
PROFILE: DENVER PUBLIC LIBRARY

Public Libraries Respond to the Opioid Crisis with Their Communities

A collaboration between OCLC and the Public Library Association, funded by the Institute of Museum and Library Services



Profile: Denver Public Library

Through a grant from the Institute of Museum and Library Services, OCLC and the Public Library Association are conducting research into how public libraries are supporting their communities through the opioid crisis, and the organizations that libraries are partnering with to meet local needs. This profile was created through interviews with seven individuals: three staff members at Denver Public Library, two staff members at the Denver Department of Public Health and Environment, a library board member, and a community member who has participated in the library's Community Resource Program. We appreciate the commitment of these individuals to support this research. Their thoughts and experiences may not be generalizable to all of the staff of Denver Public Library or their partner organization.

In summer 2019, this project will release eight research-based case studies highlighting varying opioid response efforts across eight locations in the US. Additional information about the project can be found online: oc.lc/opioid-crisis.

Community and Library Overview

Denver Public Library (DPL) has a service population size of 683,096 and operates with one central and 25 branch locations. It has an operating budget of \$45,893,744 with 168.23 librarians and 477.8 other staff, totaling 646.03 personnel. On average there are over 4 million visits per year.¹ Denver, Colorado, is made up of mostly White populations, followed by Hispanic or Latino populations.² Almost half (47%) of its citizens holding a bachelor's degree, and 87% with at least a high school diploma.³

The median household income of \$60,098; however, 15% are living in poverty.⁴ Denver's unemployment rates in the US at 3.5%.⁵ About 13% of the population does not have health insurance,⁶ and the central library location is in an area with a shortage of mental health care professionals.⁷ Denver County has an opioid prescribing rate of 35.1,⁸ which is the number

of retail opioid prescriptions dispensed per 100 people. The general drug overdose death rate for Denver County was 397 people from 2015 through 2017.⁹



1 CENTRAL AND 25 BRANCH LOCATIONS



SERVICE POPULATION, 683,096



UNINSURED RATE, 13%



OPIOID PRESCRIBING RATE, 35.1 (per 100 people)

"The library held very strong in the belief that this is a public space and that everyone can come in. They advocate for the use of the library to be for everyone with other agencies and still continue to do so. It's a philosophy that has made people shift how they view public spaces."

–Community Partner Director

Denver Public Library's Opioid Response

Denver Public Library's Community Resource Program (CRP) is the foundation for the library's response to the opioid crisis. The program launched in 2015 as a solution to staff interest in better serving individuals experiencing homelessness, and expanded to address opioid-related concerns as community needs changed. The program provides support and counseling to patrons, focusing on trauma-informed services, which is a treatment framework that includes understanding, recognizing, and responding to the effects of all types of trauma.

The CRP employs four master's level social workers and six peer navigators who provide supportive services and assist patrons in navigating social service systems every day. Internally, the staff focuses on building relationships with these individuals and creating a safe environment for them. Peer navigators also work in the community to break down stigma surrounding drug use.

In addition to the CRP, the library has provided training on naloxone, a drug which can reverse an opioid overdose, to more than 500 staff members, and stocks naloxone throughout the system (naloxone is also known by the name brand, Narcan). The library also made physical changes within the buildings, including lowering bookshelves to improve line of sight to patrons and their activities, and adding sharps containers in the bathrooms.



Photo credit: Giles Clasen

DPL has also developed a procedure addressing their opioid response work and has worked to disseminate and share their approach on a broader scale with other organizations interested in implementing similar work.

Partnering for Success

The CRP works with many other city personnel, both formally and informally, to implement their opioid response work, including the Mayor's Office, city council, and other city agencies like the Denver Department of Public Health and Environment (DDPHE), Public Works, Office of Children's Affairs, Office of Legal Affairs, the Office of Behavioral Health, and other local public health departments. Formally, DPL worked with many of these partners and other city leaders through the citywide Opioid Task Force, that was created by the mayor.

“What has happened over time has made me wonder, what is our role as libraries? Is it just to provide learning opportunities or is it to go deep and create new relevant ways to support a community where every member has an opportunity to thrive no matter the issue?”

– DPL Board Member

This task force developed the Opioid Response Strategic Plan, 2018–2023.¹⁰ The plan identifies the library as a key partner in activities to address syringe access and sharps disposals with the goal of reducing harm and improving health outcomes among people who use drugs.

The plan includes a call to action to “reduce stigma surrounding substance (mis)use, eliminate barriers to accessing treatment, ensure equity, create opportunity, and build resiliency,” and includes the recommendation to start a collective impact initiative.

COLLECTIVE IMPACT EFFORTS

Denver Public Library is participating in a collective impact initiative aimed at addressing the opioid epidemic. This approach is outlined by the Collective Impact Forum as one that “brings people together in a structured way, to achieve social change.”¹¹ It encourages principles such as developing cross-sector partnerships, designing initiatives with equity, and cultivating leaders with system leadership skills.

“The library became a hub for all of us that were doing our own separate initiatives.”

–Community Partner Director

The collective impact effort is spearheaded by the library’s partners at DDPHE and started in 2018. DPL’s CRP manager co-leads the leadership committee with their partner at DDPHE. This committee oversees the action teams of the initiative. DPL capitalizes on the opportunity to inform the collective impact work

the library is engaged in and helps inform city and statewide policy through this group.

In addition, the collective impact initiative developed a “treatment on demand” program through Denver Health that the CRP collaborates with and also works closely with the substance use navigators hired by the city that connect people who are misusing substances and are ready for treatment.

Funding

DPL and its board initially requested funding and resources for the CRP work from the Mayor’s Office, but it was not until a serious overdose incident occurred that citywide collective efforts began. The Mayor asked organizations to work together via the citywide Opioid Task Force. The Mayor’s involvement is important because of the ability to attract both media attention and funding. In addition, the city approved the library to shift some funds towards improving safety. All funding supporting the opioid programming has come from the city’s general fund or independent grants, which allowed the library to avoid eliminating any existing programming.

Local Conditions Leading Up to the Library’s Response

Local factors and conditions that led to DPL’s response to the opioid crisis with their community partners, include:

- a library’s mission to ensure all can access

the public library space

- drive of staff to address social issues on a broader scale
- data documenting the rise of opioid use and overdoses in the community
- an overdose death and clear opioid use at the library
- local media coverage of the issue
- the library's proximity to easily accessible drugs

The CRP, modeled after San Francisco Public Library's social work program, was created to address the concerns of people experiencing homelessness. The DPL mission and values to welcome everyone into the public space made expanding the program to encompass the opioid crisis a responsive next step for their work. The need was clear because of opioid drug use occurring both in and near the library and the increase in lives lost each month due to overdose.

Staff began to raise awareness about safety concerns with the city in fall 2016, and an overdose death in the library in early 2017 propelled the work forward. Local media coverage of the opioid crisis in the community and at the library highlighted the heightening importance of the issue and an investigative report by an undercover reporter showed drug use inside and around the library. This story prompted the Mayor's Office and other city officials to pay closer attention to the issues the library had previously raised.

Reactions and Experiences of Library Staff, Community Partners, and Impacted Community Members

Generally, the reactions and experiences of DPL staff, their community partners, the media, and impacted community members are positive and

supportive of the CRP and other opioid response activities.

LIBRARY STAFF AND BOARD

Staff reaction within DPL was largely positive and supportive. There were intentional strategies implemented by DPL to help make staff comfortable and generate buy-in for the opioid response activities. For example, the naloxone training was offered as voluntary as opposed to mandatory and was accompanied by contextual opioid overdose information to help break down stigmas associated with people who use drugs or experience a drug overdose.

In addition to DPL staff, the library board has been supportive of the opioid programming. The board operated behind the scenes by supporting the financial request to the city, and the work allowed them to have deeper conversations about public safety concerns and their role as stewards of the library.

MEDIA

The media has been supportive of the naloxone training and depicts the CRP in a positive light. For example, the press often presents the library as a community resource and has allowed the library to share information about what they are implementing and why. Moreover, the media coverage has helped the library get recognized nationally for their life-saving work.

COMMUNITY EXPERIENCE

The community's reaction to DPL's opioid response activities has been mixed. The staff at the library have heard some negative reactions, based on fear that the library will be perceived as an injection site and no longer safe for patrons. But patrons have also expressed that they believe the library's efforts are meritable. In general, library staff felt there is far more support for the opioid response activities than against.

COMMUNITY PARTNER

Community partners have had positive experiences working with DPL and CRP staff during their engagement with the opioid



A peer navigator with the Denver Public Library
Photo credit: Giles Clasen

response work. The mission of the library to serve as a public space for everyone made partner organizations want to work with the library.

Since the creation of the CRP, the staff have developed new relationships and strengthened existing ones. For example, DPL and the CRP developed a new relationship with DDPHE as a result of working together in the city's task force; the CRP manager and a staff person from DDPHE co-chair the leadership committee.

Feedback from community partners indicates the library and the CRP program have been great partners in this work because of their dedication, resources, and responsiveness.

There were learning curves in the early stages of these relationships and working within the task force. Many partners came together, representing their interest area and points of view on how to best approach the opioid issue. After harnessing this as a strength versus a challenge, agencies and partners were able to clearly define their role and contribution.

Outcomes of the Library's Response

Outcomes that have occurred as a result of DPL's opioid response activities include:

- saved lives
- improved connection with the community
- improved partnerships

"They've just been there for me like a friend... They're there to listen. Either just an ear to vent to or advice or feedback. At first I just needed an ear. Then I wanted some kind of solution. They gave me some hope because some of them are in recovery. They showed me the resources here in Denver. Where to eat. Where to get clothes. Where to sleep safely. Alternatives to sleeping outside and getting arrested and killed. But I think the biggest thing is them being willing to speak to you or to listen to you. I trust the people here very much."

- Community Member

“The library does not back down on that this is a free, public space for everyone, regardless of whether you do not like them. They have been a model for many other communities. People often don’t think of the library as a city agency and now they are becoming aware of this.”

- Community Partner Frontline Staff

Since 2017, there have been 25 overdose reversals in the library because of the availability and administration of naloxone. Library staff have seen patrons return who were previously suffering from substance (mis)use and are now in recovery since interacting with their program. In 2018, CRP staff made approximately 6,000 contacts with patrons offering and providing support.

DPL also monitors successes in various ways, including anecdotal stories and attendance tracking. For example, DPL has a “Stories of Impact” tool to collect anecdotal information where staff can submit a story as a result of the programming (several examples of staff submissions are included at the end of this profile).

DPL indicated the longitudinal impact data needed to measure the effect of their opioid programming is difficult to collect because of privacy concerns of the patrons. They do not ask for names and demographic information because of the nature of the vulnerable population and because of the Colorado Library Law that states “a publicly-supported library shall not disclose any record or other information that identifies a person as having requested or obtained specific materials or service or as otherwise having used the library.”

CRP tracks the number of contacts they make and what those contacts are for (e.g. mental health support, homelessness services) and plans to bolster their tracking systems in 2019. Ideally, they would like to track how people are accessing support and treatment after visiting the CRP and any long-term outcomes associated with that, such as disease reduction.

The community, partners, and media have a better understanding of the larger role of the library in society. The library’s participation in the collective impact effort has helped to strengthen the profile of the library as a strategic ally, and opened up the opportunity to develop new partnerships to help address substance (mis)use and other issues the community is facing.

For example, the media has since reached out more often to inquire and share information about other activities and issues the library is engaged with, such as addressing the needs of immigrants and refugees in the community.

Challenges, Needs, and Opportunities

Through the course of developing and implementing the CRP and other opioid response activities, DPL identified challenges, needs, and opportunities for moving forward.

CHALLENGES AND NEEDS

DPL experienced several challenges connected to staff levels and funding. The first is that they experience a high turnover of security staff because, as a public entity, it is difficult to compete with private industry salaries.

More funding is also needed to bolster custodial staff. Keeping the exterior property clean is important for public safety and the user experience at the library.

Within the larger Denver community, there are not enough services and resources generally,

“Obviously, our biggest challenge is that people keep dying and we can’t work fast enough. Internally we are trying to get money out the door to the right people. We have solutions and we have a plan now but putting that into action is a challenge.”

– **Community Partner Director**

and greater civic investment is needed for social services across the city, which would help to reduce pressure on the library as a safety net of last resort. Moreover, the library and their partners are reaching patrons experiencing homelessness, but there is a whole population of people dying in their homes not yet being reached by the opioid response programming.

There have been challenges with developing and sustaining the partnerships and collaborations. Most of these challenges revolve around aligning approach and mission. For example, the relationship between the library and the police department was honed so that the library’s approach of preventive care and harm reduction could be supported and addressed.

There also were growing pains as the library and its partners sought to leverage respective strengths to meet demands. Library staff adjusted to new roles and examined how to define boundaries and minimize scope creep in their programs and services. Partners adjusted to the library as a new player in the field. There have been challenges associated with program implementation delays, including red tape of city work and general delays that come with coordinating programs with multiple agencies.

The following are ongoing and future needs to support efforts to best address the opioid crisis:

- **Programming needs:** funding specifically to prevent overdoses, address community stigma, and help individuals heal.
- **Workforce development:** additional staff and organizations to address stigma and a broader reach.

- **Policy and systems-level needs:** change in how drug misuse is addressed within the city of Denver, including more rehabilitation and mental health professionals, and places for people to use drugs safely.



Photo credit: Giles Clasen

OPPORTUNITIES AND LESSONS LEARNED

Reflecting on the CRP other opioid response activities, there are opportunities for the work moving forward and lessons learned along the way that were shared by the interviewees. These can help inform other libraries seeking to implement similar activities.

- **Be proactive with communications** both internally and externally with an aim to get ahead of the narrative. It is important to get the positive stories out and to have a strong communication plan that all staff abide by.
- **Be strategic and think broadly about long term needs** to be able to more deeply address the root causes of the issue.

- **Educate board early and regularly to get buy-in**, so that they can serve as advocates for the needs of the programs and activities.
- **Provide staff training from the start on resiliency, empathy, and trauma.** In addition, there is a need for staff support after overdoses happen to address any trauma response.
- **Gather community input and ask patrons what they want and need.** There is an opportunity to engage with people who have life experience to guide the work to ensure what is developed and implemented matches what is needed.
- **Be proactive about funding** in the beginning and target other funding sources.
- **Empower staff and gather staff buy-in** to create a community of inclusivity and empowerment. Staff education and collaboration is important when developing opioid response activities.
- **Ensure the right partners are at the table with aligned goals** and develop critical partnerships with organizations that provide services the library does not, such as health, housing, and food.

STORIES OF IMPACT

One of the tools that Denver Public Library uses to capture how the library is supporting patron needs and the impact of their efforts is called, "Stories of Impact." These are two stories that were shared by staff.

"D had been coming into the Community Resource office occasionally for a few months and we discussed his goal of sobriety regularly. D came into drop-ins one weekend and said he "needed counseling." He continued to nod off and reached a point at which I contacted 9-1-1 for his possible overdose. D returned to the library roughly a month later and proudly showed off his suboxone prescription and shared he hadn't used heroin in 17 days."

"T came into drop-ins after five days of methamphetamine misuse in City Park and acquiring funds for continued misuse through sex work. After spending a day working with him as he was coming down, he ultimately decided to go to Denver CARES. Now, he's turning himself in for a warrant and plans on continued treatment upon release. Lastly, T has asked that we work with his partner, C, towards housing while T serves his 30-day sentence."

ENDNOTES

- 1 Institute of Museum and Library Services, “2016 Public Library Survey Data,” <https://www.ims.gov/research-evaluation/data-collection/public-libraries-survey/explore-pls-data/pls-data>
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- 7 Health Resources and Services Administration, May, 2018, <https://data.hrsa.gov/tools/shortage-area/>
- 8 Centers for Disease Control and Prevention, “U.S. County Prescribing Rates, 2017,” <https://www.cdc.gov/drugoverdose/maps/rxcounty2017.html>
- 9 University of Wisconsin Population Health Institute, “County Health Rankings,” <http://www.countyhealthrankings.org/>
- 10 Denver Public Health and Environment, “Opioid Response Strategic Plan 2018-2023” https://www.denvergov.org/content/dam/denvergov/Portals/771/documents/CH/Substance%20Misuse/DDPHE_OpioidResponseStrategicPlan.pdf
- 11 Collective Impact Forum, “What is Collective Impact,” <https://www.collectiveimpactforum.org/>

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OCLC Research
Dublin, Ohio 43017 USA
www.oclc.org

Please direct correspondence to:

OCLC Research
oclcresearch@oclc.org