RUTHERFORD OPIOID BOARD

Rutherford County Opioid Board

• 2025 YEAR-END REPORT •

MIDDLE TENNESSEE STATE UNIVERSITY

Center for Health and Human Services

Office of Prevention Science and Recovery

Data Science

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Introduction

The Rutherford Opioid Board (ROB) was established in 2021 by the Rutherford County Government to serve as the governing body that oversees and directs spending related to the national opioid abatement lawsuit settlements.

The ROB is determined to make funding allocations based on community needs, utilizing local data to inform priorities, and implement best practices in grant administration and program implementation.

Middle Tennessee State University's Office of Prevention Science and Recovery (OPSR) was established in 2022 to assist the Rutherford Opioid Board in this endeavor. OPSR is a partnership between the Center for Health & Human Services and the Data Science Institute. OPSR received a Research Strategy Grant from the ROB in the amount of $100,900 for the 2024-2025 period to administer the grant application process, facilitate funding recommendations from a group of content experts, guide data collection of grantees, conduct evaluation of the funded programs and report on the overall funding strategies.

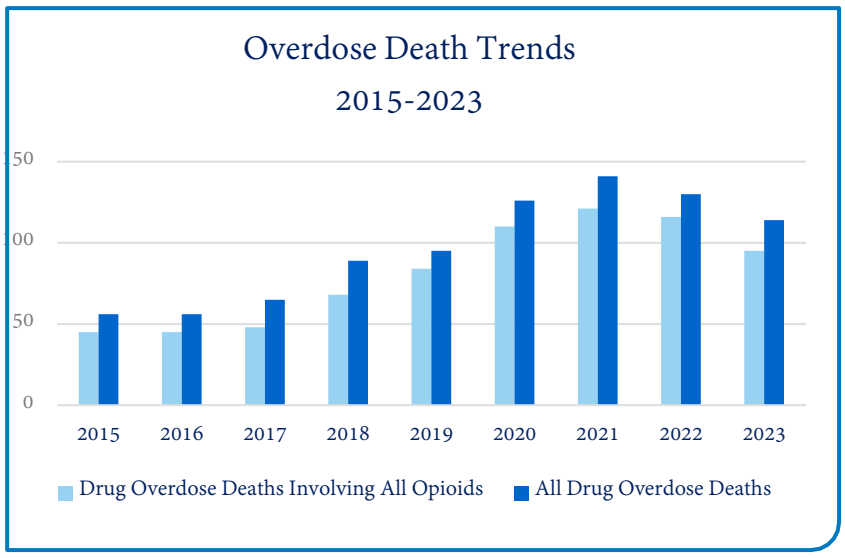
This report is the culmination of the efforts funded in 2024-2025 for opioid abatement activities in the county. All funds must be used to serve residents, citizens and denizens of Rutherford County.

Please direct any questions regarding this report or future funding opportunities to the following contact:
OPSR@mtsu.edu

Overdose Trends

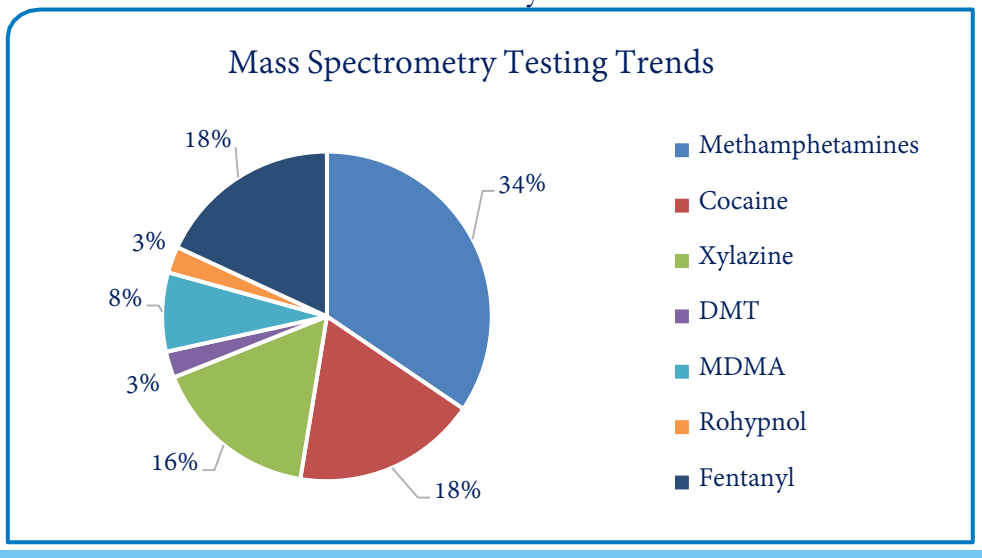
Rutherford County experienced a tragic peak in overdose related deaths in 2021, which coincided with the height of the COVID-19 pandemic. Overdose deaths peaked at 141 lives lost in that year with approximately 121 of those deaths being linked back to opioid misuse. The isolation and financial uncertainty during this time had negative impacts on many individuals' mental health and wellbeing. While these issues are not the cause of the opioid epidemic, they were a factor in how dangerous it became in this community.

Since 2021, there has been concerted efforts to reduce overdose deaths, in particular opioid related overdoses, and these efforts are beginning to demonstrate positive outcomes in overall reductions of both fatal and non-fatal overdose numbers.



Overdose death rates are beginning to decrease down to pre-pandemic levels. Preliminary data for 2024 & 2025 is indicating a continuing trend of decreasing death rates and decreasing overdose rates. There are many factors in this reduction, one of which is the increased availability of naloxone, the overdose reversal medication. Another factor is the cumulative impact of the community funding disbursed by the ROB.

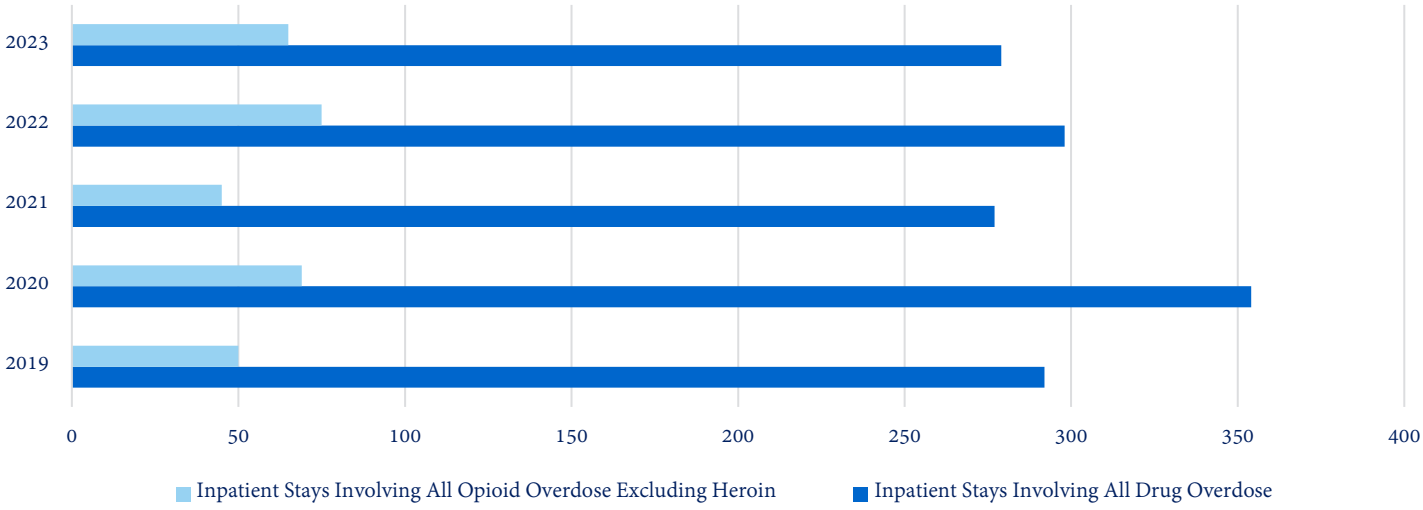
In efforts to monitor continuing substance misuse trends in the county, the ROB funded a mass spectrometry testing unit for the Rutherford County Sheriffs Office. This allows the ROB to make time-sensitive, data-driven funding decisions based on local needs and trends.



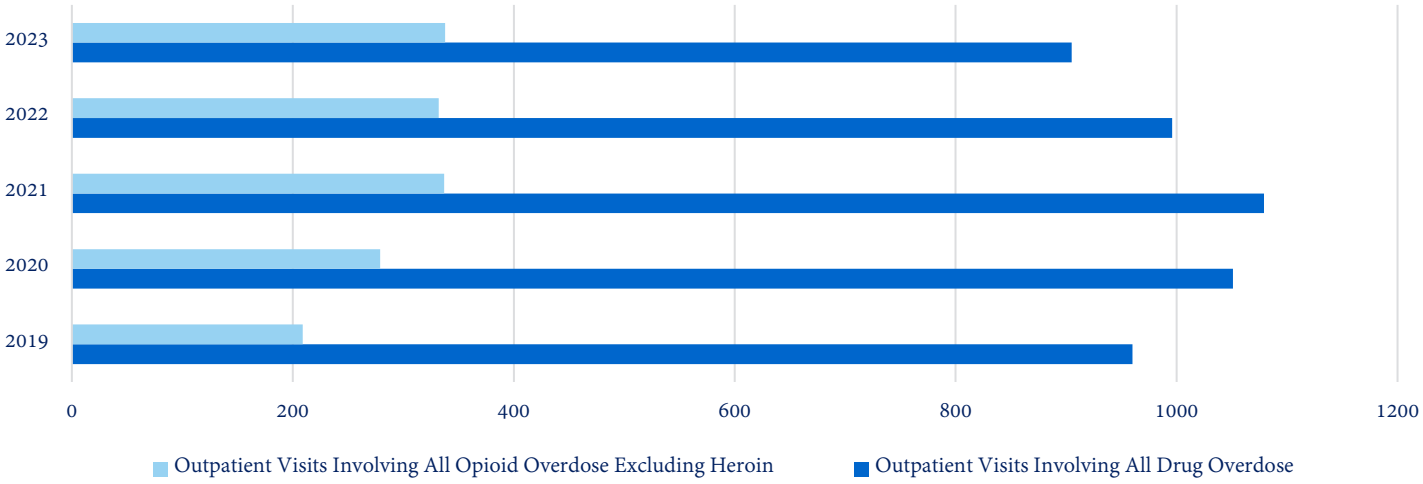
Treatment Trends 2019-2023

As funding availability for addiction treatment has increased, data of utilization of these services in Rutherford County have increased as well. This increase is due to a variety of accessibility factors: TennCare funding for addiction treatment for low-income individuals, increased investments for uninsured and poorly insured individuals seeking treatment and recovery services (State Opioid Abatement funding and Rutherford Opioid Board funding), as well as other nonprofit or discounted for-profit programs that offer sliding fees based on income.

Overdose Trends & Inpatient Stays



Outpatient Stays



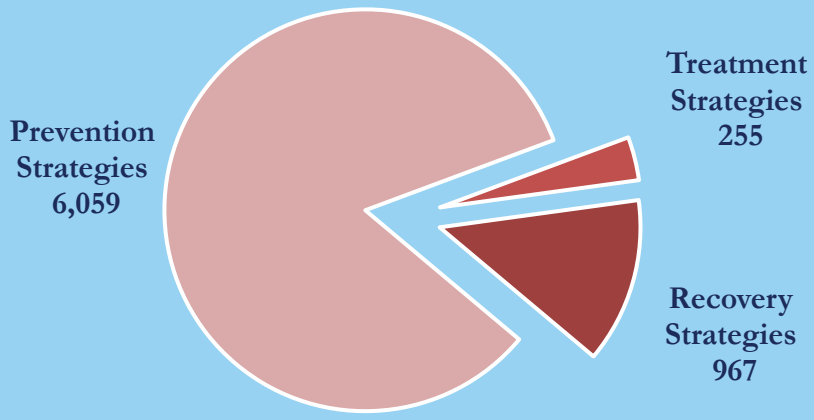
2025 Funding Snapshot

ELEVEN agencies were funded for Prevention, Treatment & Recovery Strategy activities.

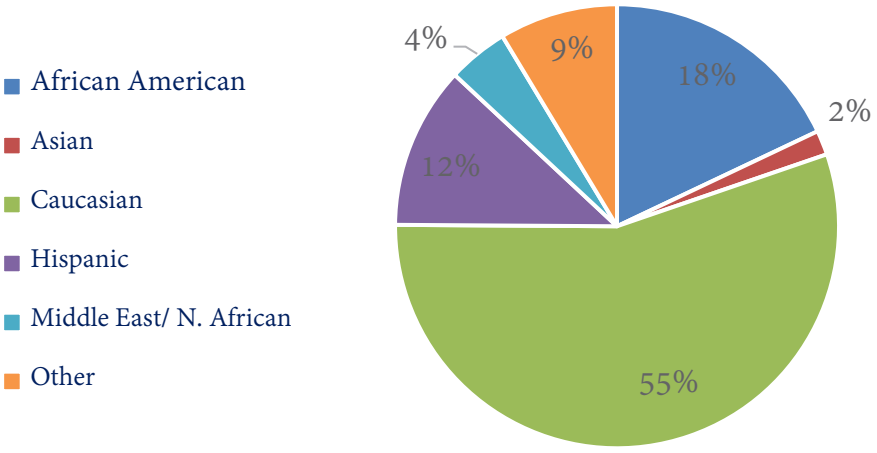
Total Allocations: $1,103,893

Of the **7,281** people served by ROB funds, Prevention activities touched the most lives with **6,059** being served.

Treatment activities served **255** people while Recovery activities served **967** people.

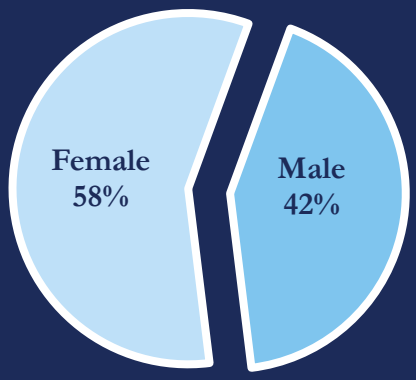


Racial/Ethnic Distribution of Services



7,281 people were directly served by Rutherford Opioid Board funding through the various Prevention, Treatment & Recovery programs.

Gender demographic information was gathered for 3,765 people. **Women** represent 58% of all service recipients across the county.



The Rutherford Opioid Board allocated $1,103,893 in funding to support Prevention, Treatment & Recovery Activities across the county.

• PREVENTION STRATEGIES •

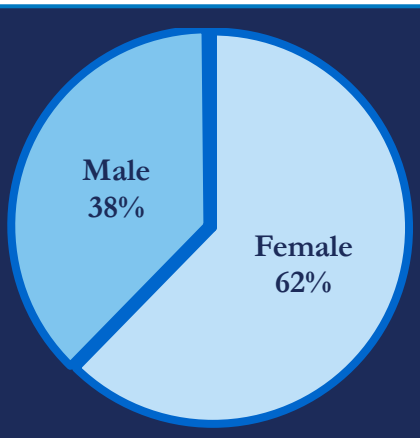
FOUR organizations were funded for Prevention related activities across the county:

Endure Athletics
$106,118

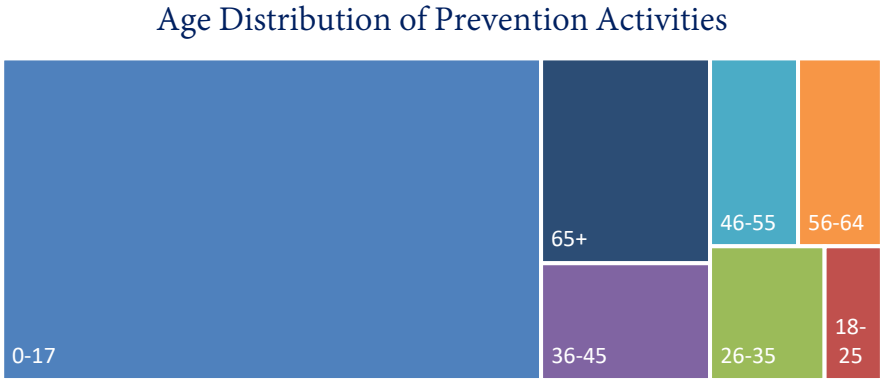
Interfaith Dental Clinic
$78,411

Prevention Coalition for Success
$53,043

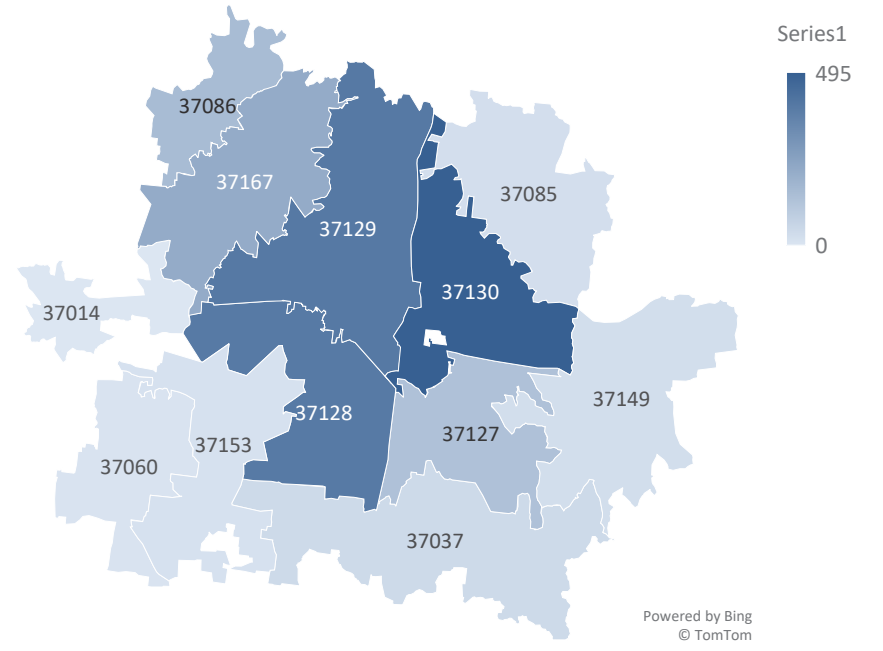
Rutherford County Schools
$16,615



The majority of Prevention activities were received by women. Of the disclosed demographics, 54% of participants identified as white.



Of the 6,059 people served through these 4 Prevention Strategy programs, 3,442 were served through the Rutherford County School System's HOPE curriculum.



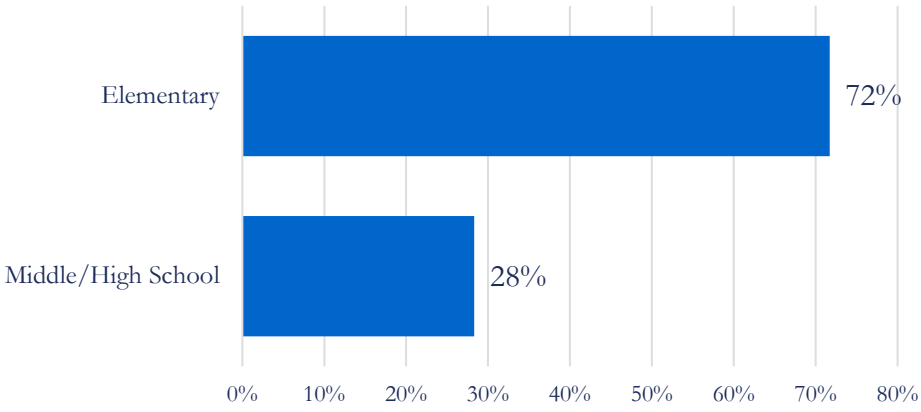
** Rutherford County Schools service data is not included in this service map. The pilot schools were distributed across the county and were not disclosed to ROB for privacy reasons.

The Rutherford Opioid Board allocated $254,187 for all Prevention Strategy programing across the county.

Endure Athletics

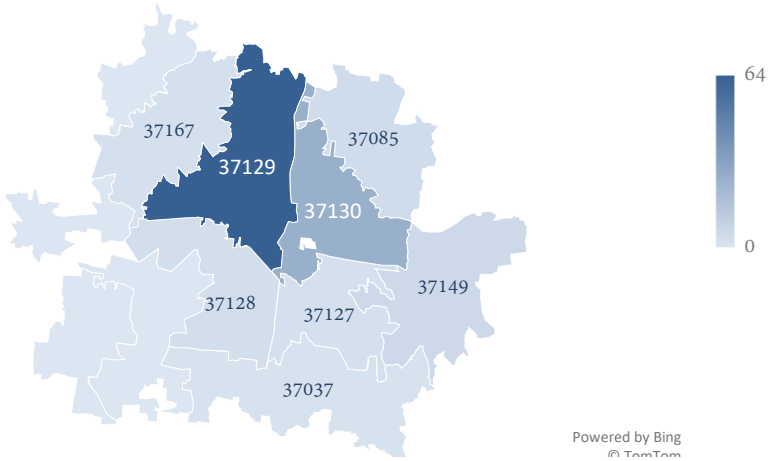
Endure Athletics received a Prevention grant of **$106,118** to provide evidence-based prevention education to at-risk youth in Rutherford County.

The programming was delivered during after-school & summer camp enrichment opportunities and utilizes positive childhood experiences to mitigate increasing risks of adverse childhood experiences impacting future substance misuse.

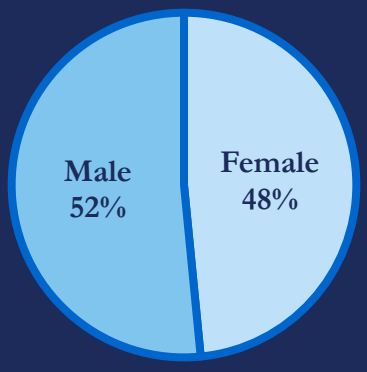


The primary population for Endure Athletics are youth that meet the McKinney-Vento definition of experiencing homelessness. The Rutherford County School System has approximately 1,200 students who meet this definition of experiencing homelessness.

Student Engagement by Zip Code

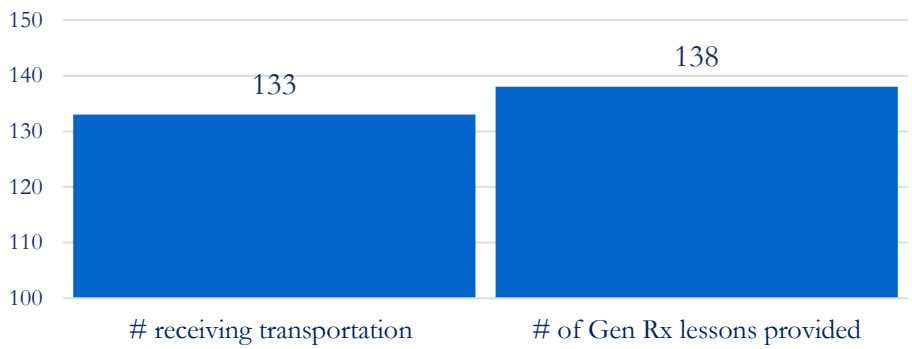


48% of youth served originated from the 37129-zip code, with 15% of youth participants not having a stable zip code for reporting purposes. Endure served 133 unduplicated students experiencing homelessness during the 24-25 academic year.



133 youth received afterschool prevention enrichment during FY25. **47%** of youth were African American and **34%** were white.

Endure Athletics



Endure Athletics implemented the evidence-based program "Generation Rx" into their ongoing after-school and summer programming. Utilizing age-appropriate lessons for elementary, middle & high school students.

TESTIMONIAL

Two boys, ages 8 and 10, have been part of Endure Athletics for three years, where they learn about medication safety through the Generation RX program.

Their mother shared how one son confidently refused to take his brother's antibiotic, showing he understood the dangers of using medicine not prescribed to him.

With a family history of addiction—both their mother and grandmother are now in recovery—these lessons are shaping the boys' healthier perspectives.

The family credits Endure Athletics with helping the boys grow into strong, thriving individuals.

Provided **29,820** hours of positive adult-child mentorship which build resilience and create positive relationships.

Provided **3,035** meals to children so that they don't go hungry afterschool due to food insecurity risks.

Of the elementary school participants with pre- and post-tests: students demonstrated increased knowledge in safe medication practices with an average of 82% correct with the pre-test and 86% correct with the post-test. This documents an average increase of 4% knowledge change in prevention practices with these elementary students.

Of the middle school participants, only 4 documented both testing points making reliable outcomes difficult to determine for the population. However, all 4 students stated that they agree with the following statements:

"*I am confident in my ability to say no when someone asks me to misuse a prescription medication*"

&

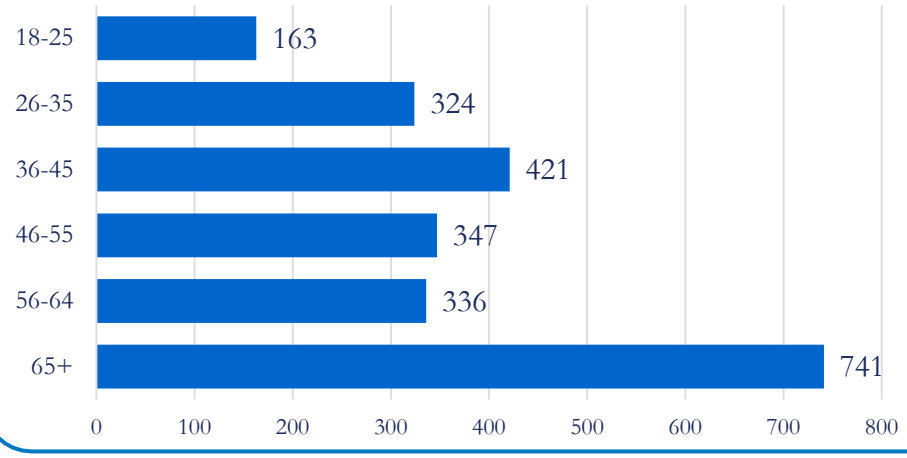
"*I am confident in my ability to select positive alternatives in coping with life challenges, rather than misuse medications.*"

**Data Collection with this population is very difficult due to challenges within the household that result in frequent moves or inconsistent attendance. This means that not all 133 students have both pre- and post-tests.

Interfaith Dental Clinic

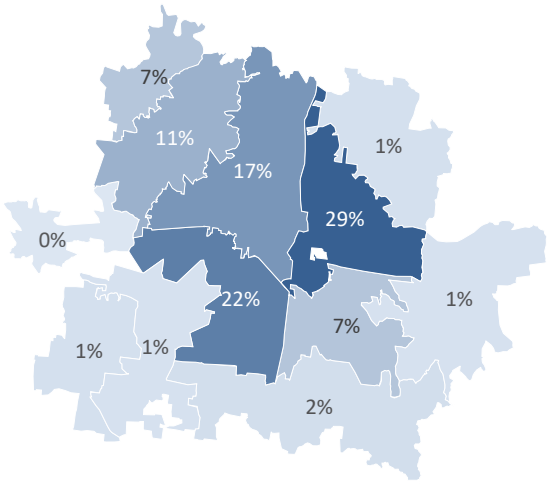
Interfaith Dental Clinic received a Prevention Strategy grant of **$78,411** to **1)** train staff, volunteers & patients on Naloxone use, **2)** train staff & volunteers on benefits of Medically Assisted Treatment (MAT) to reduce stigma, **3)** provide Substance Use Disorder risk screenings to all Rutherford County patients, and **4)** provide comprehensive dental care to support SUD recovery and refer to supportive services.

Patient Age Demographics

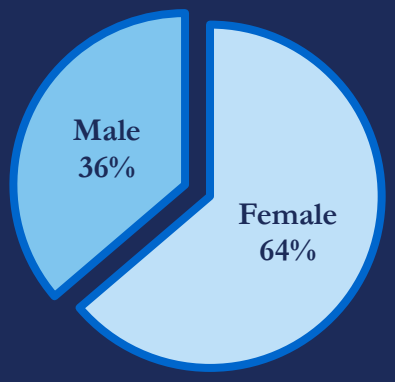


Dental decay can lead to substance misuse due to self-management of dental pain. However, substance misuse also can contribute to advanced dental decay due to oral hygiene neglect. Addressing dental decay is part of the prevention AND recovery continuum of SUD.

Patient Service by Zip Code

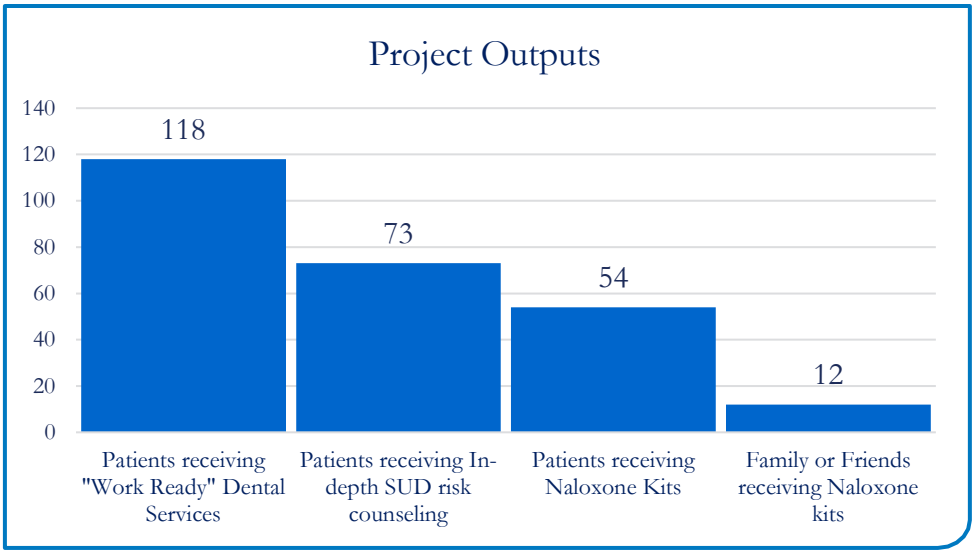


54% of Interfaith Dental patients are white, with 13% being African American and 12% being of Hispanic descent.



2,332 patients received SUD risk screenings as part of Interfaith Dental Clinic's general dental care services.

Interfaith Dental Clinic



Interfaith received 23 patient referrals from Doors of Hope, Nurture the Next & other referral community partners.

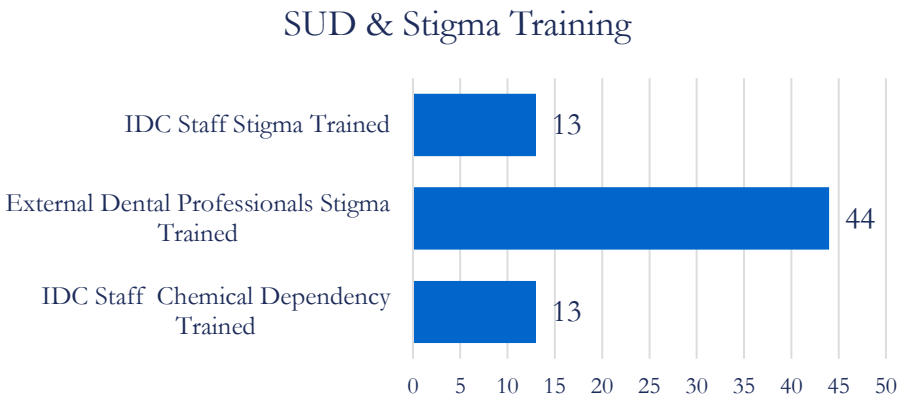
73 patients received in-depth **SUD risk counseling** after risk screening.
66 Naloxone Overdose Reversal Kits were distributed to patients or their family and friends.

A LIFE SAVED

On her first appointment at Interfaith Dental, Stephanie was informed that **Narcan kits** are available, so she took one to take back to her group home. Days later, while making her rounds in the group home, she walked into a resident's room to find a young lady lying face down from an **apparent opioid overdose**. Stephanie ran to the common area, grabbed the Narcan kit from the top of the fridge and **administered the dose** while another resident called 911.

One of the EMT's told Stephanie that **she saved the young lady's life** by administering this treatment.

To address provider stigma in the dental field, all Rutherford County Interfaith Dental Clinic staff were educated on the challenges of SUD, the benefits of MAT, and how to properly administer Naloxone. All staff also completed Chemical Dependency training as part of their ongoing licensure requirements.



In efforts to address stigma and knowledge change across the broader dental field in Rutherford County, 44 external dental professionals also received SUD stigma and Chemical Dependency trainings

Prevention Coalition for Success

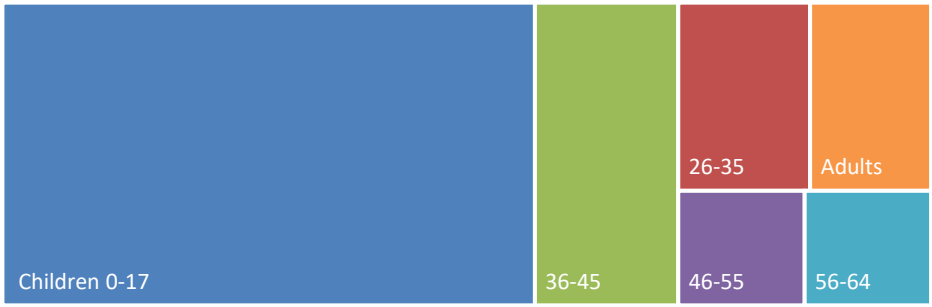
Prevention Coalition for Success received a **Prevention Strategy** grant of **$ 53,043** to:

1) provide wrap-around services for families enrolled in the Family Preservation Initiative,

2) connect families to additional services to reduce risk-factors within the household;

3) promote prevention & recovery resource awareness in Rutherford County.

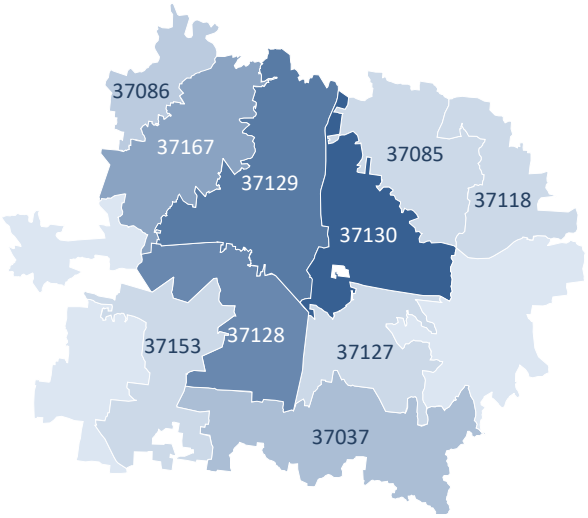
Age Demographics of Families Served



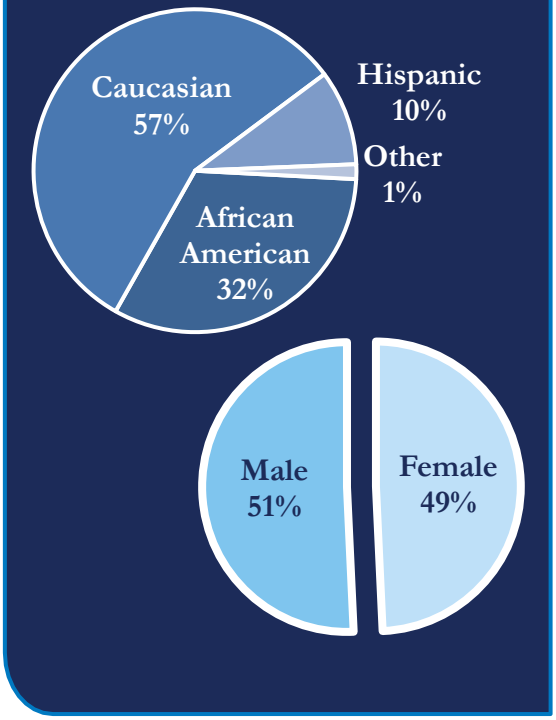
PC4S served 40 households, including 136 children and adults, during the grant period.

Additionally, over 400 individuals participated in the 2024 Rutherford County Recovery Fest. This event connected adults to recovery resources available in the region and provided fun and engaging education for the whole family.

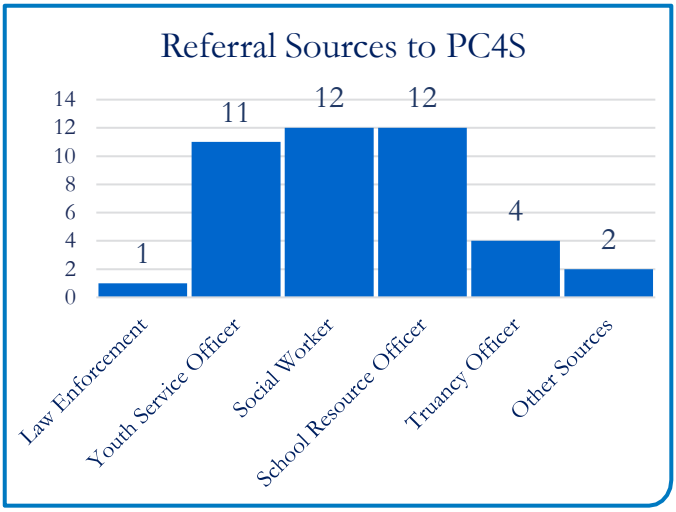
Household Zip Code

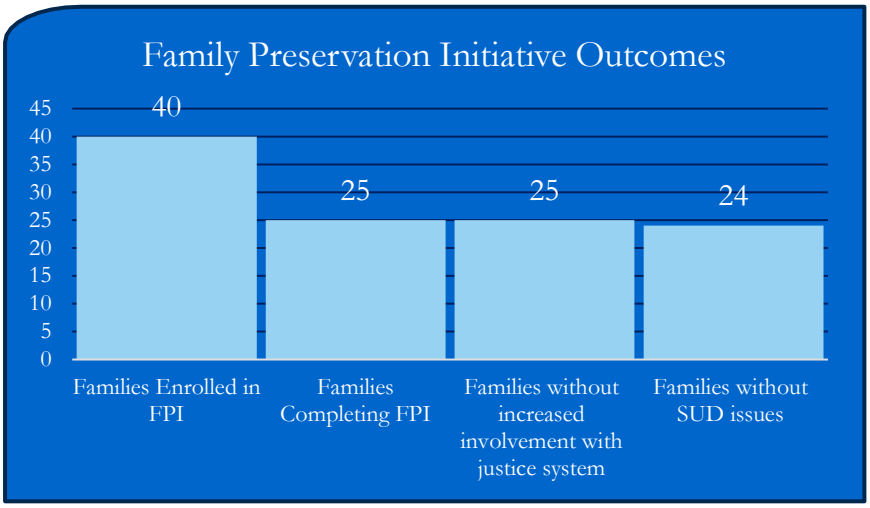


25% of families served originate from the 37130 Zip Code.



Prevention Coalition for Success





Caregiver Strain Index Outcomes

Family Preservation Initiative continued serving 5 families from the prior year who completed their individualized program.

40 families were enrolled in the FPI during 24-25, with 25 families completing their programs. These families participated in intake and exit Caregiver Strain Index assessments to quantify changes in family stability.

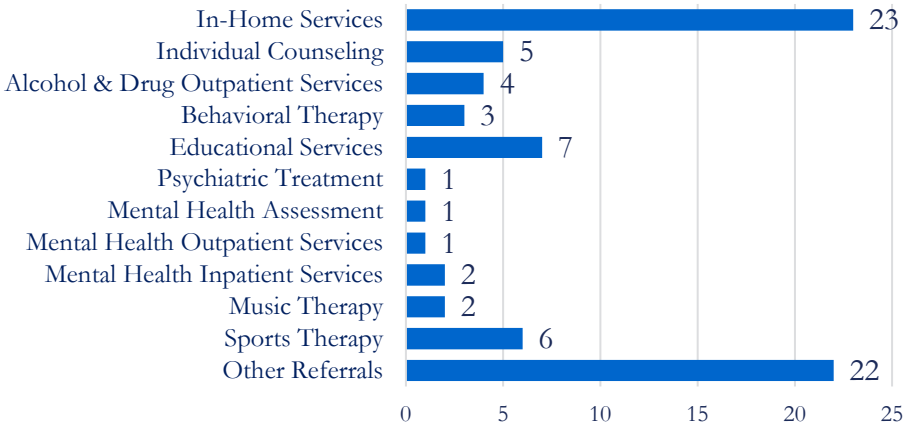
90%

of families experienced a decrease in family disruption.

A BRIGHT FUTURE

"A high-school age young lady was referred to the **Family Preservation Initiative** due to substance use and behavioral issues. She was suspended due to vaping at school.

After engaging in services referred by FPI by her Senior year, she had joined the track and cross-country team. She graduated and is now doing well at Trevecca University."



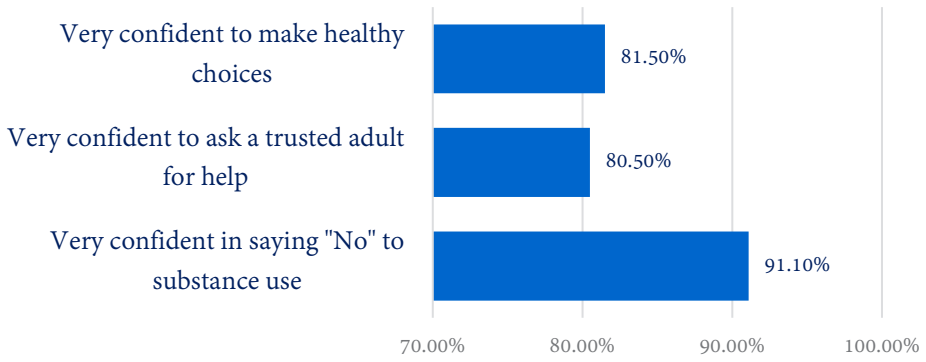
Of the 86 referrals to wrap-around supportive services, 65% resulted in appointments or utilization of the referral.

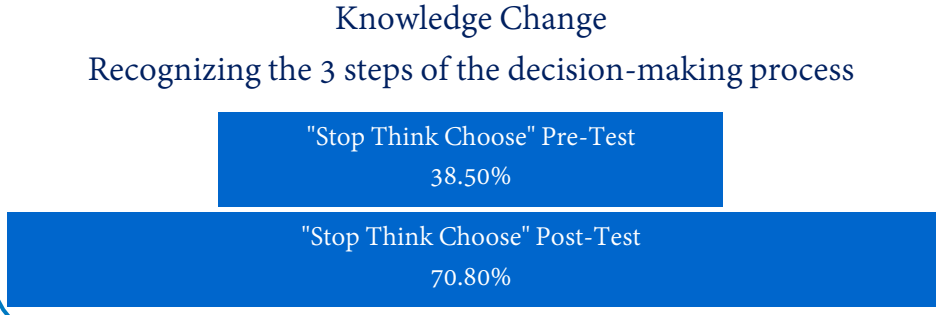
Rutherford County Schools

Rutherford County Schools received a Prevention Strategy grant of **$16,615** to implement **The HOPE Curriculum Project.**

The HOPE project is a pilot program to integrate prevention lessons across **21** schools, **133** teachers, and **3,528** students. Participants included 5th Grade, Middle School, and High School students.

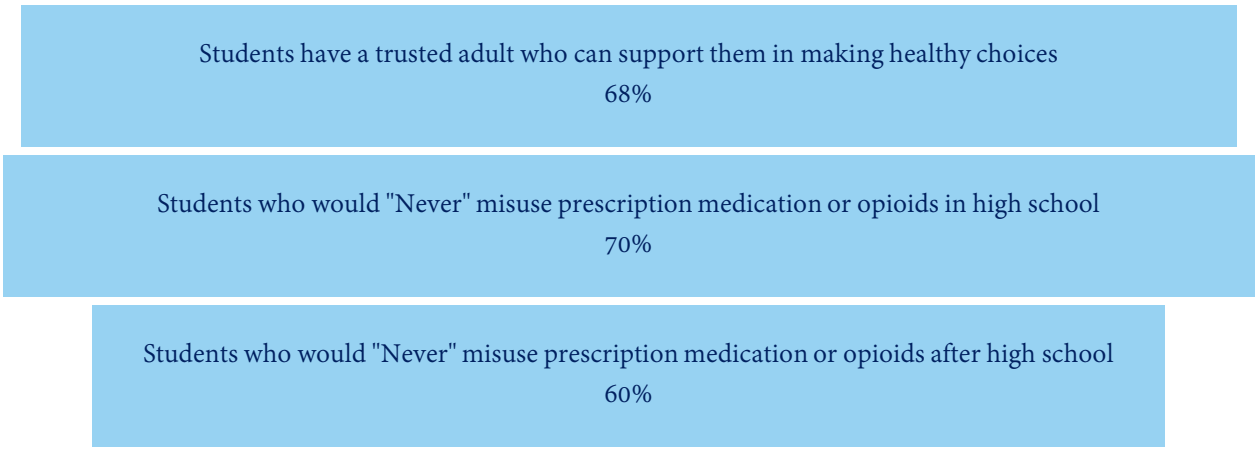
HOPE will now be implemented system-wide in the Rutherford County School district.





Over **85%** of middle school students selected they would "likely" make healthy choices with drugs and medicine in middle school and into the future after high school.

80% Students with a trusted adult who can support them in making healthy choices.

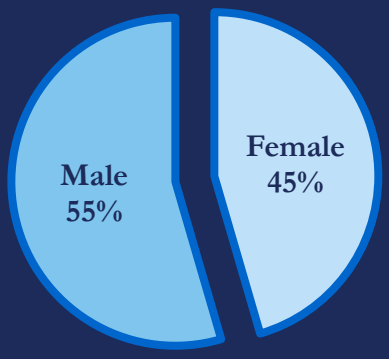


TREATMENT STRATEGIES

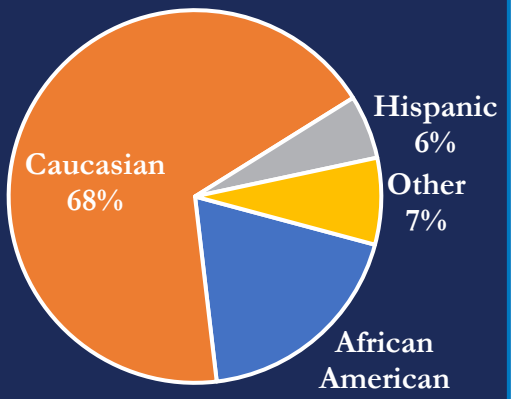
TWO organizations were funded for Treatment related activities across the county:

H.U.S.T.L.E. Recovery
$200,000

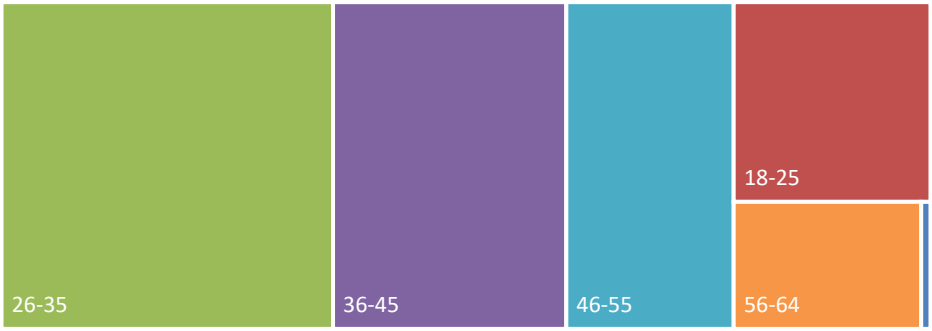
Volunteer Behavioral Health Care
$162,510



Of the **255 individuals** served, **men** represent 139 of the total served.

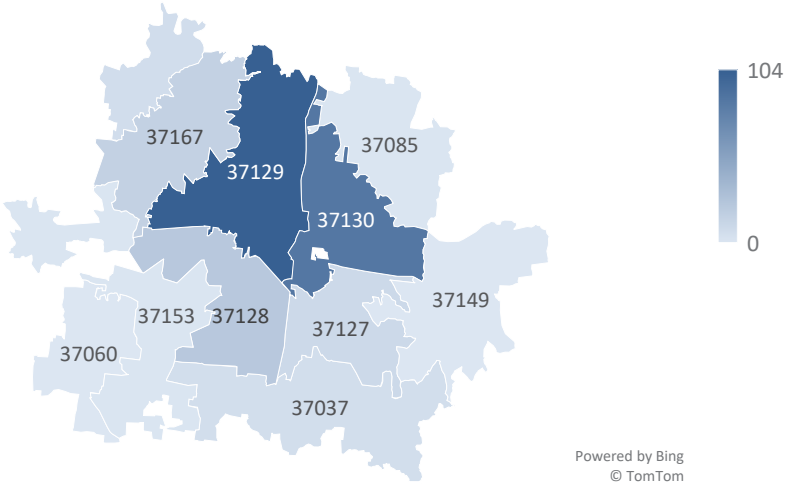


Age Distribution of Treatment Activities



49% of all Treatment Services were provided to the "younger adult" population defined as 35 and younger.
This same age group represents 53.9% of suspected overdoses at emergency departments in 2024.

Treatment Services by Zip Code



Individuals receiving Treatment Services primarily claimed residency from 37129 and 37130 zip code areas. These two zip codes represent 75% of all Treatment Services recipients.

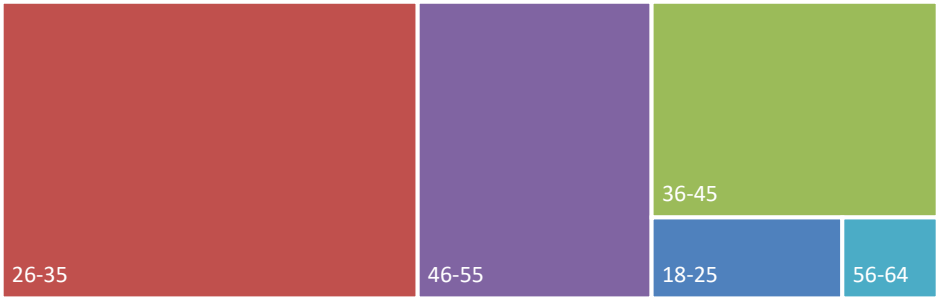
The Rutherford Opioid Board allocated $362,510 for all Treatment Strategy programing across the county.

H.U.S.T.L.E. Recovery

H.U.S.T.L.E. Recovery received a Treatment grant of **$200,000** to provide addiction treatment to uninsured individuals through access to a 30-day treatment bed with wrap-around services and after-care support.

This program served **36 Rutherford County** residents for the grant term.

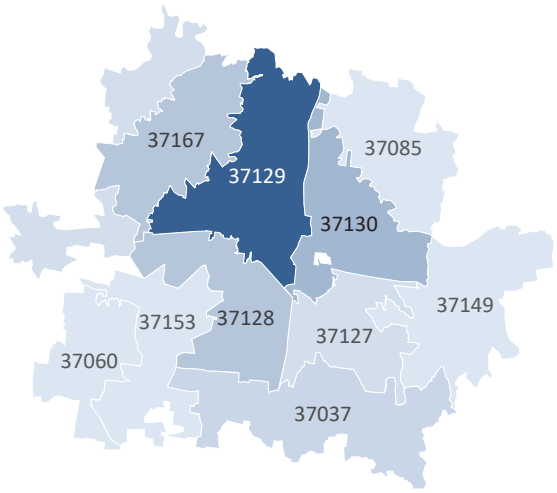
Age Demographics of Clients



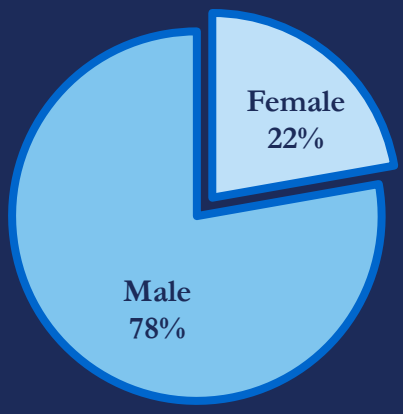
67% of patients are between the ages of 26-55. This age group represents 60% of all non-fatal OD visits to the ER in Rutherford County.

H.U.S.T.L.E Recovery delivered an **83% completion rate** for the 30-day treatment program. **30 of the 36 individuals** finished their program, and **97% of those 30** individuals were still engaged in recovery at their **3-month follow-up**.

Originating Zip Code

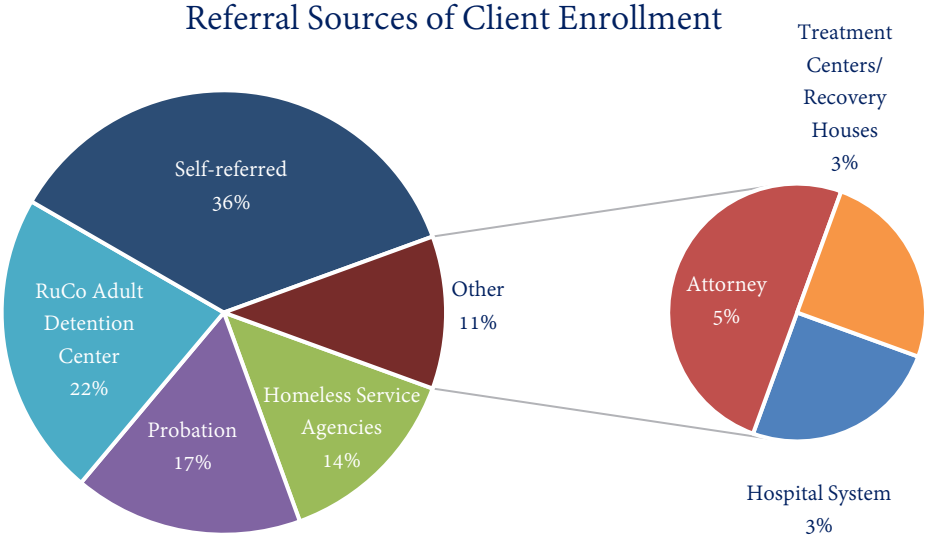


47% of H.U.S.T.L.E. Recovery patients supported through ROB originated from the 37129 zip code. 5 patients enrolled in the program were unhoused.



36 individuals received treatment and recovery services during FY25. **88%** of patients were white and **12%** were African American.

H.U.S.T.L.E. Recovery



44% of all referral patients were referred through justice-related sources (attorneys, Probation Services or the Rutherford County Jail System). **14%** of patients secured placement via referral from agencies serving the chronically unhoused in Rutherford County.

FAMILY HEALING

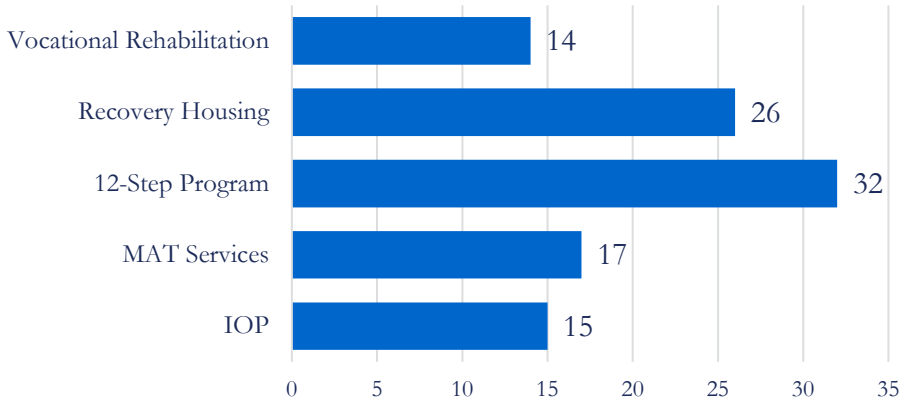
"Hustle didn't just help me recover, they gave me my life back. They gave my children their mother back. And they gave our community one less person lost to addiction and incarceration."

— Paige

97% of patients demonstrated increases in their **BARC-10 Recovery Capital** assessments at 3 months. **80%** continued to demonstrate improvements at 6 months.

Of the 30 individuals engaged with recovery at 3 months, **91%** were still engaged at **6 months**, and **67%** at **9 months**.

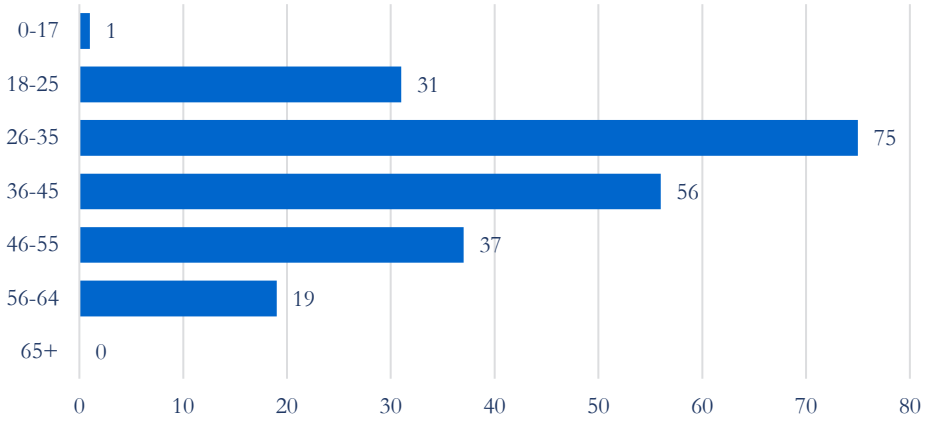
Individuals who did not remain engaged in recovery also did not participate in H.U.S.T.L.E.'s vocational program.



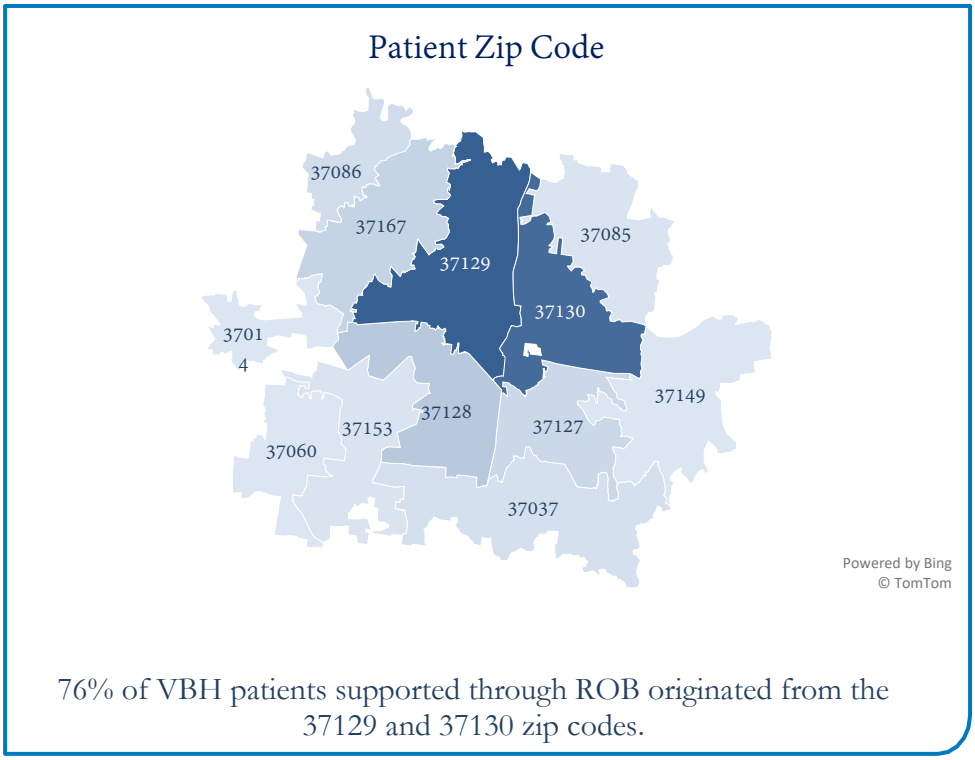
Individuals who participated in H.U.S.T.L.E Recovery's vocational program demonstrated 100% continued engagement in recovery at follow-up intervals.

Volunteer Behavioral Health Care System

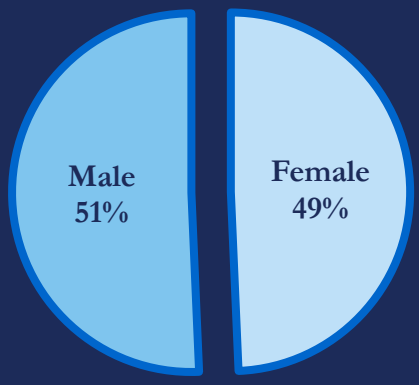
Volunteer Behavioral Health received a Treatment grant of **$162,510** to **1)** increase staffing with a new Behavioral Health Liaison; **2)** conduct education & stigma reduction training within the community; and **3)** provide MAT and supportive services to uninsured and underinsured individuals in Rutherford County.



Services provided to all VBH clients include initial psychiatric assessments, care management, medication management, individual therapy, cognitive behavioral therapy, and crisis stabilization assessments

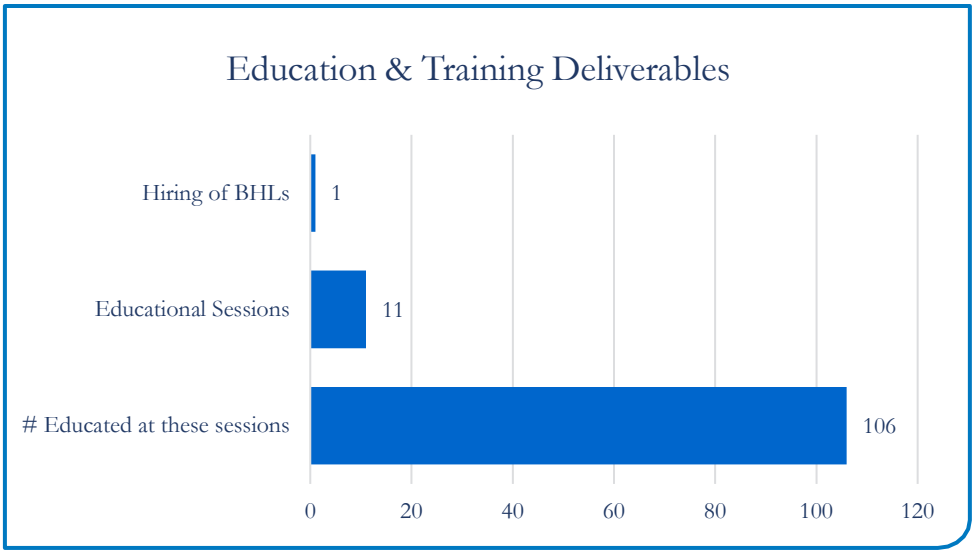


76% of VBH patients supported through ROB originated from the 37129 and 37130 zip codes.



219 individuals received treatment and recovery services during FY25. **64%** of patients were white and **20%** were African American.

Volunteer Behavioral Health Care System



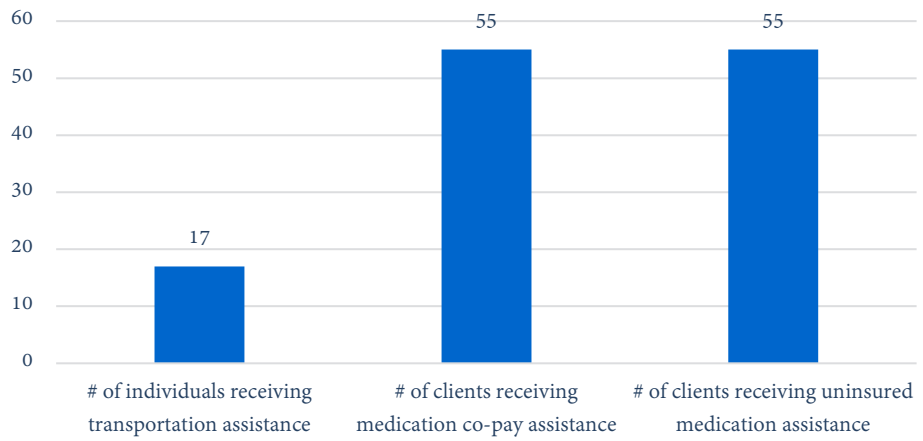
The new Behavioral Health Liaison (BHL) position increased access for 219 new patients. This increased capacity allows for individual case management, MAT, CBT and other supportive treatment services otherwise unavailable to the community.

100% of educational session attendees demonstrated increased knowledge through post-survey

TESTIMONIAL

"A placement that meant everything"

During a crisis assessment, an individual mentioned that they wanted to become well enough to work again, in order to support their children. After completing the intake and assessment, our BHL was able to successfully obtain a bed for this person at another facility that could provide a higher level of care. This courageous moment shows the vulnerability, self-awareness, and motivation it takes individuals to trust our staff in helping them during their first steps of their journey towards healing and recovery.



To reduce barriers to treatment access, VBHC facilitated transportation assistance to help individuals reach treatment appointments, provided financial assistance for insured individuals who could not afford medication co-pays and provided financial assistance for uninsured individuals who could not access treatment otherwise.

• RECOVERY STRATEGIES •

FIVE organizations were funded for **Recovery** related activities across the county:

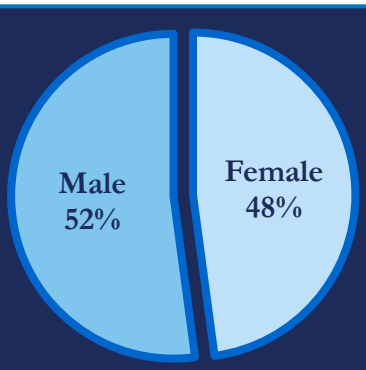
Child Advocacy Center
$76,978

Doors of Hope
$140,000

Greenhouse Ministries
$96,000

Kymari House
$95,268

Rutherford County Probation & Recovery Services
$78,950

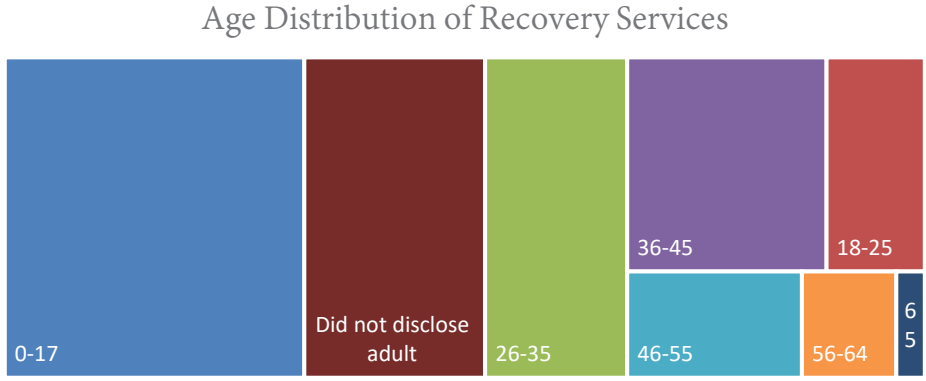


Of the **967 individuals** served, **women** represent 463 of the total people served.

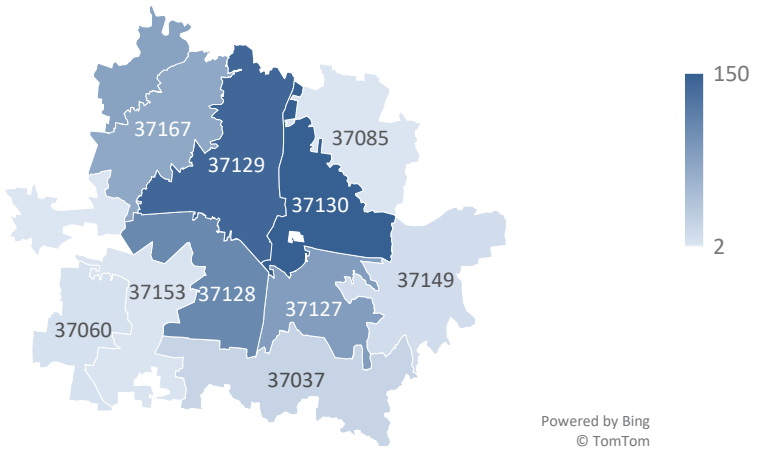
Office of Prevention Science and Recovery

Center for Health and Human Services

Data Science



33% of Recovery Services were provided to minors, with 23% serving adults 35 and under. 20% of participants did not disclose age but were designated as "adults" for data collection purposes. Seniors 65+ represent the smallest population with only 1% engaging in these programs.



Not included in this map are individuals who are unhoused (1 person) and individuals exiting incarceration (43 individuals). 40% of individuals & households claim residence in 37129 & 37130.

The Rutherford Opioid Board allocated $487,196 for all Recovery Strategy programing across the county.

Rutherford County Probation

Rutherford County Probation received a **Recovery Strategy** grant of **$78,950** to enhance their probation services for individuals seeking recovery support.
Funding allowed for staff expansion of a case manager who provided assessments and data tracking for participants enrolling in the program.

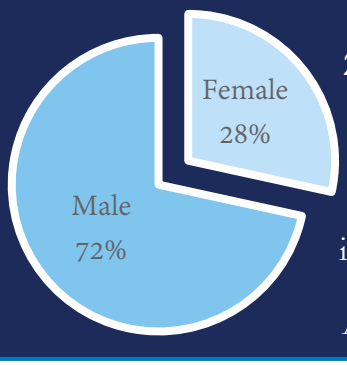
Deliverables

Participants in Relapse Prevention Classes
26

Participants in Mental Wellness Classes
43

Participants completing program without violations
46

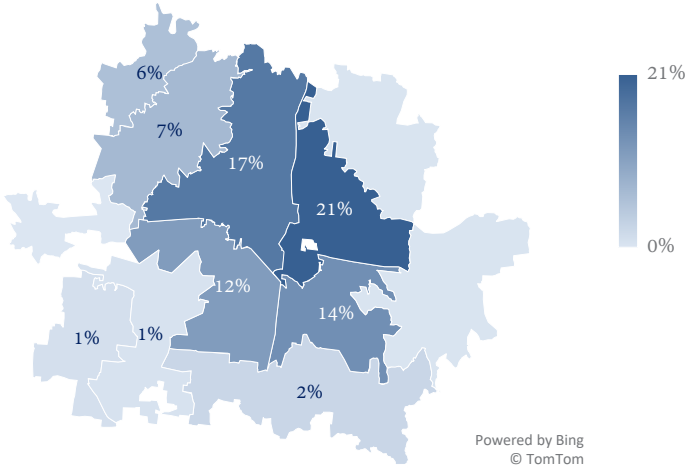
Age Breakdown of Probation Services



Probation Services enrolled **285** individuals in this program.

52% of participants identified as white and **36%** as African American

Zip Code of Participants



19% of zip code data were missing from the data collection, a portion of these individuals are presumably exiting from incarceration.

Program Outputs

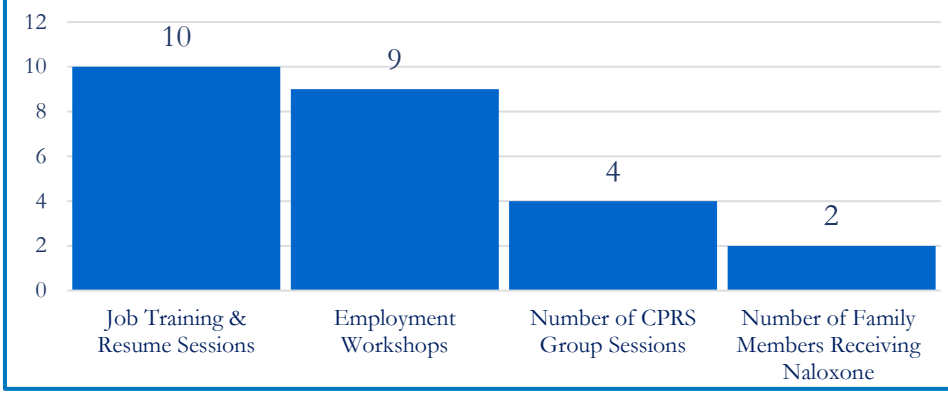
SUD/ OUD Screening
245

Assessments Scheduled
388

Assessments completed
283

Greenhouse Ministries

Deliverables



Drug screening is an important tool in the recovery process at Living University.
Of the completed drug screen tests, participants demonstrated an averaged pass rate of

90%

during the grant period.

Provided **102** classes for Living University participants

A NEW BEGINNING

"Before I joined Living University, my opioid addiction caused me to lose my wife and my kids, my job, I spent time in jail, and I was lost. Living University helped to put me back on my feet and find direction again through all of the struggles I had faced.

Since my time at Greenhouse Ministries, I have found a stable job and, most importantly, I have been able to put my family back together."

Exit Outcomes for Participants

Men exiting without graduating
31%

Men transitioning into more permanent housing
69%

Of the 16 men who exited Living University, 11 men "graduated" the program into more permanent housing. The program only had 5 men exit without completing the program or without permanent housing.

Challenges

Greenhouse Ministries experienced difficulties in performing all their intended deliverables and achieving their stated goals.

1. Intended to achieve a 75% improvement in Depression symptoms as documented by an intake and exit Beck Depression Inventory. This tool was not administered consistently beginning in Q3 resulting in incomplete data.
2. Intended to train 95% of participants and family systems with Naloxone administration. Only trained 2 family members.

These challenges were primarily due to staff changes in Q3. Greenhouse worked hard in Q4 to correct course following Q3.

Child Advocacy Center

DEC home visits educate children about addiction, work to reduce trauma associated with parental drug misuse & break the generational trauma of addiction within the family.

TESTIMONIAL

A client (child) came in for a forensic interview and was referred to DEC services due to drug exposure disclosed in her forensic interview. The client was using vape pens and other substances to cope with the trauma from sexual abuse.

The DEC coordinator helped the client identify healthy support groups, healthy coping mechanisms, and provided the client with resources for a therapist and a psychologist. The DEC coordinator conducted bi-weekly home visits for the family to track the client's progress and report any concerns.

Through the hard work and dedication of the family, significant progress has been made. The child is now enjoying playing the piano and hanging out with friends again. The child is also excelling academically and is using her gained skills of identifying healthy support groups to continue her healing journey.

The client has now successfully maintained sobriety for 6 months and has adopted healthier strategies to utilize in her daily life.

BOLD GOALS

90%

- Parents with an addiction will report that they have decreased or eliminated their use of opioids and other substances.
- Parents & caregivers will report that they have met case management goals.
- Parents & caregivers will report that their children participate in DEC home visits.

Program Outcomes

Adults meeting case management goals
100%

Adults decreasing or eliminating substance use
100%

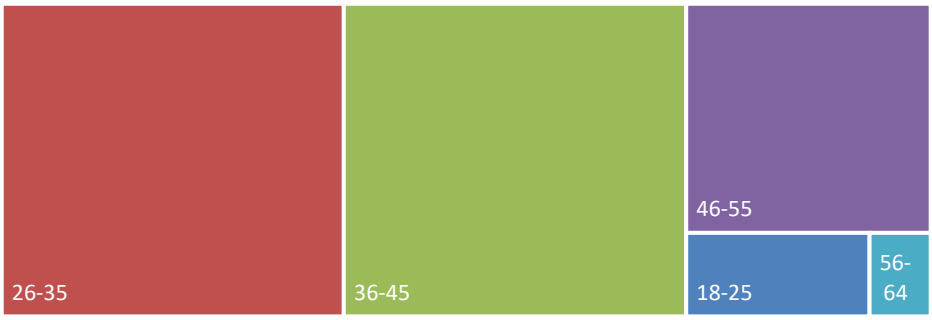
Children participating in DEC home visits.
93%

Doors of Hope

Doors of Hope received a **Recovery Strategy** grant of **$140,000** to improve recovery and re-entry outcomes for women with opioid use disorder, substance use disorder and co-occurring disorders by expanding recovery support and increasing wraparound services.

Doors of Hope will graduate **14 women** this fall who were enrolled in the program.

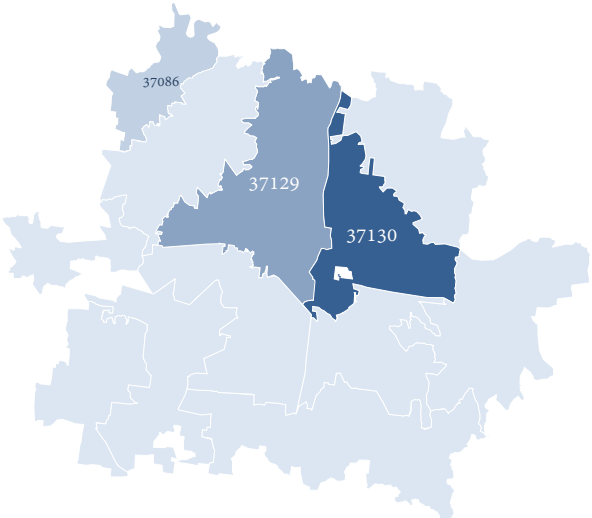
Client Age Demographics



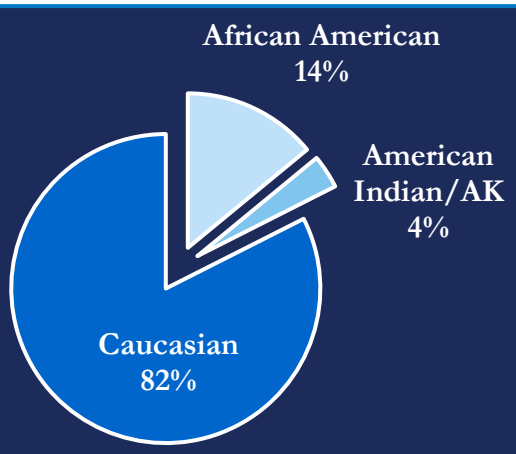
42% of Doors of Hope clients are between the ages of **18 and 35**.
This same age group represents 46% of suspected overdoses treated in emergency room departments.

Individuals exiting incarceration are at least **40 to 129 times as likely to die** from a drug overdose compared to the public, within 2 weeks from exit.

Client Enrollment by Zip Code

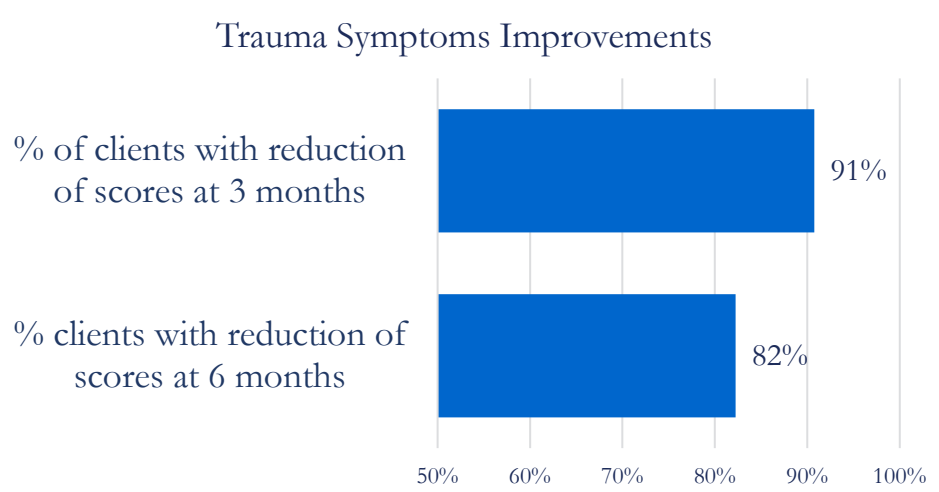


82% of all Doors of Hope clients originated from incarceration within the Rutherford County jail system.



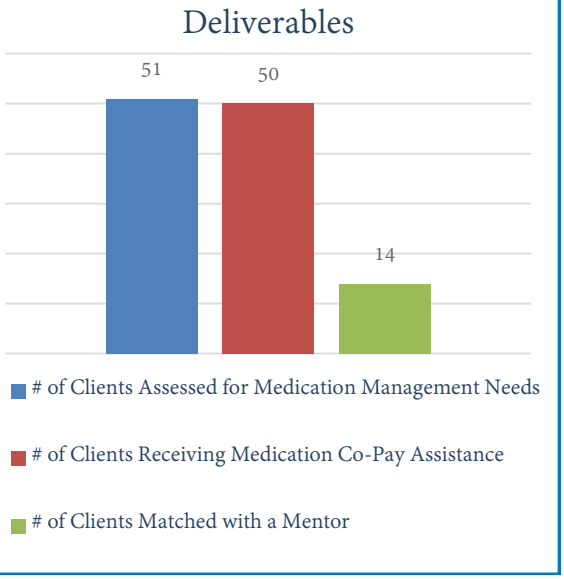
57 women were served at **Doors of Hope** with **Rutherford Opioid Board** funding.

Doors of Hope



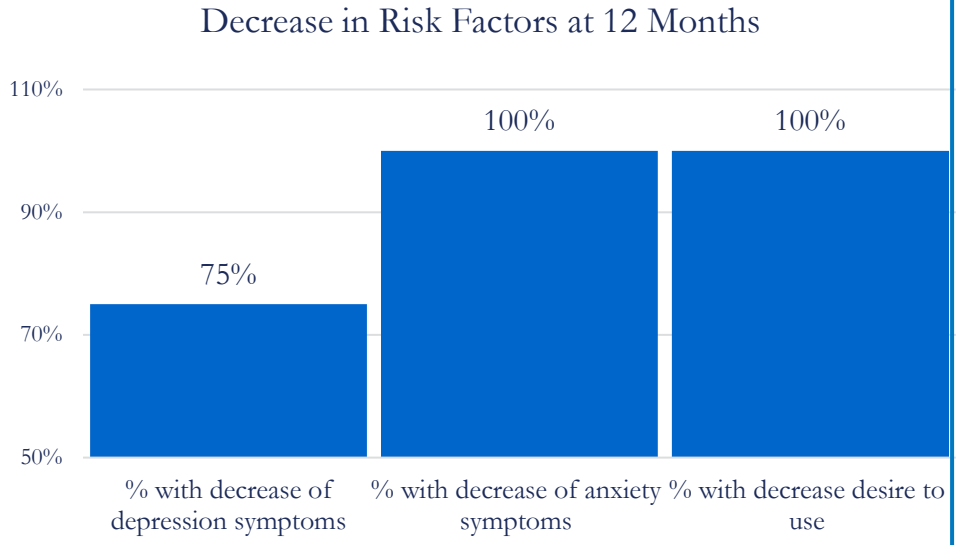
Stable employment is vital to **long-term recovery** for women impacted by SUD/OUD. It is also an important factor in **reducing recidivism** risk for individuals re-entering the community from incarceration.

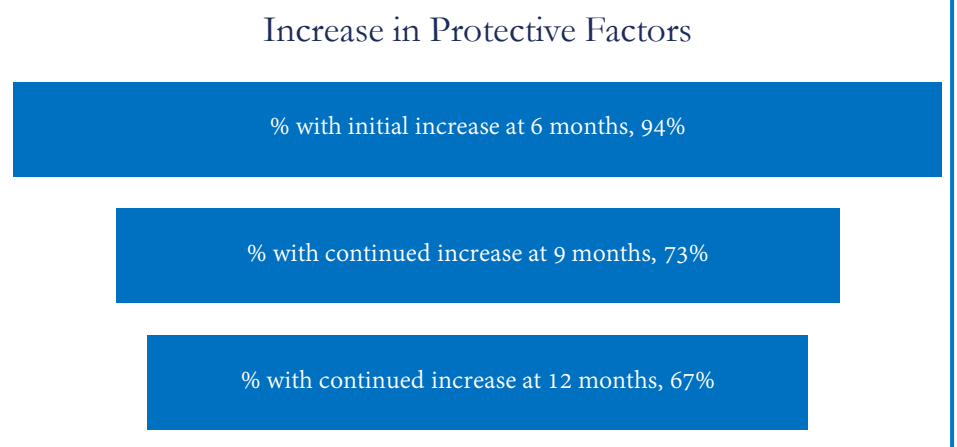
84% of participants achieve employment **within 90 days** of enrolling in the program.



A NEW BEGINNING

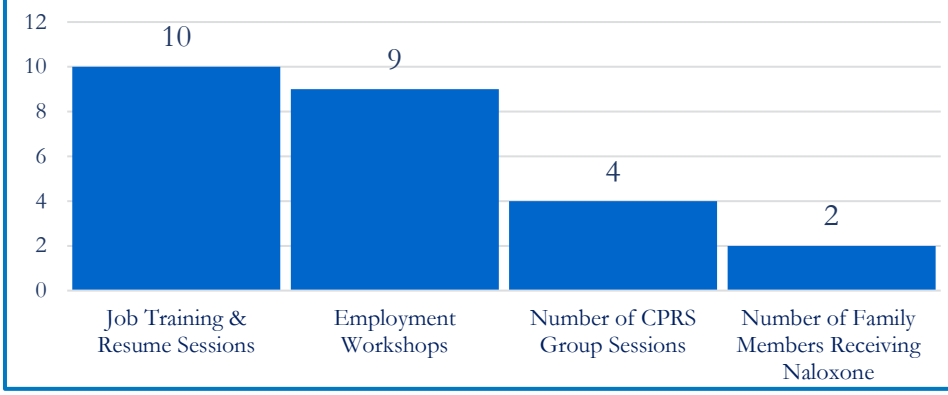
Our graduates have reunified with their children, earned promotions to management, returned to DOH as mentors, and have renewed hope for the future.





Greenhouse Ministries

Deliverables



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Greenhouse Ministries

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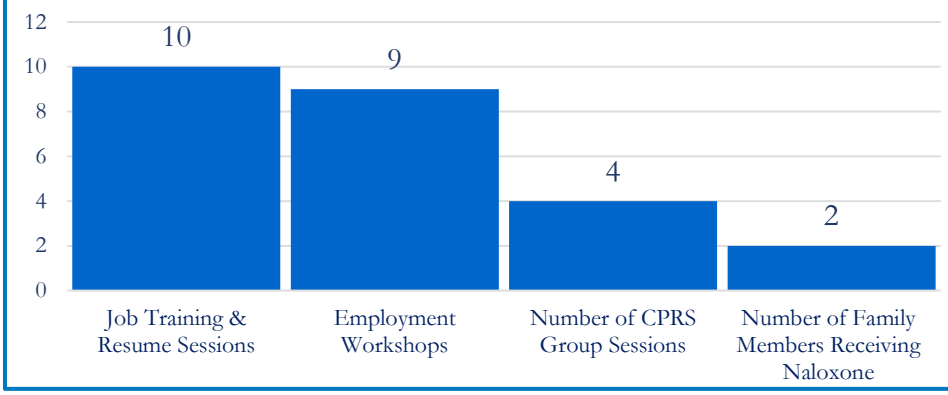

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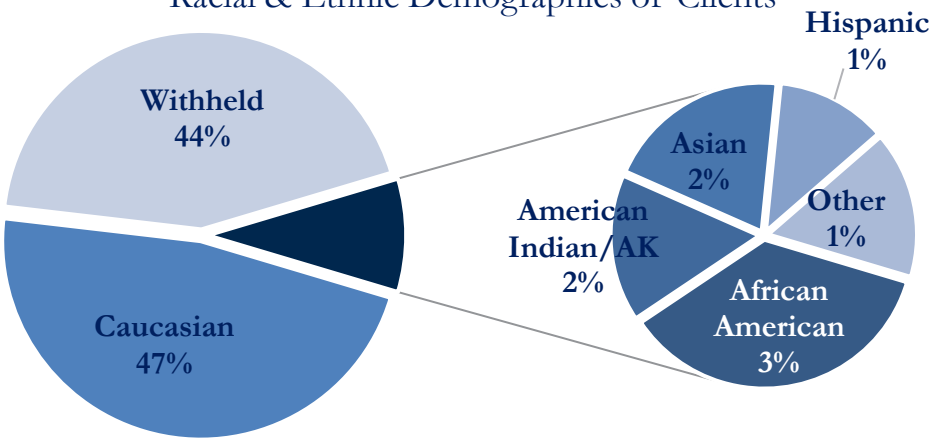
Kymari House

Kymari House received a **Recovery Support** grant of **$95,268** to fund their **Family Forward** pilot program. Family Forward will:

1) Provide comprehensive support to families involved in the formal child welfare system with SUD/OUD involvement.

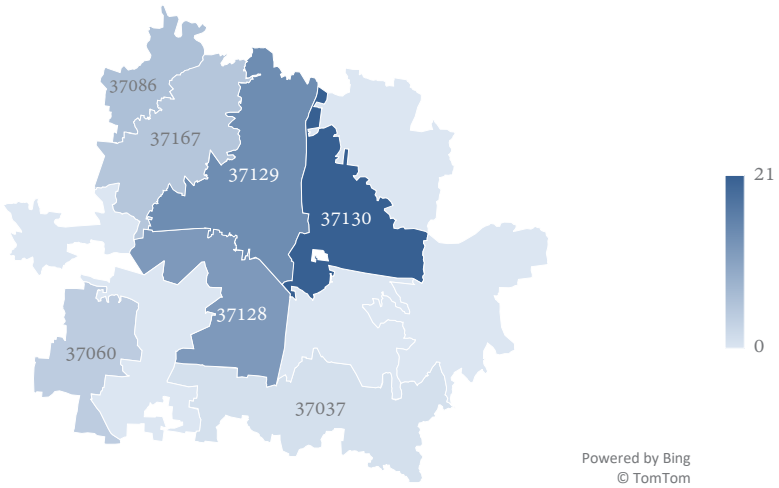
2) Provide wrap-around supports, resource linkage, peer support, parental education, OUD intervention/referrals and mental health support.

Racial & Ethnic Demographics of Clients

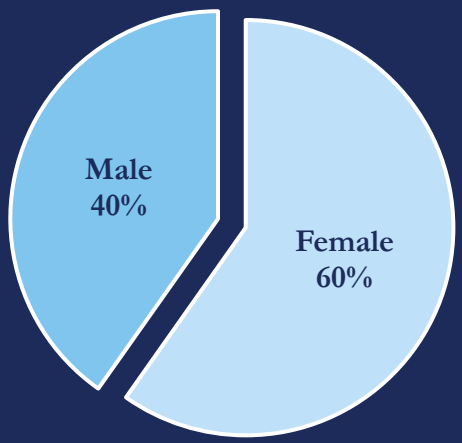


Children under 18 comprise **45%** of the **271** individuals served by Family Forward. The adults served in this program were parents, grandparents (custodial), and guardians of children with non-custodial parents. All 64 household were impacted by SUD/OUD in some form.

Services by Zip Code

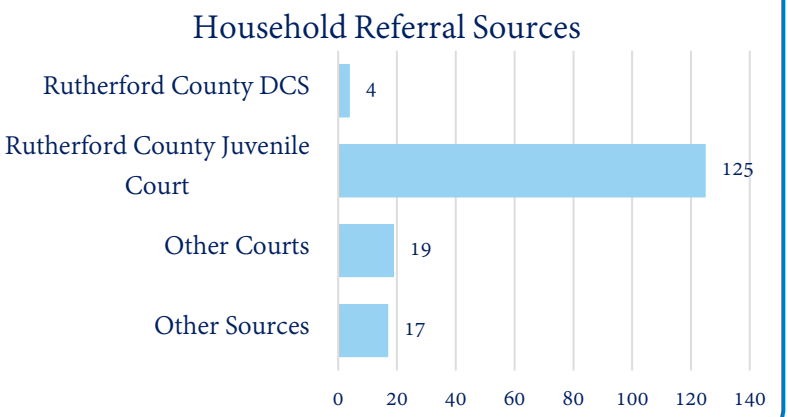


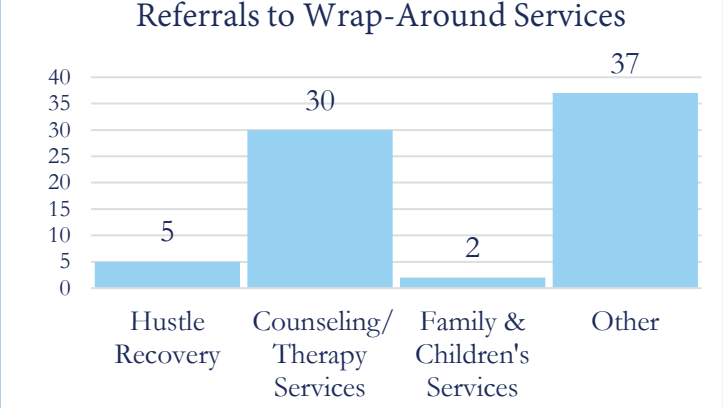
Kymari House served **64 households** during the 24-25 grant term. **73%** of the households came from the **3 most populated zip codes** in the county. One household identified as experiencing homelessness at one point during the grant term.



Of the 271 people served, 162 identified as female and 109 as male.

Kymari House





Kymari House received 129 referrals from Rutherford County DCS and Rutherford County Juvenile Court. 36 referrals came from other courts and sources.

Kymari House made 74 service referrals for families in need of further support and assistance. 77% of these referrals resulted in initial appointments being made with 19% of successful referrals being made for SUD/OUD treatment services.

TESTIMONIAL

A father of four young girls, ages 2 to 10, came to Kymari House following a difficult divorce and a history of opioid use disorder. He had worked hard to turn his life around — completing rehab and fulfilling every court requirement. When his daughters arrived for their first supervised visit, the room filled with joy as all four voices shouted "Daddy!" in unison, tumbling into a pile of hugs.

By the time their case closed, they weren't just visiting — they were reconnecting, laughing, and building trust for the future.