

“Strategies to Improve Implementation of Medications for Opioid Use Disorder Reported by Veterans Involved in the Legal System”

Research Objective

What do military veterans with a history of opioid use disorder and legal-system involvement think would help improve access to and use of medications for opioid use disorder?

Sample

The veterans were mostly white men who had struggled with OUD for most of their lives and who had tried medications for opioid use disorder. Over two-thirds were most recently involved in the legal system in the past year.

Policy Implications for VHA

- Use mobile agonist units and build on the expanded telephone and video outreach.
- Conduct in-reach into jails and prisons and educate veterans on the benefits of MOUD and various resources at local VHA facilities and in local communities and prepare them to talk with waived providers about MOUD upon release.
- Educate criminal justice partners on the benefits of MOUD.
- Ensure all three medications (methadone, buprenorphine, and naltrexone) are available at each VHA facility.
- Consider using care teams to provide more stability for legal-involved veterans receiving MOUD. Train care teams on the unique aspects of these veterans' treatment, such as court mandates for care or concerns about incarceration.
- Incorporate patient-generated data with clinical care.
- Use educational programs and health literacy in relevant treatment settings to address gaps in patient knowledge.
- Online social media may also be an effective forum to connect peers and offer referrals to resources and recovery groups and activities.

Methods

Interviewed 18 veterans at 9 Veterans Health Administration, or VHA, facilities.

Key Findings

1. Provide transportation or telehealth.
2. Increase access to MOUD in carceral settings.
3. Reduce physician turnover.
4. Improve physician training to provide person-centered care.
5. Improve veteran education about MOUD.
6. Provide social support opportunities.