



Community Data Interpretation (CDI)

Community stakeholders on the front lines of the opioid epidemic are best suited to interpret the meaning of local data and to identify interventions that are likely to make a difference in their community. They are also familiar with the strengths and assets within the community that can be used to better inform interventions.

Purpose

CDI aims to help community coalitions and leaders better understand the landscape of the opioid epidemic in their communities and generate data-driven solutions. By bringing stakeholders from different sectors together in understanding their own local data, the CDI is instrumental in fostering dialogue and collaboration among policymakers and practitioners from a variety of systems.

CDI—Community Data Interpretation

Collaborative | Participatory | Empowering



Meaning Making → Course of Action

STAKEHOLDERS WHO PARTICIPATE IN CDI include hospitals and healthcare workers, school representatives, substance use treatment providers, police department and criminal justice representatives, fire/emergency medical services, policymakers and local leaders, faith leaders, people and families experiencing opioid use disorders, and those in-recovery.

DATA SETS that can be reviewed in CDI include ambulance calls for suspected overdose, opioid-related emergency room and hospitalization data, surveillance data on substance use patterns, number of infants born with neonatal abstinence, drug seizure data, and overdose deaths.

Outcomes

The CDI process honors the experiences and professional expertise of participants who are closest to those affected by the epidemic. Moreover, involving local stakeholders in planning the solutions they will ultimately implement ensures that the solutions are relevant and can have sustained commitment from the community. Ideally the CDI process results in:

- Dialogue and creative solution-building to convene cross-sector stakeholders closest to the epidemic
- Identification and prioritization of specific needs in communities that are driving key findings
- Identification of promising practices to address local needs and create workable solutions to the crisis

Products

In addition to real-time instruction, facilitation, and consultation as part of the CDI facilitation services, AIR offers the following resources to guide participants during and after the CDI process:

- A Data Visualization Packet that includes information on their local opioid epidemic in the form of visual aids, maps, and summary statistics
- The Opioid Response Planning Checklist (ORPC), a tool developed by AIR to guide coalitions in self-assessment and planning for opioid misuse prevention and reduction endeavors
- Access to the Community Opioid Research and Response Dashboard (CORRD), an interactive proprietary dashboard of promising practices and policies



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“We adopted this approach to flip the script. Rather than hosting a summit of ‘scientific experts,’ we wanted to showcase the communities as the experts in their own epidemic. We asked them to share efforts that were working or that they wanted to implement, and we invited them to interpret local data with support and guidance to think about new potential activities. Most importantly, we provided a venue for the real experts to make connections and commit to collaborations.”

Dr. Melissa McPheeters, Director of Informatics and Analytics, TN Department of Health

For more information, please visit <https://www.air.org/center/center-multi-system-solutions-opioid-epidemic> or contact: Elizabeth Salisbury-Afshar, MD, MPH
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About the American Institutes for Research

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