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**Collaborative**  
Social Health and Research Equity

**A Substance Use Disorder Health  
Equity Report Card (SUD-HERC) and  
Landscape Analysis of SUD Treatment  
Resources in  
Port Huron, Michigan**

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# SHARE Team Members



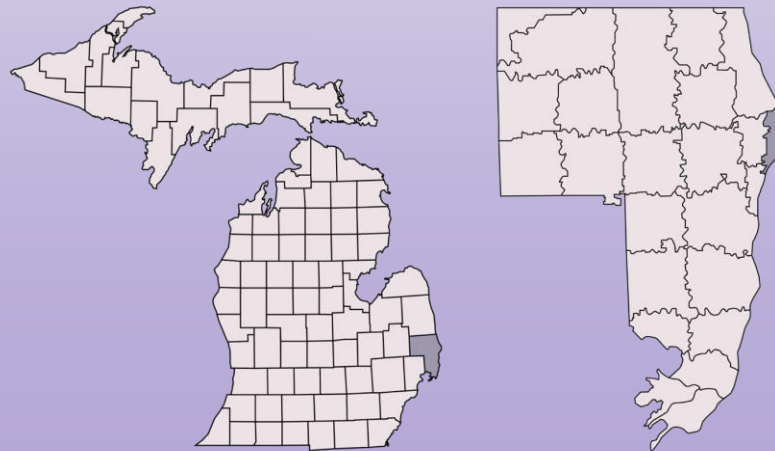
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# Project Goals

- To inform research, practice and policy in under-served and under-resourced Port Huron by:
  - Conducting a **landscape analysis** of SUD services, providers, strengths, and needs
  - Co-creating the **SUD Health Equity Report Card (SUD-HERC)** to disseminate disaggregated and geographically-specific SUD-related indicators
- Disseminate these products and results with community audiences, and obtain feedback to guide ongoing improvement and outreach

# Port Huron, Michigan: Demographics

- Population estimate (Census, 2022)
  - St. Clair County (SCC): 159,668
  - Port Huron: 28,626
- Race/Ethnicity
  - St. Clair County: White 93.7%, Hispanic/Latino 3.8%, Black/African American 2.5%
  - Port Huron: White 81.2%, Black/African American 8.1%, Hispanic/Latino 7.3%



# Port Huron, Michigan: SUD Milieu

- Impacted by income disparity
- Insufficient availability of behavioral health care and treatment for SUD
- Higher than average patient-to-provider ratios
- Rural geography plus a lack of transportation hinders access to care
- Top third for opioid prescription rates and non-fatal overdoses in Michigan
- 8th highest in fatal overdoses in state



# Landscape Analysis: Purpose

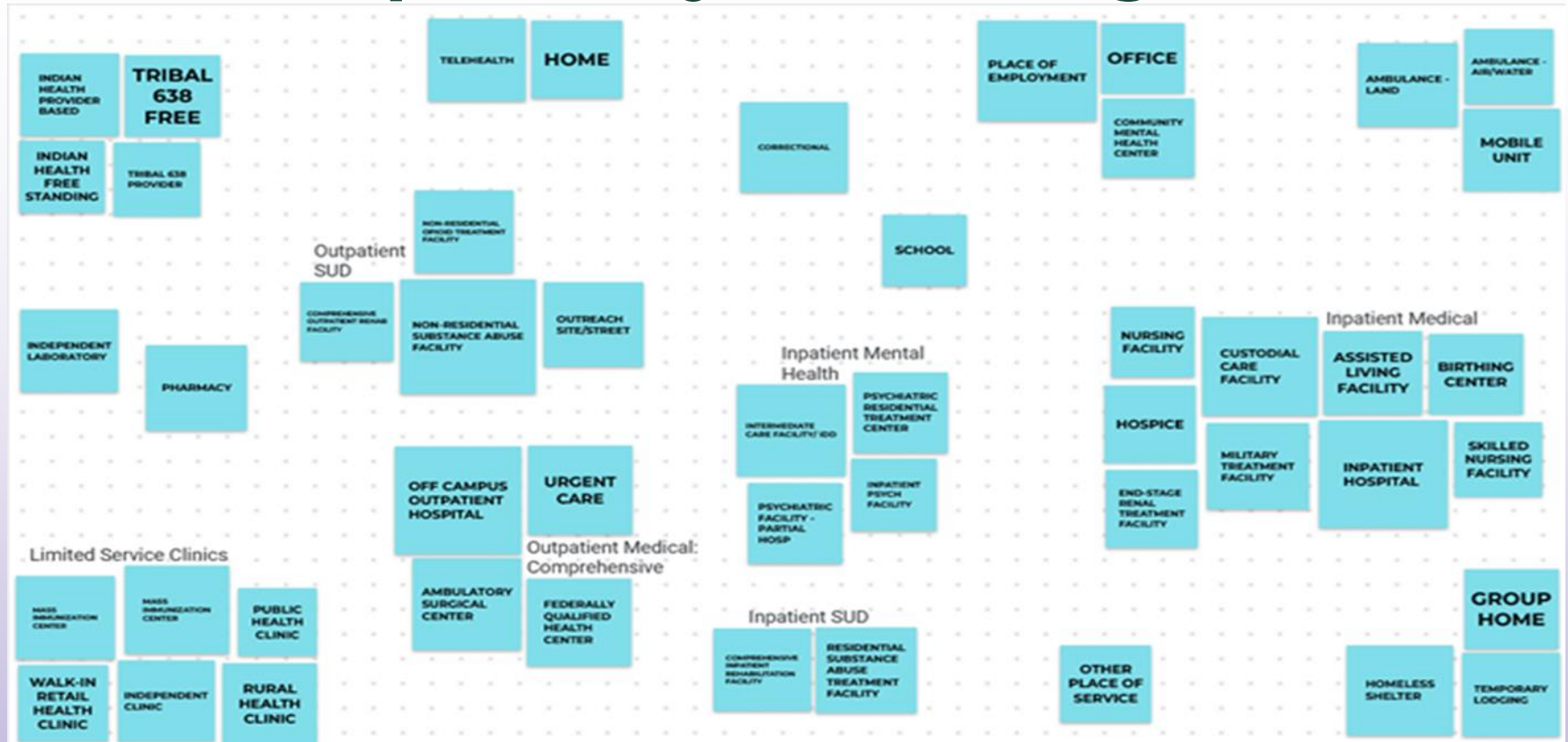
- Document locations of all SUD service providers in Port Huron & SCC
  - Map locations to visualize “distance to treatment” (common inequity/barrier for poor, rural residents)
- Document **intake** / “sign-up” availability at each location
- Document all **setting** types where services are provided
  - e.g., home based, residential, outpatient clinic
- Document each type of **service** available at each physical location
  - e.g., detox, group therapy, transportation, child care
- Document all **populations** each service is available to
  - e.g., adults, children, pregnant and postpartum

# Landscape Analysis: Current Progress

- Collaborate with the CSCB Substance Use Prevention, Treatment, and Recovery workgroup (SUPTR) to construct, distribute, and analyze an online survey:
  - They planned to do a SUD Resource Directory
  - We needed better data (provider websites inconsistently report services offered, if listed at all)
- **Setting types** based on federal Centers for Medicare & Medicaid Services' ([CMS](#)) place of service codes
- **Service types** derived from Region 10 Prepaid Inpatient Health Plan's ([PIHP](#)) authorized services for SUD Providers
- In the process of analyzing gaps in SUD services by location, settings, age, and intakes
  - e.g., maps, tables, and graphics



# Landscape Analysis: Setting Process



- Challenge: presenting complex constructs in a user-friendly format that still yielded sufficient detail to identify gaps
- Goal: Objective group input from multiple perspectives (avoid bias)

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# Landscape: Gaps in Ages Served

- Of the Resource Directory surveys completed to date, we have a 64% agency completion rate
  - 13 unique locations (7 of 11 parent organizations)
  - 10 out 13 unique locations do intakes/"sign-ups"
- Services for age groups examined for gaps:

Unique Locations	AGE + Service, Settings Gaps	Endorsed JotForm AGES	All Possible JotForm AGES
11	156	Adults (All)	Adults (All)
2	22	Adults (Females Only)	Adults (Females Only)
			Adults (Males Only)
2	8	Child (All)	Child (All)
2	6	Child (Ages 0-12)	Child (Ages 0-12)
2	6	Child (Ages 13 -17)	Child (Ages 13 -17)
4	48	Adult Female + Minor Children	Adult Female w/ Minor Children
2	22	Adult Male + Minor Children	Adult Male w/ Minor Children
2	11	Coparenting Couples + Minor Children	Coparenting Couples w/ Minor Children

Red = 100% absence (service gap)

Orange = Poor coverage

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# Landscape: Gaps in Service Types

Unique Locations	SERVICE + Age, Settings Gaps	Endorsed JotForm SERVICES	All Possible JotForm SERVICES
8	18	Alcohol/Drug Assessment	Alcohol/Drug Assessment
4	7	Alcohol/Drug Testing	Alcohol/Drug Testing
8	17	Brief Intervention	Brief Intervention
8	11	Case Management	Case Management
			Child Sitting Services
11	28	Community Referrals	Community Referrals
7	12	Crisis Intervention	Crisis Intervention
			Day Treatment
3	8	Driver's License Evaluation	Driver's License Evaluation
6	8	Early Intervention	Early Intervention
5	18	Family Education And Supports	Family Education And Supports
1	2	Family Psychotherapy	Family Psychotherapy
6	8	Group Counseling Or Therapy	Group Counseling Or Therapy
3	7	Housing (Supportive/Recovery)	Housing (Supportive/Recovery)
7	20	Individual Assessment Services	Individual Assessment Services
6	17	Individual Therapy	Individual Therapy
1	1	Intensive Outpatient	Intensive Outpatient
3	3	Medication Assisted Treatment - Buprenorphine	Medication Assisted Treatment - Buprenorphine
			Medication Assisted Treatment - Methadone
4	4	Medication Assisted Treatment - Naltrexone	Medication Assisted Treatment - Naltrexone
4	4	Medication Review	Medication Review
8	23	Naloxone Distribution/Education	Naloxone Distribution/Education
2	6	Pregnant/Postpartum Services	Pregnant/Postpartum Services
5	10	Psychiatric Evaluation	Psychiatric Evaluation
3	5	Public Transportation Cost	Public Transportation Cost
7	18	Recovery Coach	Recovery Coach
6	6	Recovery Support Groups (NA, AA, CODA, SMART, Etc.)	Recovery Support Groups (NA, AA, CODA, SMART, Etc.)
4	5	Recovery Supports Non-Emergency Transportation [Provided]	Recovery Supports Non-Emergency Transportation [Provided]
			Residential (Long-Term)
			Residential (Short-Term)
			Sub-Acute Detoxification
			Sub-Acute Detoxification Short-Term Residential
2	9	Syringe Exchange Services	Syringe Exchange Services
2	4	Other	Other

# Landscape: Gaps in Setting Types

Unique Locations	SETTINGS + Age, Service Gaps	Endorsed JotForm SETTINGS	All Possible JotForm SETTINGS
8	51	Home/Telehealth	Home/Telehealth
			Inpatient Medical Facility
			Inpatient Mental Health
			Inpatient/Residential SUD
3	8	Jail/Correctional Facility	Jail/Correctional Facility
2	45	Long-term Care Setting	Long-term Care Setting
			Military Treatment Facility
2	35	Mobile	Mobile
			No Services Provided For Adults
			Outpatient Medical Facility
10	140	Outpatient SUD/Mental Health	Outpatient SUD/Mental Health
			School
			Shelter-Based
			Tribal/Indian Health Center

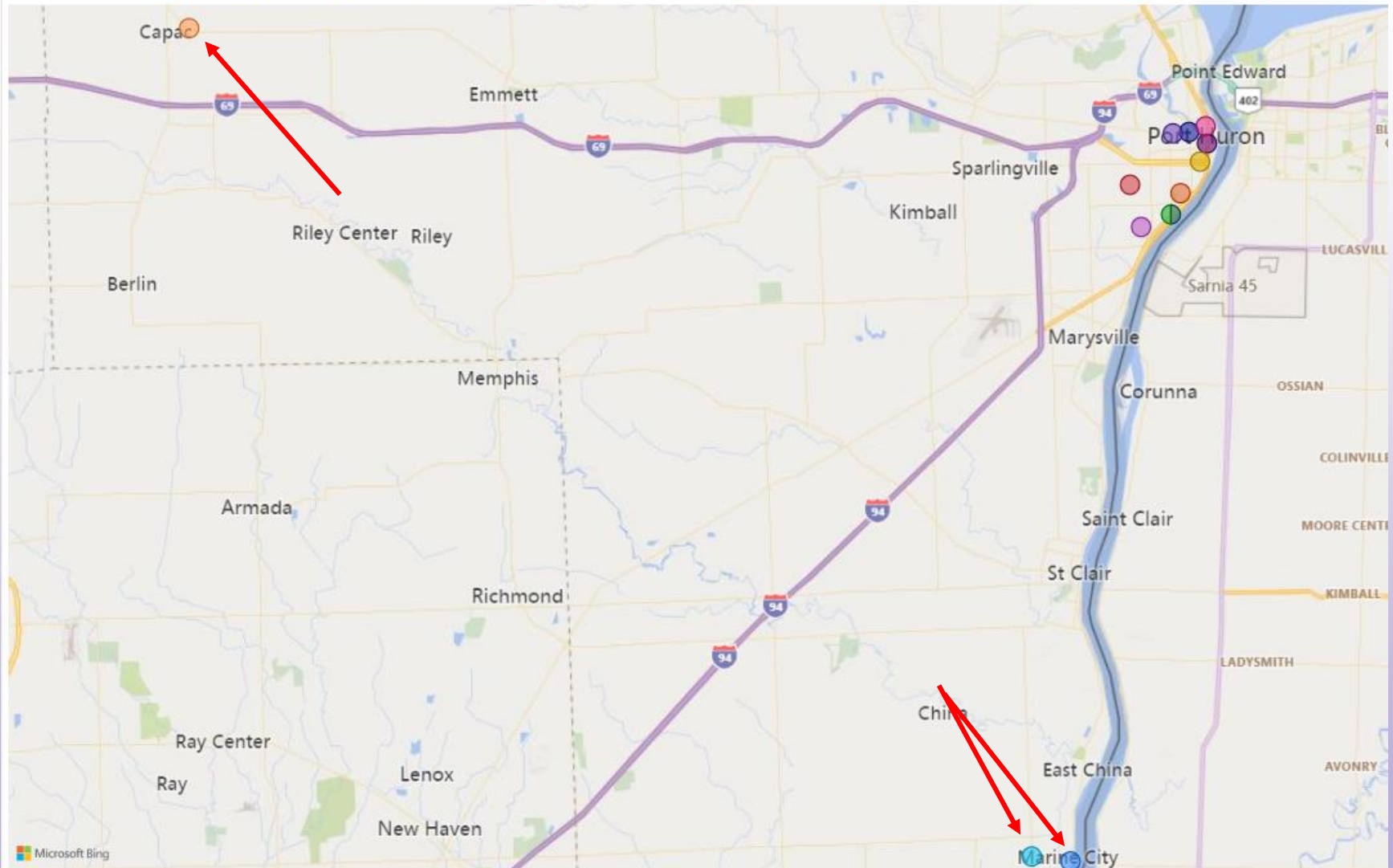
- Inpatient/Residential SUD Facility
- Withdrawal Management Facility
- Opioid Treatment Program (“Methadone Clinic”)
- Sober Support or Observation Facility

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# Landscape: Gaps in Locations

SHARE COMMUNITY SUPPORTS

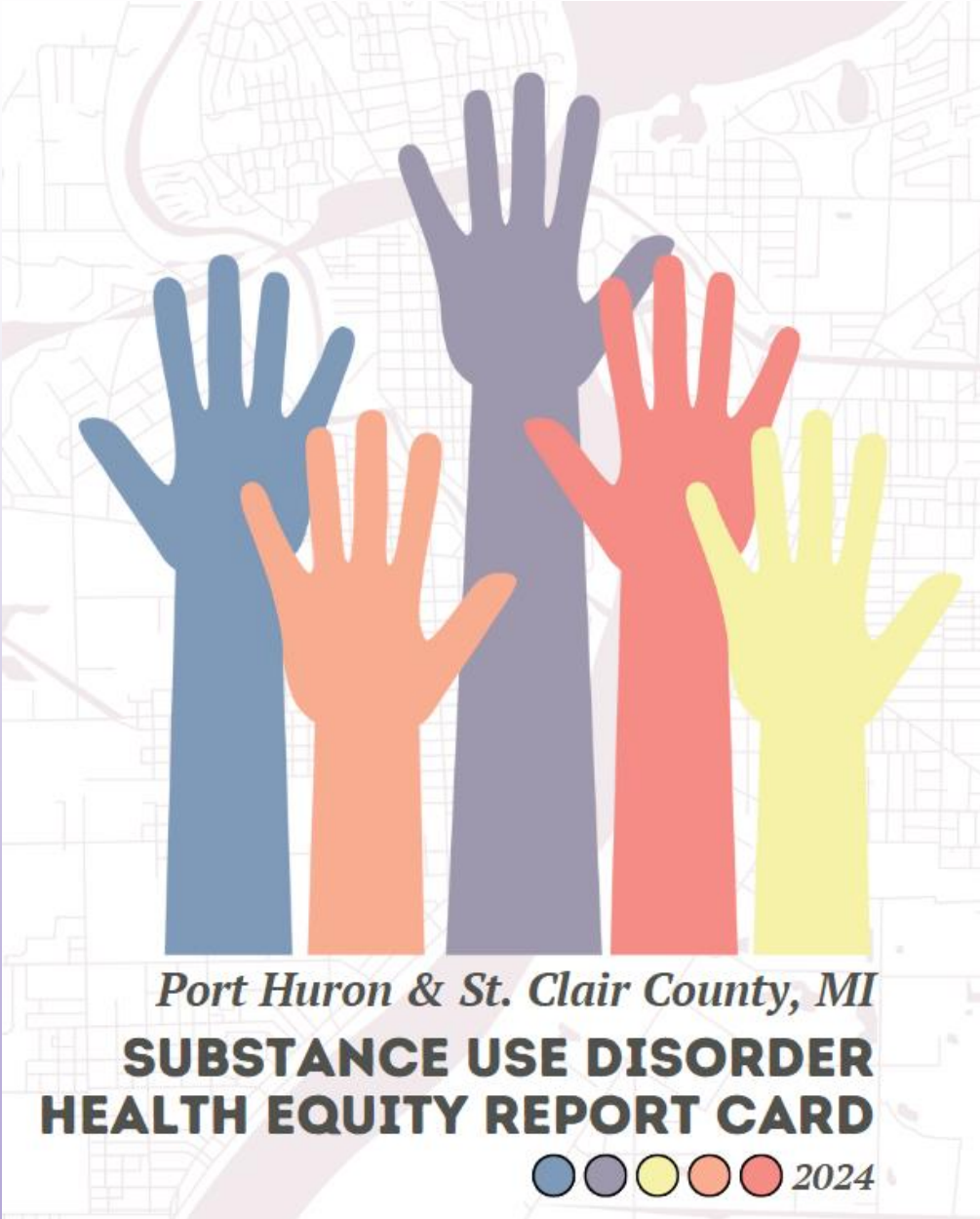
Site Nick Name (Blank) BWROC CCSEM I.M.P.A.C.T. PCC PHOH - Lape... PHOH - Main PHOH - Petit... SCC CMH SCC CMH - ... SCC CMH - ...



Well, there's your problem!...

# Landscape Analysis Summary

- 2022 Census: Port Huron is 18% of SCC population
  - Vast majority of SUD services are within a 5-block radius in Port Huron: ~80% of residents must travel far to access most services
- Very few services tailored for pregnant and postpartum women, children, fathers, or families
- Little medical assisted treatment (MAT) in the city
- No residential or detox services anywhere
- Few settings options (where services are provided)
- Lack of full continuum of care, specifically higher levels of clinical care (e.g., intensive outpatient)
- Recommendation: have survey responses reviewed by a community worker extremely knowledgeable about and connected to local the SUD provider community



# SUD-Health Equity Report Card (SUD-HERC)

**Purpose:** To identify and communicate the state of SUD and health disparities (differences) between geographic locations (i.e., Port Huron, St. Clair County, Michigan)

**Ultimate Goal:** To support community prevention and intervention efforts and improve health equity through data driven policy, programs and conversations!

**Addresses:** Information as an additional determinant of health (Morley et al., 2020; Pian et al., 2021; Graham et al, 2024; Uphold et al., in review)

SHARE TRANSFORMATION



# SUD-HERC: Data

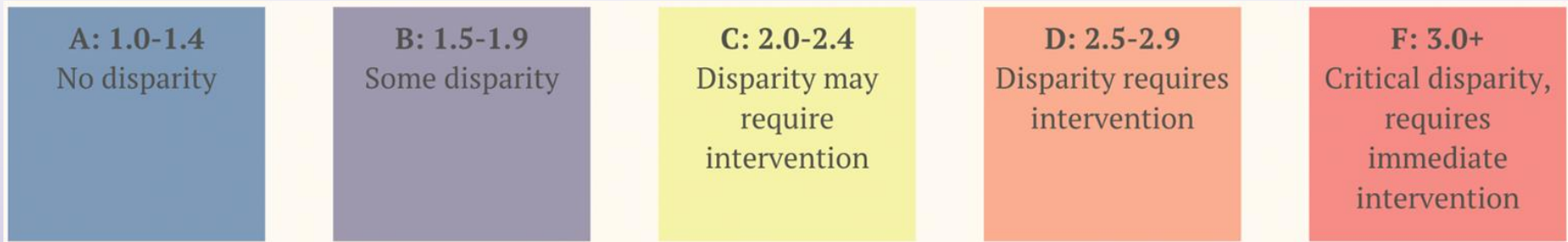


- Sources
  - Accessed 7 sources (i.e., Census, MDHHS, America's County Rankings, etc.)
  - Identified 21 variables (i.e., Overdose deaths, education, drug involved traffic crashes, etc.)
- Analysis
  - Calculated a disparity ratio: divided the outcome for one group by the same outcome for a second group
  - The higher the number, the higher the disparity or difference between groups
  - The disparity ratio tells us differences between groups, **not** how well we are doing overall



# SUD-HERC: Letter Grades

## Grading:



- Scale is based on a model from New Mexico
- Selected by community partners after an extensive review of existing Health Report Cards nationwide



# SUD-HERC: Jump on in!

<https://tinyurl.com/SUDHERC>



# SUD-HERC: Port Huron Findings

## HEALTH SERVICES AND ACCESS

PORT HURON | ST. CLAIR COUNTY | MICHIGAN

This section highlights disparities related to access to health services in our community. By examining the availability of and barriers to health services, we can better understand the current state of SUD-related health equity in this region.

INDICATORS	YEAR(S)	MI x SCC Grade	MI x SCC Ratio	SCC x PH Grade	SCC x PH Ratio
Population without health insurance	MI: 2020 SCC: 2020 PH: 2020	A	1.1	A	1.0
Households with no vehicle	MI: 2020 SCC: 2020 PH: 2020	A	1.3	C	2.0
Households without internet	MI: 2017-20 SCC: 2017-20 PH: 2017-20	A	1.1	A	1.1
Population within 15 minute drive to a pharmacy	MI: 2021 SCC: 2020 PH: 2020	A	1.1	A	1.1
Population within 30 minute drive to a hospital	MI: 2021 SCC: 2020 PH: 2020	A	1.1	A	1.1
Population within 30 minute drive to a SUD treatment center	MI: 2021 SCC: 2021 PH: 2021	A	1.0	A	1.1
Population within 15 minute drive of a syringe service program	MI: 2021 SCC: 2021 PH: 2021	A	1.2	C*	2.1

Compared to Port Huron, **2 times** more individuals in St. Clair County **do not have a vehicle**. This indicates a **C grade** disparity that should be monitored and may require intervention. Individuals in Port Huron are **2.1 times** more likely to live **within a fifteen minute drive of a syringe service program** compared to St. Clair County. This indicates a **C grade** disparity that should be monitored and may require intervention.

### GRADING SYSTEM

Disparity ratios measure the difference in outcomes between two groups. The resulting number then determines the letter grade for that given indicator. A lack of disparity or difference does not mean adequate health services, access, behaviors, or outcomes. An asterisk [\*] indicates that St. Clair County [SCC] faces worse outcomes, rather than Michigan [MI] or Port Huron [PH].

A: 1.0-1.4 No disparity	B: 1.5-1.9 Some disparity	C: 2.0-2.4 Disparity may require intervention	D: 2.5-2.9 Disparity requires intervention	F: 3.0+ Critical disparity, requires immediate intervention
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## SOCIOECONOMIC STATUS

PORT HURON | ST. CLAIR COUNTY | MICHIGAN

This section highlights disparities related to social and economic factors in the community. By examining indicators such as income and education, we can better understand the current socioeconomic conditions that may affect SUD-related health equity in this region.

INDICATORS	YEAR(S)	MI x SCC Grade	MI x SCC Ratio	SCC x PH Grade	SCC x PH Ratio
High school graduate or higher	MI: 2017-21 SCC: 2017-21 PH: 2017-21	A	1.0	A	1.0
Bachelor's degree or higher	MI: 2017-21 SCC: 2017-21 PH: 2017-21	B*	1.6	A	1.1
Unemployed, ages 16+	MI: 2022 SCC: 2020 PH: 2020	A	1.0	A	1.3
People in poverty	MI: 2020 SCC: 2020 PH: 2020	A	1.2	C	2.0
Median household income	MI: 2017-20 SCC: 2017-20 PH: 2017-20	A	1.0	A	1.4
Single parent households with children	MI: 2021 SCC: 2020 PH: 2020	F	5.3	B	1.8
High housing-cost-burden households	MI: 2015-19 SCC: 2020 PH: 2020	A	1.1	A	1.4

Compared to St. Clair County, **2 times** more individuals in Port Huron are **in poverty**. This indicates a **C grade** disparity that should be monitored and may require intervention. Households in Port Huron are **1.8 times** more likely to be **single parent households with children** compared to St. Clair County. This indicates a **B grade** disparity that should be monitored.

### GRADING SYSTEM

Disparity ratios measure the difference in outcomes between two groups. The resulting number then determines the letter grade for that given indicator. A lack of disparity or difference does not mean adequate health services, access, behaviors, or outcomes. An asterisk [\*] indicates that St. Clair County [SCC] faces worse outcomes, rather than Michigan [MI] or Port Huron [PH].

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## SUBSTANCE USE

PORT HURON | ST. CLAIR COUNTY | MICHIGAN

This section highlights disparities for SUD and related indicators within the community. By examining factors such as drug-related arrests and overdose deaths, we can better understand the current state of SUD and related disparities in this region.

INDICATORS	YEAR(S)	MI x SCC Grade	MI x SCC Ratio	SCC x PH Grade	SCC x PH Ratio
Opioid prescription units	MI: 2021 SCC: 2020 PH: 2020	B*	1.6	A	1.2
Buprenorphine prescription units	MI: 2021 SCC: 2020 PH: 2020	A	1.4	A	1.4
Drug-involved traffic crashes	MI: 2021 SCC: 2021 PH: 2021	A	1.3	B	1.7
Drug-related arrests	MI: 2019 SCC: 2020 PH: 2020	A	1.0	A	1.3
Non-fatal overdose emergency department visits	MI: 2020 SCC: 2020 PH: 2021	A	1.2	B	1.8
Overdose deaths	MI: 2021 SCC: 2021 PH: 2020	A	1.2	F*	4.5

Individuals in Port Huron are **1.8 times** more likely to have a **non-fatal overdose emergency department visit** compared to St. Clair County. This indicates a **B grade** disparity that should be monitored. Individuals in St. Clair County are **4.5 times** more likely to have **died from overdose** compared to Port Huron. This indicates a **F grade** critical disparity that requires immediate intervention.

The **substance use vulnerability index score (MI-SUVI)** for Port Huron residents is 0.6 and -0.1 in St. Clair County. This means that Port Huron and St. Clair County residents have been similarly impacted by substance use disorder compared to other residents across the state.

### GRADING SYSTEM

Disparity ratios measure the difference in outcomes between two groups. The resulting number then determines the letter grade for that given indicator. A lack of disparity or difference does not mean adequate health services, access, behaviors, or outcomes. An asterisk [\*] indicates that St. Clair County [SCC] faces worse outcomes, rather than Michigan [MI] or Port Huron [PH].

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SHARE ACCESSIBILITY

# SUD-HERC: Key Areas

- **Grade F:** *Critical disparity, requires intervention*
  - St. Clair County residents are **4.5 times** more likely to die from an overdose versus Port Huron residents
- **Grade C:** *Disparity may require intervention*
  - Port Huron residents are twice as likely to be without a vehicle and live in poverty
  - St. Clair County residents are twice as likely to live more than a 15 minute drive from a syringe service program compared to Port Huron residents
- Note that the letter grades describe differences between groups, not the overall outcome

# Michigan Substance Use Vulnerability Index (MI-SUVI)

- Measure of vulnerability to adverse substance use outcomes
- Does not describe “good” or “bad” counties, instead indicates the extent to which a county has been impacted by SUD compared to other counties
- Assesses 8 indicators grouped into 3 categories:
  - *Substance Use Burden* (e.g., opioid Rx units, overdose deaths, nonfatal overdose ED visits, drug related arrests, etc.)
  - *Substance Use Resources* (e.g., % population within 30-minute drive of a publicly funded treatment center, 15-minute drive from syringe service program, etc.)
  - *Social Vulnerability* (e.g., % households without broadband internet access, % population within 15-minute drive of pharmacy, social vulnerability index, etc.)

SHARE RESILIENCE

# MI-SUVI: St Clair County

- Out of 83 Michigan counties, St. Clair County
  - MI-SUVI: Ranks 46<sup>th</sup> with a score of -0.1
    - Roughly similar to other counties across the state
  - Substance use burden: Ranks 11<sup>th</sup>
  - Substance use resources: Ranks 19<sup>th</sup>
  - Social vulnerability: Ranks 59<sup>th</sup>
- MI-SUVI should not be used alone for decision making.

*For more information go to: <https://www.michigan.gov/opioids/category-data>*



# Landscape Analysis x SUD-HERC

- **ACCESS:** Majority of services exist within a 5-block radius in Port Huron
  - St. Clair County residents: 4.5 times more likely to die from an overdose vs. Port Huron residents, and twice as likely to live +15 minute drive from syringe service program, dangerous rural roads
  - Port Huron residents twice as likely to: live in poverty, lack vehicle
- **Population Specific Support:** Few tailored services for pregnant and postpartum women, children, fathers, or families
  - Nearly twice as many single parent households in St. Clair County vs. Port Huron
- **Treatment Services:** Lack of full continuum of care, specifically a higher level of clinical care
  - MI-SUVI: Substance Use Resources- St. Clair County ranked 11<sup>th</sup> in state (i.e., treatment facilities access, syringe service programs)

SHARE REFERRAL INFRASTRUCTURE

# Next Steps and Future Directions

## Project Activities

- Complete Landscape Analysis map layers for all iterations (age x location x service x intakes)
  - MSU graduate student summer interns
- Craft more generalized service codes (not just Region 10 PIHP) so we can make these tools available to others

## Dissemination

- Michigan Institute for Clinical & Health Research (MICHR) Promoting Academics and Community Engagement (PACE)

## Funding

- PEPI-DISc Port Huron implementation trial
- SUD treatment gap services in Port Huron - utilize Opioid Settlement funding to expand available services or locations
- Work with SCC Health Dept to explore ways to assist Maternal Infant Health Program participants w/ SUD
- Low hanging fruit: Expansion of Fatherhood programming into Port Huron



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**THANK YOU!**

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