CTN Community Representative Council

Meeting Summary



April 2025

The National Drug Abuse Treatment Clinical Trials Network Community Representative Council (CTN CIRCL) is a collaborative of the national CTN that comes together bi-monthly to courageously share what's happening in their communities. This brief is an overview of topics discussed at this meeting and is not an exhaustive review. The thoughts and experiences herein are those of CIRCL members and do not represent the National Institute on Drug Abuse or the Clinical Trials Network. The voices empowered by CIRCL are intended to drive research and clinical efforts in the CTN and across the US.

The following themes and discussions were highlighted during this meeting:

Trends in substance use/public health:

- Increased stimulant use across all Nodes.
- Increased use of spice/k2: Big South/West (Texas), Greater Intermountain.
- Continued use of fentanyl (New England reporting a change in route, from injecting to smoking), increase in heroin throughout US.
- Increases in infectious disease (HIV and syphilis reported).

Methadone needs to be more accessible

- Expanded hours using settlement dollars.
- More patients reporting preference over buprenorphine.
- Office-based methadone is needed.
- Deploying mobile units to increase access, particularly in rural communities where transportation is a barrier.

Job security and supporting the workforce caring for people who use drugs (PWUD)

- Concerns about funding to continue evidencebased services, especially in marginalized communities where programs are closing.
- Philanthropic funding is being sought more.
- PWUD reporting sub-optimal care because clinicians seem overburdened - people feel short-changed, getting meds but not other comprehensive services at the clinics.
- Moral injury in this climate is rampant.

Not all communities are seeing reductions in OD

- Construction workers and blue-collar trades seeing increase in OD and suicide.
- Communities of color are seeing increases.
- Further increases are expected with the reduction in funding for services.
- How much of the reduction is because the most vulnerable died already?
- Unhoused populations are suffering more than ever
- Rural communities need access to more naloxone.

Law enforcement strategies are needed

- ICE is leading to lower numbers in clinic, followup, research participation - "people are disappearing".
- No training on how to handle political division (especially for peers).
- If law enforcement is going to be involved, perhaps we should develop or implement an intervention to engage and reduce overdoses (like the LEAD model).