

Building Successful Partnerships Between State Health Departments and Attorney General Offices: The Minnesota Example



Dana Farley | Drug Overdose Unit Supervisor, MDH
Carman Leone | Assistant Attorney General, OMAG
Caroline Palmer | Safe Harbor Director, MDH

Land Acknowledgement

Every community owes its existence and vitality to generations from around the world who contributed their hopes, dreams, and energy to making the history that led to this moment. Some were brought here against their will, some were drawn to leave their distant homes in hope of a better life, and some have lived on this land for more generations than can be counted. Truth and acknowledgment are critical to building mutual respect and connection across all barriers of heritage and difference.

We begin this effort to acknowledge what has been buried by honoring the truth. We are standing on the ancestral lands of the Dakota people. We want to acknowledge the Dakota, the Ojibwe, the Ho Chunk, and the other nations of people who also called this place home. We pay respects to their elders past and present. Please take a moment to consider the treaties made by the Tribal nations that entitle non-Native people to live and work on traditional Native lands. Consider the many legacies of violence, displacement, migration, and settlement that bring us together here today. Please join us in uncovering such truths at any and all public events.*

^{*}This is the acknowledgment given in the USDAC Honor Native Land Guide – edited to reflect this space by Shannon Geshick, MTAG, Executive Director Minnesota Indian Affairs Council

Agenda

4:30 to 4:45 p.m.: Introduction: Health Equity and Access to Justice

4:45 to 5:15 p.m.: Short presentations on post-conviction justice, the opioid crisis, and human trafficking

5:15 to 5:35 p.m.: Panel discussion

5:35 to 5:45 p.m.: Audience questions and wrap up

To be healthy people need ...











PEACE

SHELTER

EDUCATION

INCOME

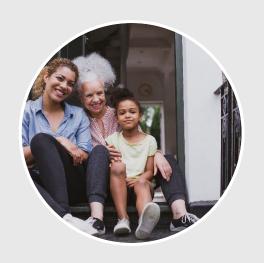
SOCIAL JUSTICE

where they are born, live, grow, work, play, and age.



What Contributes to Health Inequities?

What Makes a Difference?



Community Investments



Equal Justice



Access to Opportunity



Empathy and Support

Working Across Missions

Minnesota Department of Health

- Mission: Protecting, maintaining, and improving the health of all Minnesotans
- Vision: The vision of MDH is for health equity in Minnesota, where all communities are thriving, and all people have what they need to be healthy

- The Attorney General is the chief legal officer for the state
- Provides legal representation to over 100 state agencies, boards, commissions, represents the state in court
- Provides legal assistance to primarily rural county prosecutors in major felonies and criminal appeals
- Enforces state consumer protection and antitrust laws, regulates charitable institutions, and advocates for people and small business in utilities matters

How to Health and Law Work Together in State Government?

- The Attorney General's office and a state agency can have more than just an attorney-client relationship
 - Partnership opportunities
 - Funding opportunities to support one another
 - Providing change through litigation
 - Legislation and policy
 - Cross-education
 - Health data



Three Areas for Collaboration to Improve Health Equity and Access to Justice



Post-Conviction Justice



The Opioid Crisis



Human Trafficking and Exploitation



POST-CONVICTION JUSTICE

Statewide Expungement Program



Conviction Review Unit



STATEWIDE EXPUNGEMENT PROGRAM

STATEWIDE EXPUNGEMENT PROGRAM

Petition

Prosecutor Agreement



HelpSealMyRecord.org website





Minnesota
Conviction Review
Unit



Conviction Review Units, also known as **Conviction Integrity** Units, are independent divisions of prosecutors' offices that work to identify, remedy, and prevent wrongful convictions.

49 CRUs across the United
 States

Just 6 statewide CRUs

Importance of CRUs

CRUs played a role in 61% of all exonerations in the United States in 2020.

Exonerees spent an average of 13.4 years in prison before exoneration.

The CRU's Process

Who's eligible for assistance?

- MN felony conviction
- Currently incarcerated
- Not currently on appeal
- Claim of wrongful conviction -- "I didn't commit the crime."

Application available online and in DOC facilities

Translated into 5 different languages

CRU Recommenation and Resolution

Considering all information uncovered in the investigation

Is there evidence that fundamentally undermines confidence in the outcome?

If yes, the CRU recommends that the Attorney General's Office pursue a remedy.



SYSTEMIC CHANGE

What do we do with what we've learned?



FOR MORE INFORMATION

Carman.Leone@ag.state.mn.us



Opioid Epidemic

Public Health Law Conference October 25, 2023

Dana Farley

dana.farley@state.mn.us

Minnesota Department of Health

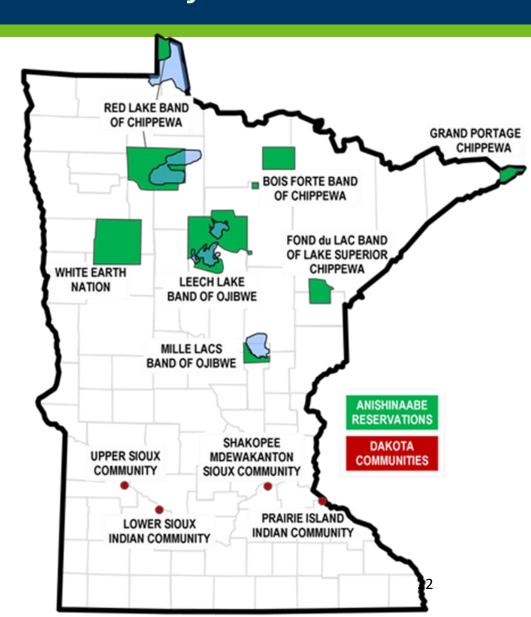
MDH Mission: Protecting, maintaining and improving the health of all Minnesotans

"Public health is what we, as a society, do collectively to assure the conditions for people to be healthy."

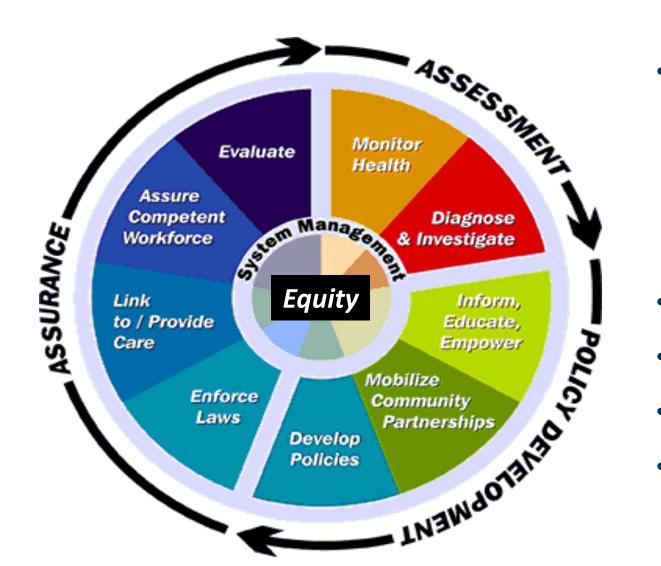
- Institute of Medicine (1988) Future of Public Health

"Public health is the constant redefinition of the unacceptable"

Geoffrey Vickers

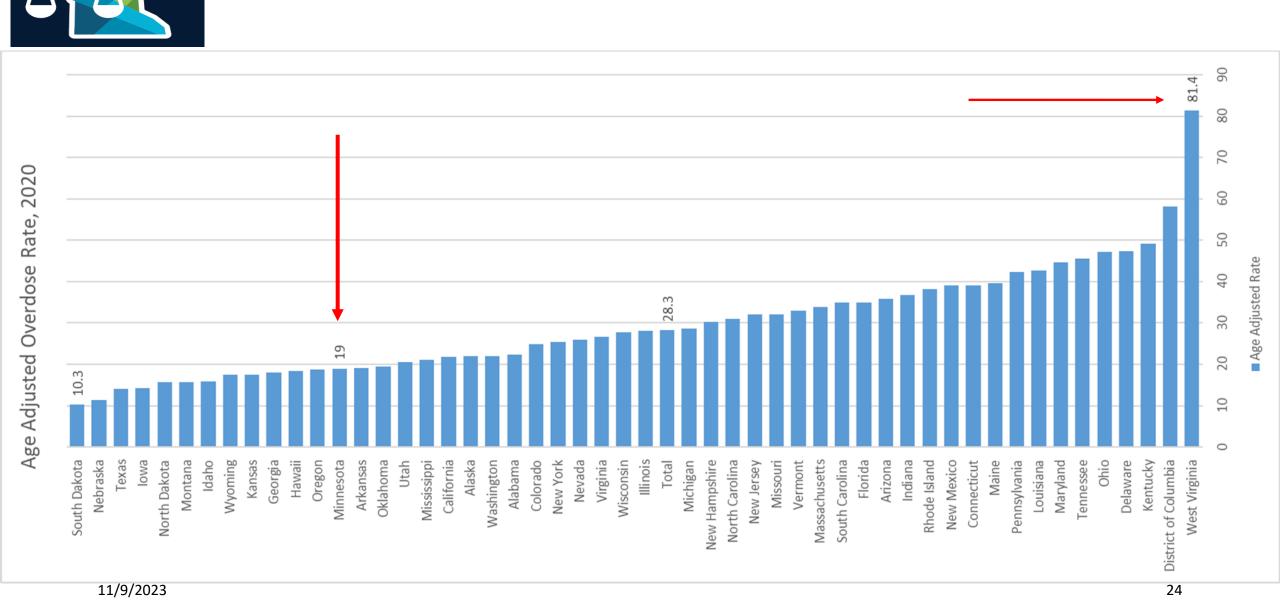


A Public Health Approach – 10 essential functions

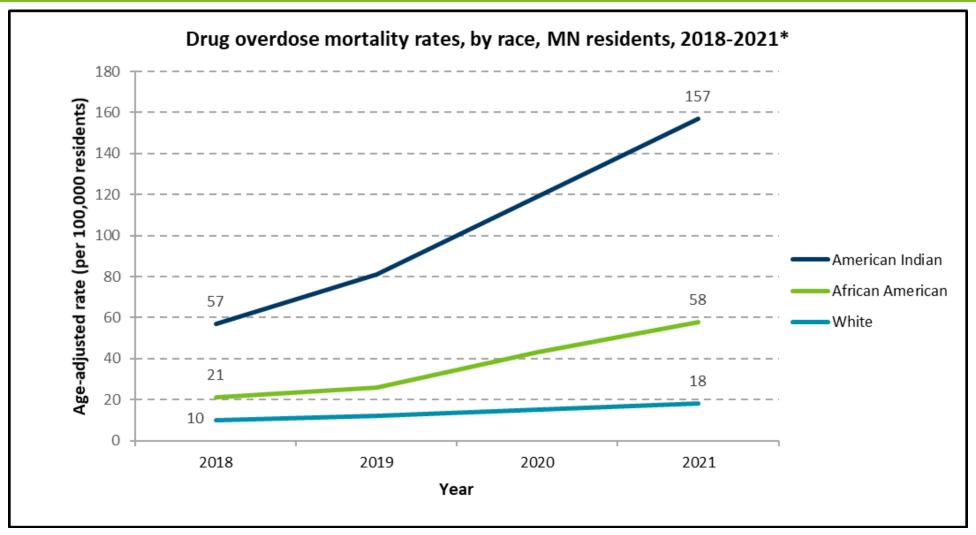


- What is the problem? What patterns do we see?
 - What data and information experience are we considering?
 - What is shaping or sustaining the patterns we see?
- What can communities do together?
- Choose and implement actions
- Evaluate-How is the pattern changing?
- Repeat—ongoing-iterative process

Prug overdose mortality rates vary widely across the U.S.



The drug overdose mortality rate disparity worsened in recent years





MN Strategy: Across Lifespan and Social Ecological systems

Community

Individual

Physical & mental health

Trauma & resiliency

Social emotional learning and skills

Perception of risk

Knowledge of public health and harm reduction

Withdrawal symptom management

Interpersonal

Access to opioids

Attitudes and opinions towards substance use and pain management

Acceptance of medically assisted treatment (MAT)

Substance use identification and prevention education

Access to peer support and family support

Naloxone education and carrying

Family history of substance use

Access to culturally specific providers, peer networks, and behavioral health services

Prescriber's perception of risk and prescribing practices

Drug disposal facilities

Access to MAT

Culturally specific providers

Access to Naloxone

Naloxone trainings

Public health and harm reduction programming

Legislation that supports syringe service

Societal

Stigma towards people who use drugs

programs, MAT providers and services, and expansion of behavioral health services

Policies that promote racial and

Economic wellbeing

Housing stability

health equity

Health insurance coverage for mental health care and substance use treatment

Naloxone access protocol for pharmacies

Impacts of justice involvement on economic and social advancements



These strategies raise issues that require legal solutions



Opioid-related Public Health **Emergency Declarations**

Emergency Legal Preparedness and Response

Substance Use Prevention and Harm Reduction

July 30, 2019 by James G. Hodge, Jr.



Read More -





50-state survey

Harm Reduction Laws in the United States

Read More -



Fact Sheet

Naloxone Prescription Mandates

Read More ->



50-state survey

Legal Interventions to Reduce Overdose Mortality: Overdose Good Samaritan Laws

Read More -



Fact Sheet

Evidence for Fentanyl Test Strips

Read More ->



Fact Sheet

Removal of the "X-Waiver" Requirement

Read More -



Fact Sheet

Tennessee's Naloxone Access Law, Explained

Read More →



Fact Sheet

Legality of Dispensing Naloxone to Minors in California

Read More -



The Role of the Attorney General in the Opioid Crisis

- The Attorney General's Office has taken legal action to hold opioid manufacturers, distributors, and individuals accountable for their conduct in creating this crisis, and to seek recovery of funds that can be used to address the issue:
 - May 2018: Lawsuit against Insys Therapeutics
 - July 2018: Lawsuit against Purdue Pharma
 - Oct. 2020: Bankruptcy of Mallinckrodt
 - Feb. 2021: Settlement with McKinsey & Company
 - Aug. 2022: Bankruptcy of Endo
- In addition to the public matters referenced below, the Attorney General's Office is leading nationwide efforts to ensure public disclosure of opioid-related documents, which are designed to achieve accountability, transparency, and prevention of future harm.
- The Office is also coordinating with MDH, DHS, and OERAC to ensure any potential settlement funds are used as effectively as possible throughout Minnesota to remedy the ongoing opioid crisis.



More information available at: https://www.ag.state.mn.us/Opioids/

The Role of the Attorney General in the Opioid Crisis: National Opioid Settlements

More than \$535 million for addressing the opioid crisis in Minnesota.

- In July 2021, the Attorney General's Office joined <u>historic \$26 billion multistate settlement agreements</u> with pharmaceutical distributors <u>McKesson, Cardinal Health, and AmerisourceBergen</u>, and opioid manufacturer <u>Johnson & Johnson</u>.
 - These settlements will bring more than \$300 million into Minnesota over the next 18 years.
- In <u>December 2022</u>, the Attorney General's Office joined five additional multistate settlements worth \$20.4 billion with major opioid manufacturers <u>Teva Pharmaceuticals</u> and <u>Allergan</u>, and three of the nation's largest retail pharmacy chains—<u>Walmart</u>, <u>CVS</u>, and <u>Walgreens</u>.
 - Minnesota's share of these settlements could be around \$235 million.

How funds are used: state collaboration with local government.

 In <u>December 2021</u>, the Attorney General's Office reached an <u>agreement</u> with Minnesota cities and counties on how funds from these settlements will be allocated: **75% to counties and cities, and 25% to the state**. The agreement details how the funds can be used to combat the opioid crisis, including detailed programs and strategies focused on treatment, prevention, and harm reduction.



Maximizing the impact of settlement funds

Framework for spending funds

Minnesota has the chance to use settlement funds to save lives and mitigate lifelong harms from drug misuse. To do this, settlement funds should be spent on effective interventions that are based on evidence. Settlement funds present a critical opportunity to work in synergy with other available resources. Maximizing the impact of the settlement funds will require coordination and thoughtful utilization. Below are resources to guide your community in deciding how best to allocate the dollars your community receives in order to maximize its impact.



Resources for implementing strategies

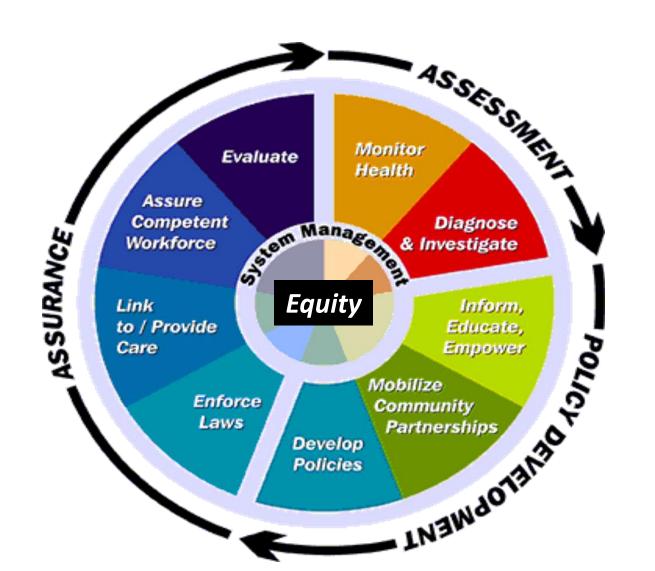
This section is meant to be used alongside Exhibit A of the Minnesota Opioid Memorandum of Agreement (PDF). The agreement provides 13 categories of strategies (A through M) that communities can implement using opioid settlement funds as well as a list of specific examples of strategies that fall under the category. Below you will find the same list of categories (A through M) with resources that can assist with implementation of strategies that fall under that category.

Strategy categories

- A. Treat Opioid Use Disorder (OUD)
- **B. Support People in Treatment and Recovery**
- C. Connect People Who Need Help with the Help They Need
- D. Address the Needs of Criminal Justice-Involved Persons
- E. Address the Needs of the Perinatal Population, Caregivers, and Families, Including Babies with Neonatal Opioid Withdrawal Syndrome



A reframe...Public Health, Public Health Law, Partnership is...



- How do agencies share data?
- What can agencies do together?
- Working together to Choose and implement actions
- Public health/Public Health law.... is what we, as a society, do collectively to assure the conditions for people to be healthy and safe.



Responding to Human Trafficking in Minnesota

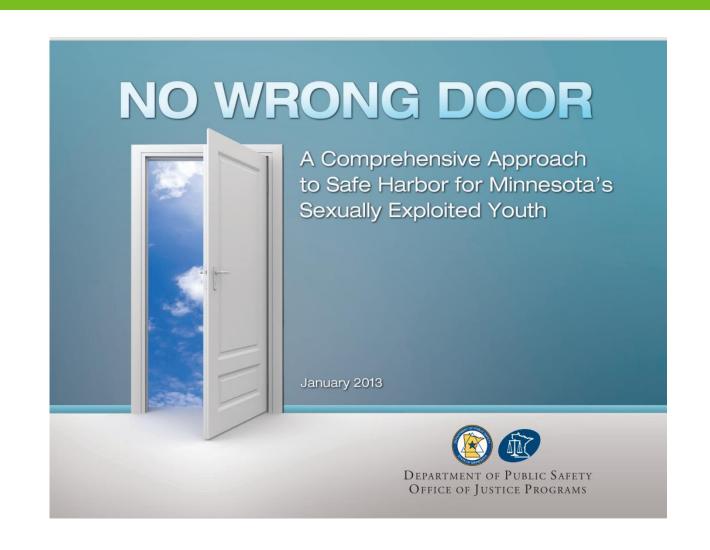
Caroline Palmer, JD, MPH | Safe Harbor Director

caroline.palmer@state.mn.us

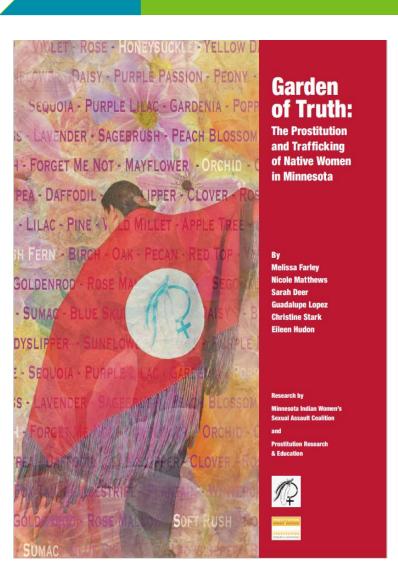
The Safe Harbor Response: History

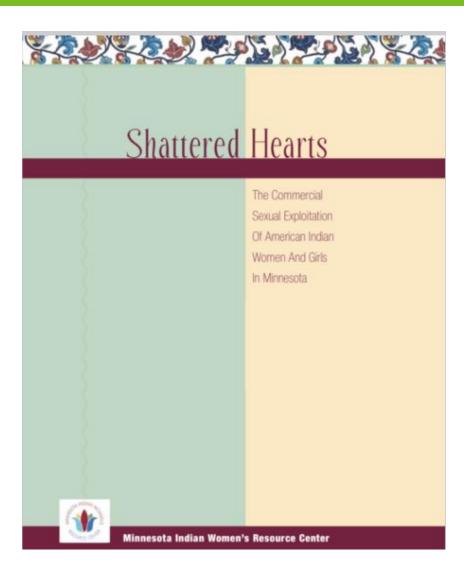
- Safe Harbor law passed 2011
 - Youth under age 18 no longer criminalized for prostitution; services and supports offered instead
 - Focus on sexual exploitation and sex trafficking
- No Wrong Door planning 2011-2014
- Full implementation 2014 including Safe Harbor Director in MDH, state funds
- Public health model working in collaboration with government and community partners with a focus on prevention
- Tribal Summit and early tribal engagement
- Service eligibility through age 24
- Expanding to labor trafficking and exploitation response

NO WRONG DOOR REPORT



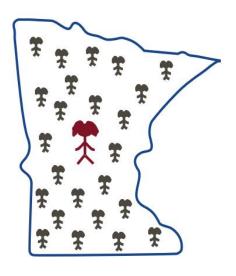
KEY REPORTS





Early Intervention to Avoid Sex Trading and Trafficking of Minnesota's Female Youth: A Benefit-Cost Analysis

Executive Summary





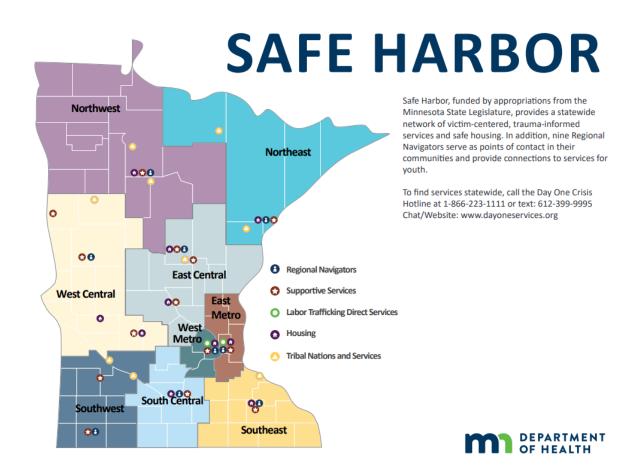


UROC | Urban Research and Outreach-Engagement Center

University of Minnesota

Driven to Discover

The Safe Harbor Response: Grantees (2023)



12 Regional Navigators (includes 2 Tribal Navigators and one NW navigator TBD)

31 Supportive Services grantees

14 Shelter/Housing/Outreach grantees

6 Labor Trafficking direct services grantees (state and federal funds)

3 Urban-based Native American serving organizations (state and federal funds)

9 Tribal Nations (state and federal funds)

Note – some agencies have grants in more than one category

The Safe Harbor Response: Partnerships

- Minnesota Department of Health
 - Safe Harbor Director, Regional Navigator and supportive services grants, biennial evaluation, training and technical assistance; federal grant Office for Victims of Crime
- Minnesota Department of Human Services
 - Office of Economic Opportunity manages shelter, housing, and outreach grants
 - Child welfare and vulnerable adult system responses
- Minnesota Department of Public Safety
 - Bureau of Criminal Apprehension Human Trafficking Investigators Task Force
 - Office of Justice Programs grants for law enforcement support, training, and technical assistance
 - Missing and Murdered Indigenous Relatives Office

The Safe Harbor Response: Partnerships

- Minnesota Department of Labor and Industry
 - Labor trafficking and labor exploitation (wage theft)
- Multidisciplinary Local Protocol Teams
 - Partner TBD



Working with the OMAG

- McKnight Foundation grant to support human trafficking prosecutions
- Seed funding and intern funding for Expungement program (Helpsealmyrecord.org) plus program evaluation
- Membership on the Conviction Review Unit
 - Victims Considerations Subcommittee

Working with the OMAG

Cross training, education, and response

- Working with foreign national victims
- Coordinating with the child welfare response to human trafficking and exploitation (sex and labor), including child labor
- Coordinating with the BCA Human Trafficking Investigators Task Force
- Wage theft
- Legislative change
- No cases yet but getting ready ...



The Safe Harbor Response: Additional Projects

- Legislatively mandated trainings on sex trafficking for lodging
- Online training for health care providers
- Minnesota Youth Trafficking and Exploitation Identification Guide
- Not a Number human trafficking prevention curriculum
- CDC Not a Number evaluation grant
- Biennial Evaluation (new report will be released in fall 2023)
- Strategic Planning (launched in summer 2023)
- Regional trainings on human trafficking and substance use (spring 2024)
- Minnesota Student Survey analysis (sex trading question)

Panel Discussion and Audience Questions







Thank You!

