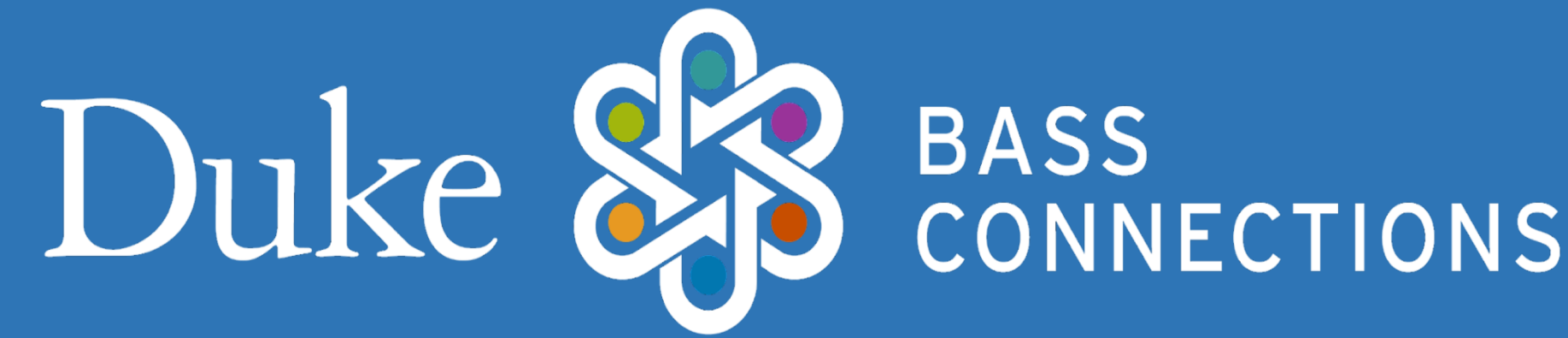


# Mental Health and the Justice System in Durham County:

Striving to understand associations between healthcare utilization and interactions with the justice system in Durham county



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Brain & Society



## Meta-Analysis of Medication-Assisted Treatment for Opioid Use Disorder

### Objective:

Determine the efficacy of medication-assisted treatments (MAT) for opioid use disorder when initiated in carceral settings.

### Methods:

- A systematic review of the Pubmed database for randomized controlled trials that used an agonist or partial agonist pharmacological agent as an intervention in carceral populations affected by opioid use disorder, measuring relapse outcomes at six months post-release.
- A mixed effects model was fitted to combined data evaluating the efficacy of any treatment and of methadone in particular, with study as a random effect.

Search Strategy [DRUG NAME(s)] =	Date	Results (after RCT filter applied)	After Abstract Screening	Included (total sample size)
methadone	11/7/2023	48	24	2 (n = 184)
buprenorphine	1/23/2024	25	3	1 (n = 140)
suboxone OR "buprenorphine with naloxone" OR "buprenorphine/naloxone"	1/30/2024	57	0	0 (n = 0)
<b>TOTAL</b>		<b>130</b>	<b>27</b>	<b>3 (n = 324)</b>

### Results and Conclusions:

- The **odds of not relapsing**, relative to controls, were **4.33** (95% CI = [1.677, 4.332] with any treatment and **4.13** (95% CI = [2.129, 8.374]) for methadone, respectively
- More randomized-controlled trials needed, especially with non-methadone partial or full agonists.

## Focus Groups with Justice-Involved Community Members

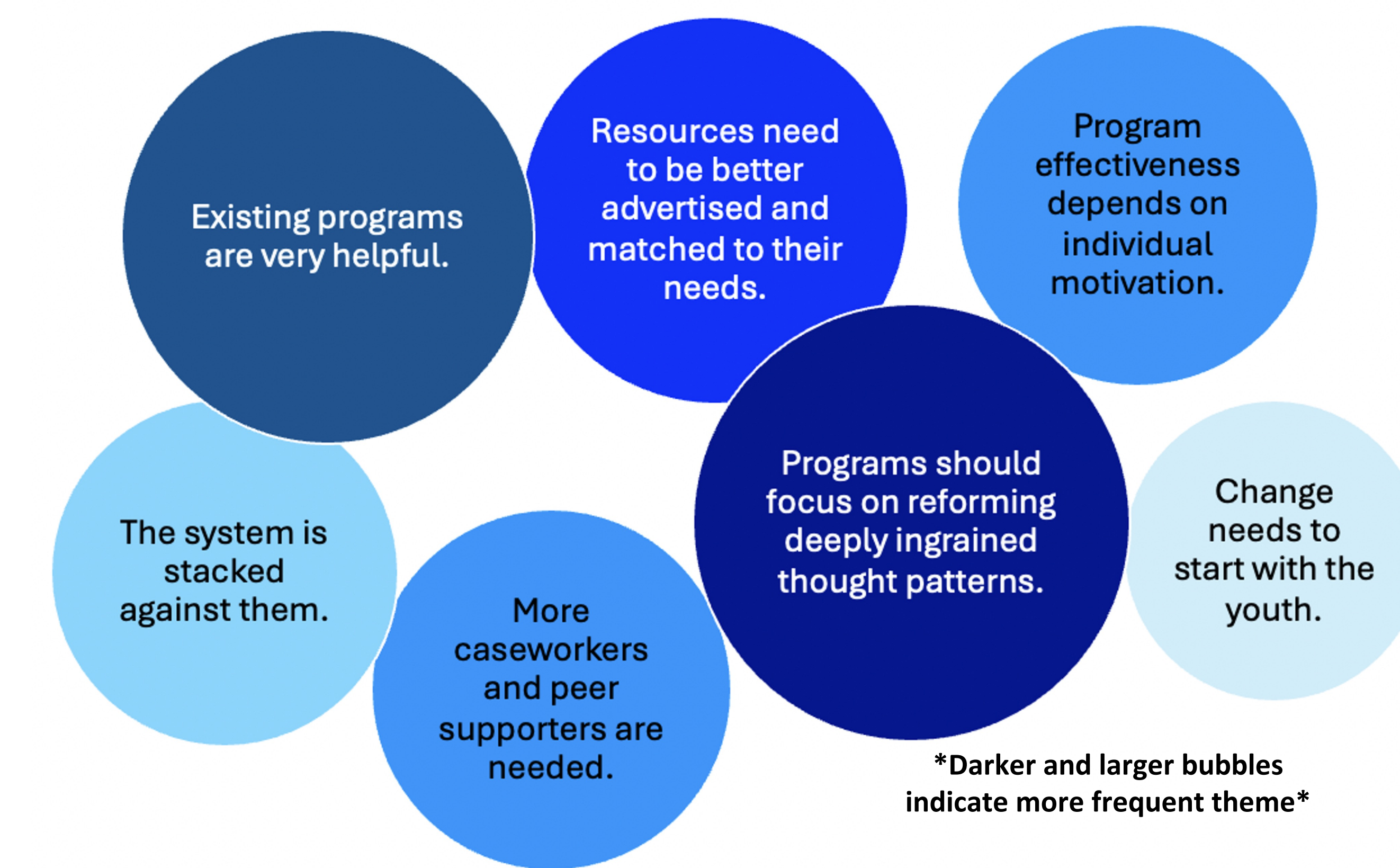
### Objective:

To augment our team's quantitative data analysis with the perspectives of individuals with lived experience, ultimately seeking to evaluate existing county programs that assist people while incarcerated and upon re-entry.

### Methods:

- Conducted 2 focus groups consisting of 8 and 5 participants, recruited by community partners at the Recovery Community of Durham.
- Extracted themes and frequency of theme occurrence from recordings of Focus Group A. Listened to Focus Group B to record the frequency of themes identified in A. Repeated this process starting with Focus Group B.

### Participants felt that...



### Next Steps:

**Completing** additional focus groups, rigorously **analyzing** complete data, and **communicating** findings to stakeholders and participants.

## Describing Our Familiar Neighbors: Cost and Demographics

### Objective:

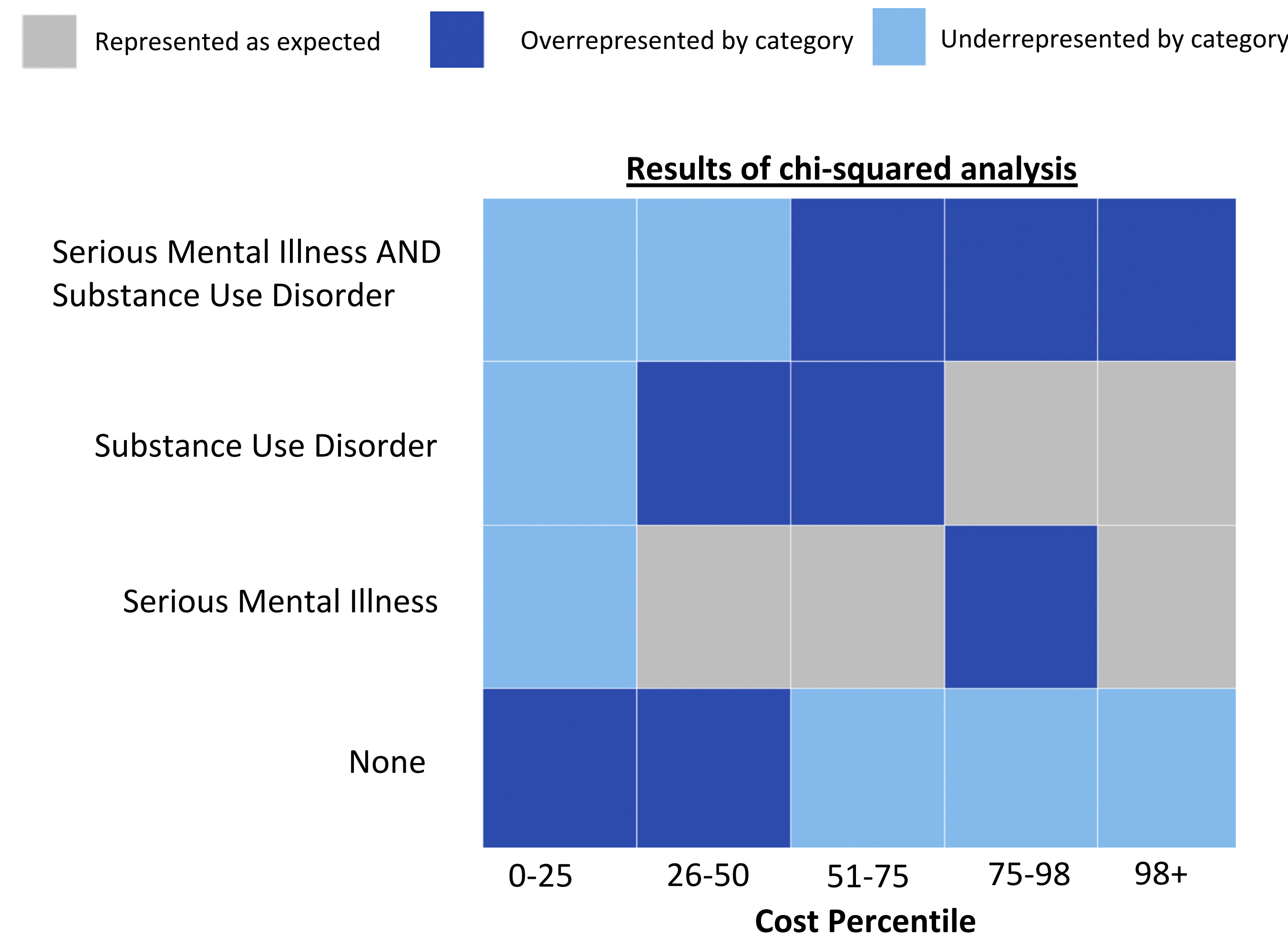
For various diagnoses and usage patterns, describe the total cost and insurance information for people who visited Duke health and were booked in DCDF from 2014-2020.

### Methods:

- Tagged patients for serious mental illness & substance use disorder diagnoses, and type of insurance.
- Sorted patients into a range of lifetime cost categories from lowest percentile (0-25) to highest percentile (98+).
- Performed chi-squared residual analysis at a 0.05 significance level to determine relationship between diagnoses and cost percentiles.

### Results and Conclusions:

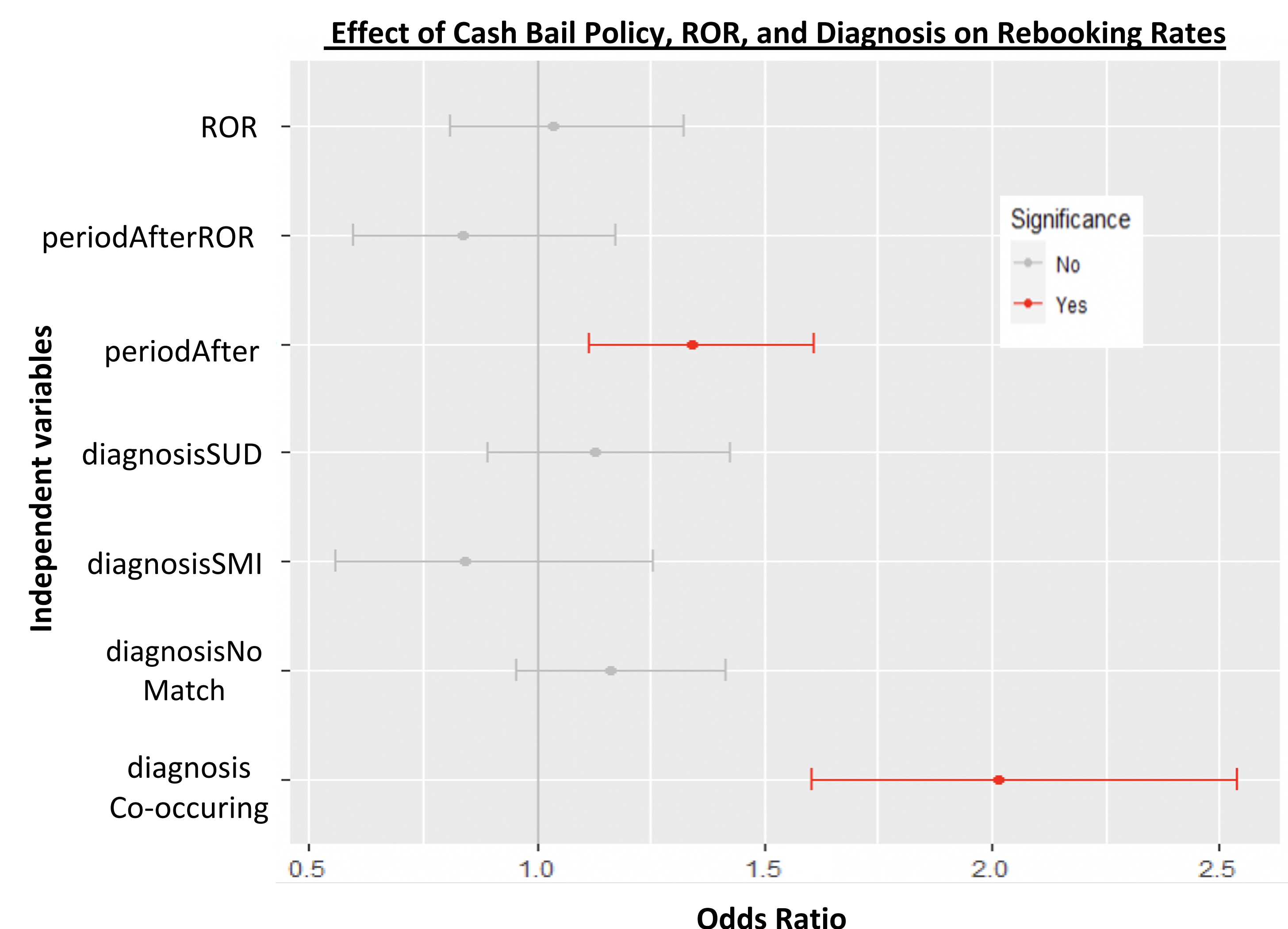
- In the **highest cost percentile (98+)**, individuals with **co-occurring diagnoses were overrepresented**. In the lowest cost percentiles, individuals with no diagnoses were overrepresented.
- Median emergency room visits increase with an increasing lifetime cost percentile.
- By a wide margin, **Medicaid is the most utilized form of insurance** in the highest cost percentile.



## Cash Bail, Pretrial Release, and Re-bookings: A Policy Analysis

### Objective:

Examine the effects of 2019 cash bail reform policy in Durham County on pretrial release patterns and re-booking rates through logistic regression analysis and hypothesis testing.



### Results and Conclusions:

- In general, **chances of receiving ROR increased by 63%** after the policy change.
- There was no significant difference in likelihood of getting ROR between SMI, SUD, and co-occurring diagnoses across periods.
- After the policy change, individuals were **35% more likely to be rebooked**. However, this difference did not stem from individuals that were ROR.
- Regardless of period, **co-occurring diagnoses were twice as likely to be rebooked** compared to no diagnoses.