

The Opioid Epidemic & Public Health

Impact, Interventions, & Innovation

Presentation for the
Maryland Addiction Consultation Service
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Objectives

- 1. Outline the public health impacts of the opioid epidemic
- 2. Analyze the innovative public health approaches to the opioid crisis
- 3. Understand and explore the role of the social determinants of health for the treatment and support of patients with substance use disorders



Financial Disclosure

Sara Whaley, MPH, MSW, MA faculty for this activity, has reported no relevant financial relationships to disclose.

All planners, teachers/instructors/faculty, author(s), writer(s) and reviewers of this activity have reported no relevant financial relationships to disclose.

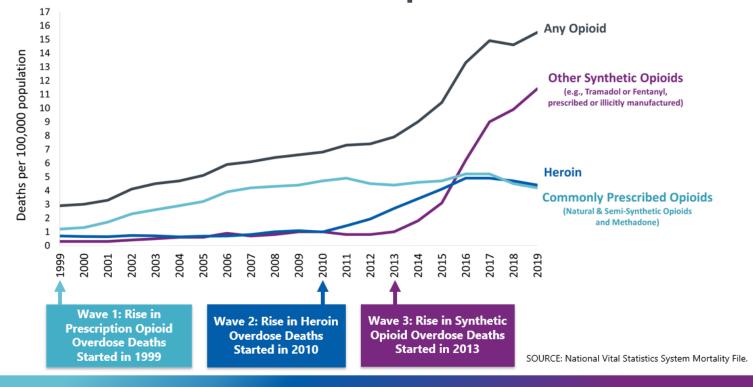


SECTION 1 IMPACT



History of Opioid Crisis

Three Waves of the Rise in Opioid Overdose Deaths

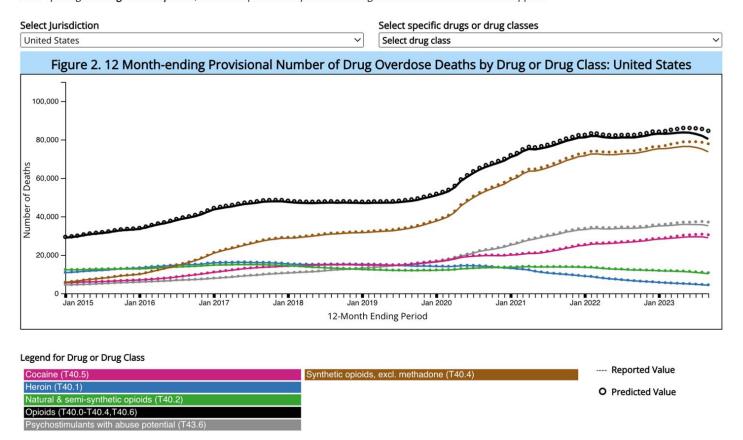




Source: CDC

12 Month-ending Provisional Number of Drug Overdose Deaths by Drug or Drug Class

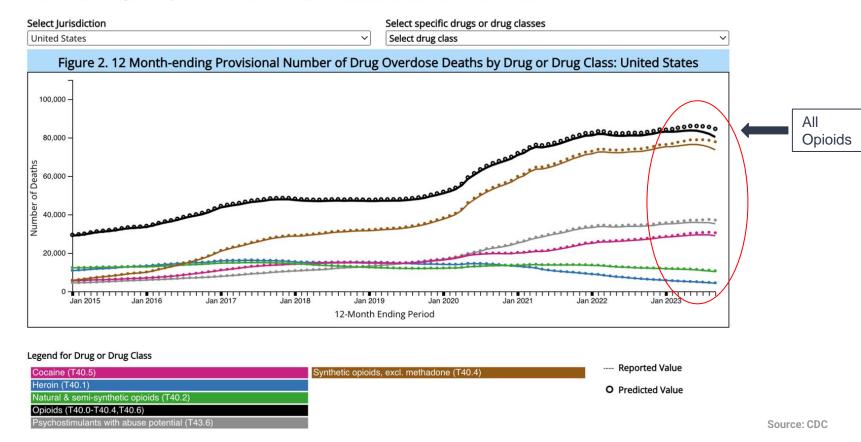
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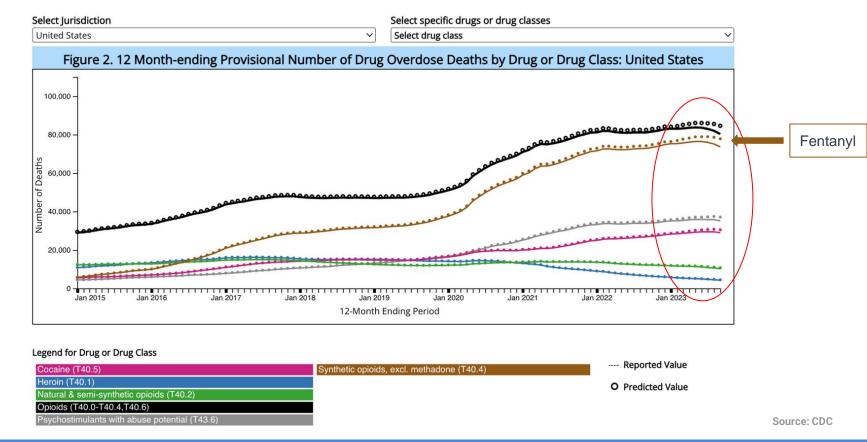
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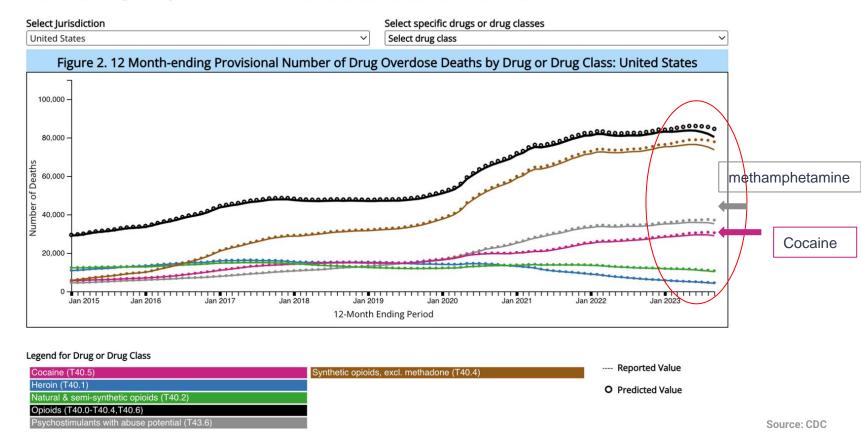
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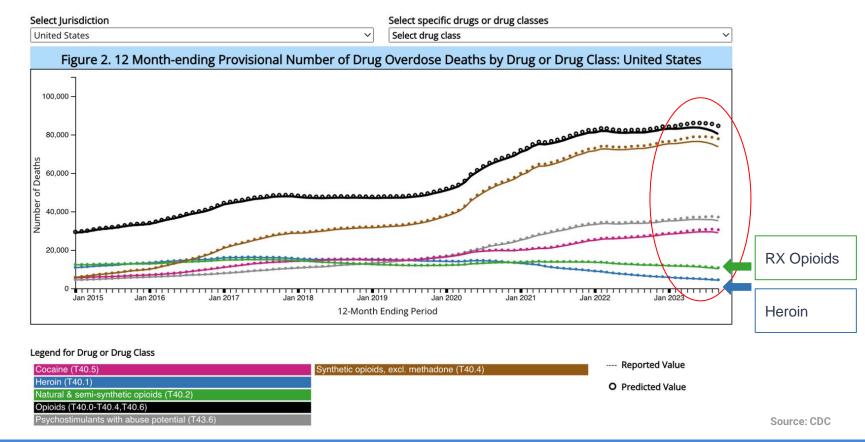
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Knowledge Check #1

The current wave of the overdose crisis, or Wave 3, is defined by the increase in overdose deaths related to prescription opioids.

TRUE or FALSE



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TRUE or FALSE



Cost of the opioid epidemic

Human Cost:



life expectancy

Economic Cost:

>\$1.5 Trillion in 2020 (<u>JEC Report, 2022</u>)

Societal Costs:

- children in foster care
- homelessness/housing insecurity
- opioid-related emergency department visits and inpatient stays
- decreased labor force participation

SECTION 2 INTERVENTIONS



Proven Interventions Across the Continuum of Care





Why is the opioid crisis getting worse?





SSPs save lives by lowering the likelihood of deaths from overdose.



- Fewer fatal overdoses & increase access to naloxone
- Greater access to social services and medical treatment
- Reduction in new Hepatitis C and HIV cases
- Connection to care for existing Hep C & HIV cases
- Safe disposal of used syringes
- Reduction in sexually transmitted infections



SSPs save lives by lowering the likelihood of deaths from overdose.

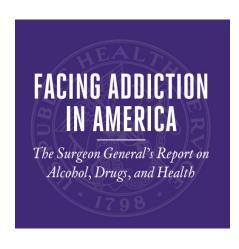


Needle exchanges are a proven tool to fight HIV, but officials still want to shut them down

Indiana Needle Exchange That Helped Contain A Historic HIV Outbreak To Be Shut Down

Atlantic City is poised to shut down its syringe exchange — amid warnings of dire public health consequences



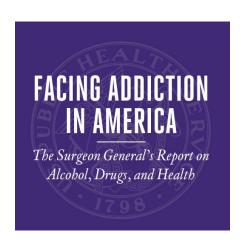


Prevention Programs and Policies

- School commitment, attachment, achievement
- Socioeconomic attainment
- Mental health
- Multi-generational effect on improved outcomes

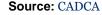






Prevention
Programs and
Policies

Between 2009 and 2019, substance use prevention funding has been cut by 34%







- Longer retention in treatment
- Decreased opioid use
- Reduce all-cause mortality
- Increase quality of life







In 2016, just 36% of substance use treatment facilities offered any from of medication treatment for opioid use disorder

Source: National Academies





In 2021, only 1 in 5 patients with OUD received an MOUD.





Social Determinants of Health









- Physical and mental health
- Trauma and coping skills
- Social emotional learning and skills
- Perception of risk







- Attitudes and opinions towards substance use and SUD treatment
- Supportive peer and family network
- Naloxone education and carrying







- Availability of services
- Prescriber's attitudes and prescribing practices
- Access to naloxone and naloxone training
- Public health education programming
- Economic wellbeing and housing stability







- Stigma towards people who use drugs
- Supportive legislation
- Policies that promote racial and health equity
- Health insurance coverage for mental health and substance use treatment







78%

of Americans believe people who are addicted to prescription opioids are, themselves, to blame for their problem



72%

of Americans believe that people addicted to prescription opioids lack self-discipline



58%

of individuals would not want to work with a person with OUD



55%

of people would not want a person with OUD to live next door to them



Impact of Stigma

Societal:

Community/ Interpersonal:

Individual:

Stigma blocks interest in effective policies: punitive measures vs support bans on harm reduction MOUD = "addiction by another name" **NIMBYism** Internalized Stigma



Knowledge Check #2

Which part(s) of the socio-ecological model are impacted by stigma?

- A. Individual
- B. Interpersonal
- C. Community
- D. Society



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Which part(s) of the socio-ecological model are impacted by stigma?

- A. Individual
- B. Interpersonal
- C. Community
- D. Society
- E. All the Above



SECTION 3 INNOVATION



What does this mean for providers?



1. Reflect on our own biases



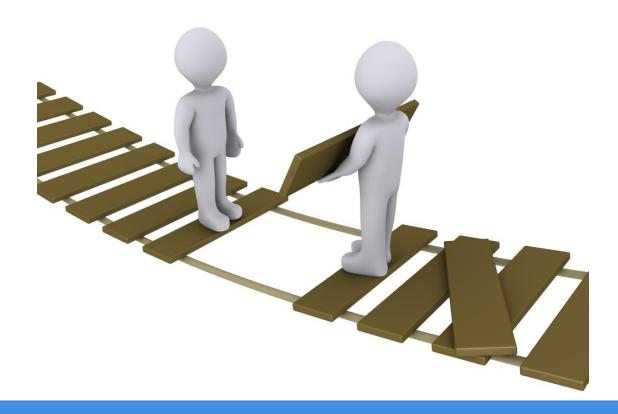


2. Consider the WHOLE PERSON





3. Address treatment gaps





4. Support each other to cope with burnout





Session Summary

- 1. Opioid crisis has evolved over time and continues to evolve. Our responses will need to respond with it.
- 2. Social determinants are NOT a root cause of the opioid addiction epidemic but they can impact opioid related morbidity and mortality. Addressing social determinants of health can improve outcomes for people with OUD.
- 3. Stigma has wide impacts from policies to medical service provision to social supports to and individuals willingness to seek help.
- 4. Addressing the crisis is going to take interdisciplinary, collective action and innovation to address the whole patient.



Thank you!

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