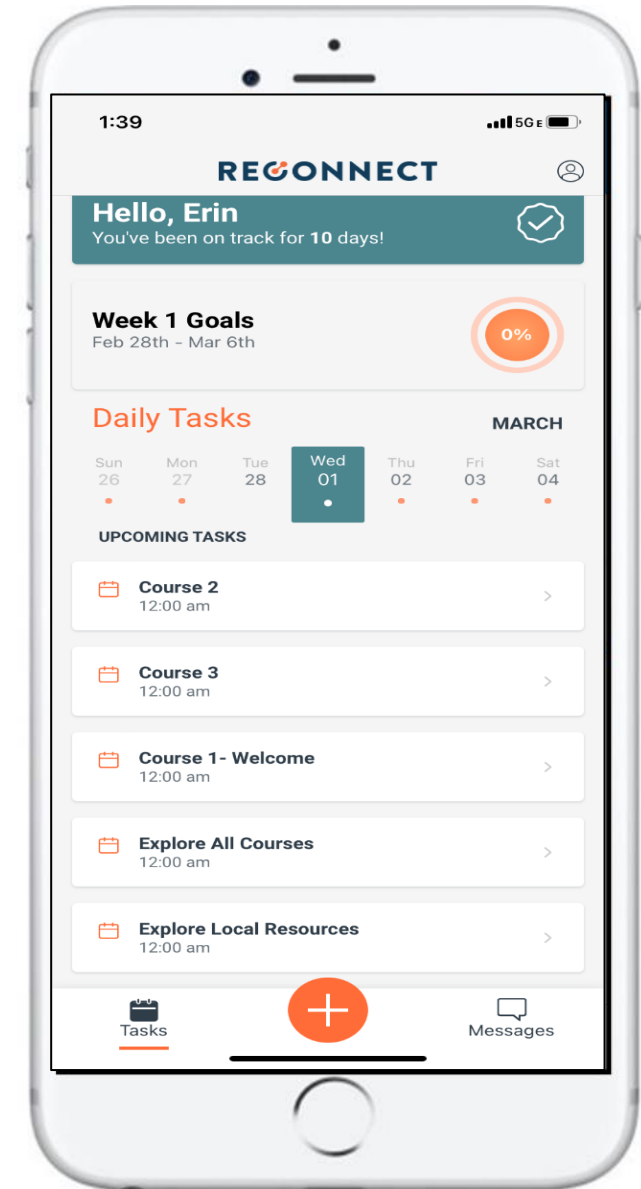
Refinements in Response to Feedback

- Simplified and set curriculum for each intervention week

- Updates of topics

  - MOUD

  - Recovery capital

- Patient-centered; person-first language

  - Reading level
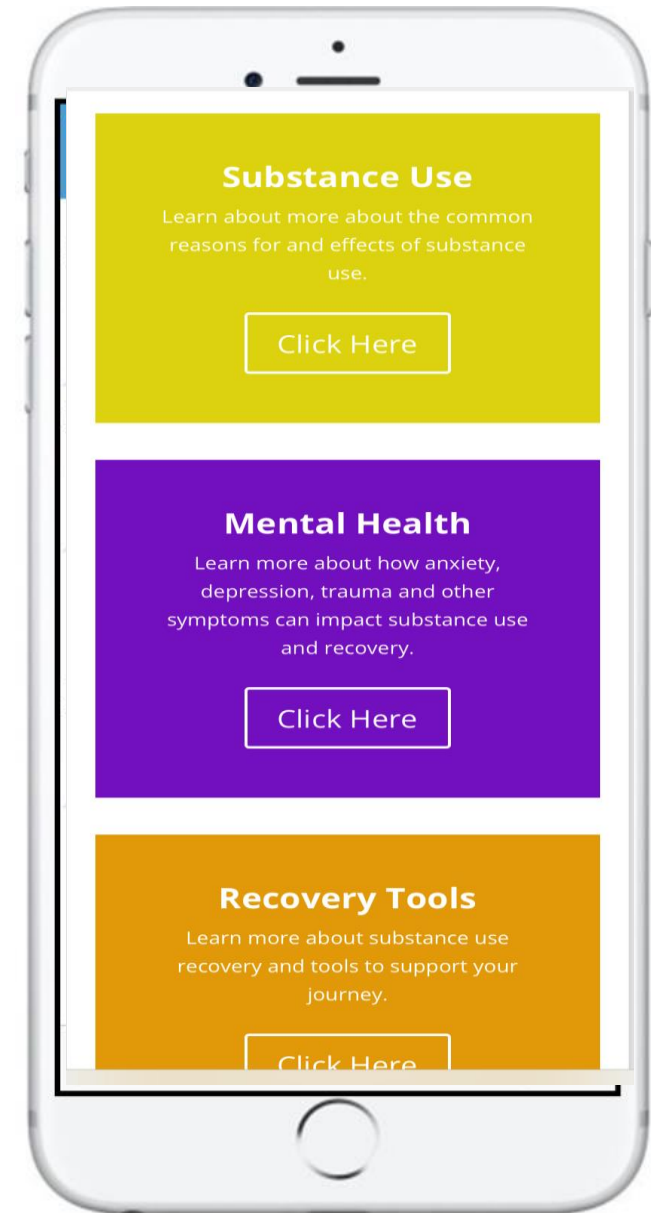
Pilot test of uMAT-R for continued MOUD adherence and linkage to RCCs

- N=20 PPWP will be recruited from local clinics
- 2 Months with the app
- 3 surveys and 1 interview
- Compensated up to $100

- Weekly RCC engagement AND MOUD use
  - *Substance use, recovery capital, mental health, and MOUD attitudes; PPWP distress; healthy behaviors*

- **E- coaches will promote uptake of RCCs and MOUDs and related content in the app.**

Funding Support

- National Institute on Drug Abuse (R24): "Advancing the Science on Recovery Community Centers" (MPIs: Kelly & Hoeppner)

- SAMHSA: Missouri's Opioid Response Grant (SOR)

- NIH Planning Grant Program (R34): "mHealth to help pregnant and postpartum women in recovery for opioid use disorder"

- NIH SBIR/STTR Phase II Grant (R42): "A software platform and workflow bridging critical gaps in the opioid use disorder treatment system"

- NIDA K12DA041449 Washington University Career Development Program in Drug Abuse and Addiction (MPIs: Bierut & Cavazos-Rehg)

We are always happy to connect!

Please reach out to us for more information.

You can email us at behealthy@wustl.edu or give us a call at (314) 944-2464
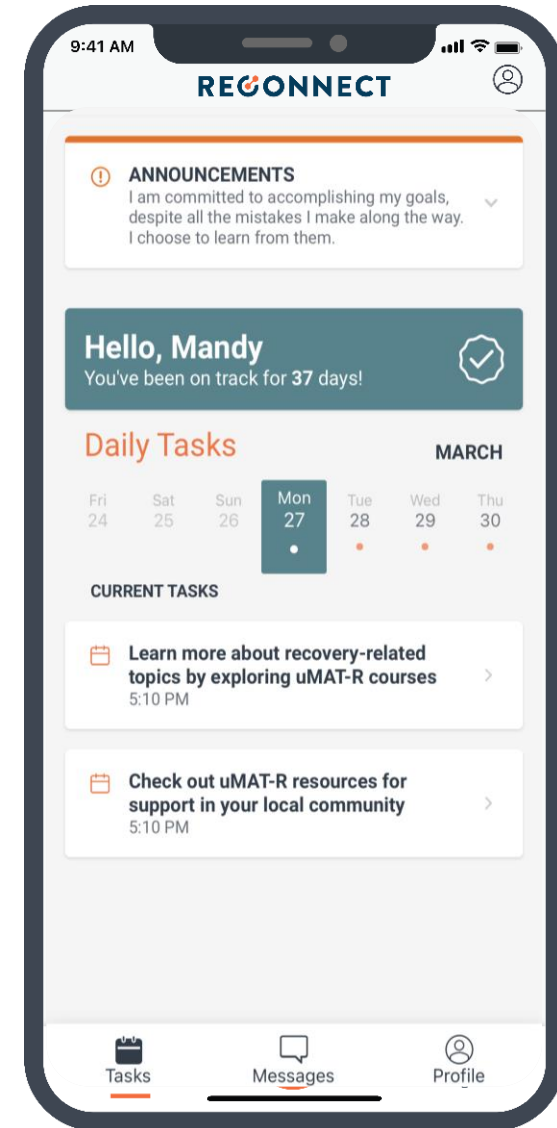
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Washington University in St.Louis
SCHOOL OF MEDICINE

Thank you – and see you soon!

Pilot study funding

- Letter of intent due May 16
- Find application materials here: https://www.recoveryanswers.org/addiction-research-summaries/funding-for-pilot-studies/

Upcoming seminars

- May 5 - Outcome presentation for pilot project #3: Understanding how recovery community centers impact members' wellbeing: A pilot study using daily diary assessments
  - Register here: https://partners.zoom.us/meeting/register/tZAud-6urzosEtcl6zj6dYcBIVEh2CZXHMlP
  - Moderated by Dr. Brandon Bergman!
- June 2 – Community engaged research – why and how
  - Stay tuned for registration link