

## **Treatment and Harm Reduction (THR) Committee**

### **Meeting Minutes – March 10, 2026**

#### **Attendance**

Tremaine Sawyer (JSD), Lacie Scofield (DCoDPH), Dr. Jennifer Carroll (NC State University), Lucius Wilson (Southlight Healthcare), Trina Williams (RI), Viiu Loub (RI), Kristen Patterson (DCoPH), Donna Rosser (DCoPH), Tamika Harper-Purcell (Freedom House), Dr. LA Cutler (Hope Centre for Advancement), Carlyle Johnson (Alliance Health), Vera Reinstein (Alliance Health), Helen Tripp (Durham County EMS), Carolyn Crowder (Lincoln Community Health Center), Dr. Jamie Carter (Lincoln Community Health Center), Rashanna Humphrey (JSD), Dr. Jackie Hodges (Duke Health), Amy O'Regan (NCDHHS Naloxone), Jaeson Smith (Durham County), Renee Shaw (JSD), Lisa Finlay (TROSA), Morgan Culver (DCoPH)

#### **Presentation - Work in Residential Addiction Treatment**

**Presenter: Dr. Jennifer Carroll – Associate Professor of Anthropology, North Carolina State University**

Dr. Carroll presented research highlighting the prevalence and implications of mandatory unpaid labor in residential substance use treatment settings across North Carolina.

Background:

- “Work therapy” is an approach to addiction treatment that frames labor as inherently therapeutic.
- Work therapy often justified through theological claims.
- Studies exist on employment and recovery, but findings are largely correlational.
- No existing study provides evidence that labor of any kind improves treatment outcomes.

Key Study Findings - Carroll et al. 2026:

- **42% of residential treatment providers** in NC require unpaid labor resembling low-wage employment
- Participants average 32.8 hours/week of work across ~4.8 days

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- Common labor includes:
  - Thrift store retail (23%)
  - Lawn care (14%)
  - Manual labor (moving, janitorial, auto repair) (14%)
  - Community employment (9%)

## Concerns Identified:

- **Labor exploitation risks** and ethical concerns
- **Limited access to evidence-based treatment**, including medications for opioid use disorder (MOUD)
- Disproportionate impact on:
  - Uninsured individuals
  - Individuals with disabilities
- **Increased overdose risk** when MOUD is restricted

## Clinical & Research Implications:

- No strong evidence that work itself improves treatment outcomes
- Research lacks comparison groups and structural analysis
- Per **ASAM standards**, vocational activities are **supportive services—not treatment interventions**

## Local Context – Durham:

- TROSA continues to require structured work assignments. Lisa Finlay noted that work is beneficial to TROSA participants in other ways, including developing social skills and employment skills.
- Durham Recovery Center is a residential treatment provider in Durham noted in the study. Committee members in attendance were unfamiliar with this provider. Status and service details remain unclear.
- There is limited transparency across providers regarding program structure and access.

## Key Discussion Points:

- Gap in research on **structured vs. unstructured time** and relapse outcomes – only limited to anecdotal evidence
- No strong comparative studies available on residential programs without work mandates

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- Heavy reliance on **medication-based evidence**, with less data on polysubstance treatment approaches
- Ethical concerns regarding:
  - Framing addiction as a moral failure corrected through labor
  - Stigma reinforcement
- Need for **greater oversight and transparency** among residential providers

## Presentation - Southlight Healthcare Programs

**Presenter: Lucius Wilson - Durham BHO & IOP Team Lead, SouthLight Healthcare**

SouthLight Durham Services:

- Peer Support Community Support Services (CST)
- Office-Based Opioid Treatment (OBOT)
- Psychiatric Medication Management
- Outpatient Individual and Group
- Counseling
- Substance Use Intensive Outpatient Program (SAIOP)
- Veteran-Tailored Services

Substance Use Intensive Outpatient Program (SAIOP):

- Care for substance use disorders, mental health challenges - ages 18+
- Includes individual therapy and family therapy
- Schedule:
  - In-person: M/W/F (9am–3pm)
  - Virtual makeup: T/Th (1pm–4pm)
- Modalities include ACT and motivational interviewing

Housing and Outpatient Treatment (HOT) Program:

- **90-day rental assistance** for SAIOP participants
- Covers deposit + weekly rent at **Oxford House** locations
- Expanded to Durham (Nov 2024)
- Eligibility includes:
  - Recent substances use (within 6 weeks), OR
  - Recent release from incarceration
- Post-Hot program transition:

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- Step-down to outpatient care with same provider
- Addition of peer support (3–5 hours/week)

For referrals:

- Call SouthLight Durham Office at (984) 263-8887
- Fax your referral to (919) 510-6172
- Complete online referral form - <https://southlight.org/make-a-referral>

## Committee Member Updates

Morgan Culver - DCoDPH Harm Reduction Program:

- New 24/7 naloxone vending machine
- Location: St. Joseph's Episcopal Church (Main St., behind Whole Foods)
- Free, anonymous, unlimited kits
- Bulk supply available via Durham County Public Health
- Free naloxone and harm reduction training available - duration is 30 minutes to 2 hours, depending on scope.
- To request a training, complete the form here: [Harm Reduction Training Request Form - Durham County Public Health](#)

Helen Tripp - EMS Buprenorphine Bridge Program:

- Community paramedics provide **field-based buprenorphine**
- Addresses **gaps in MOUD continuity**
- Mobile, meets individuals where they are
- Supports transition back to ongoing care

Jubilee Home

- Jubilee Home's "Better Together" event at the Carolina Theatre
- 7:00 PM on March 10, 2026
- Storytelling and connection
- Tickets available for \$14 at the Carolina Theatre box office

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**Action Items**

- **Lucius Wilson**
  - Find out and share HOT program funding source
  - Provide PowerPoint slides and program flyer
- **Lacie Scofield**
  - Distribute Dr. Carroll's research article and meeting materials
- **All Participants**
  - Review "If You're Willing to Work, We Can Work With You" study
  - Explore collaboration opportunities with Dr. Carroll

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**The next THR Committee meeting is scheduled for April 14th, 2026 at 3:00-4:30 PM.**