



The Opioid Epidemic:

A National Perspective

The Problem

Substance misuse has had a devastating impact on families in the United States.

According to the Centers for Disease Control, 174 people die everyday from drug overdoses. Admissions to treatment for prescription opioids have increased 500 percent.

22

In 2015, 21.7 million people in the United States needed substance use disorder treatment, but only 11% received it.

23

Over 23 million Americans are in recovery from addiction to alcohol & other drugs.

70
0

Abuse of tobacco, alcohol, and illicit drugs is costly to our Nation, exacting more than \$700 billion annually in costs related to crime, lost work productivity and health care.

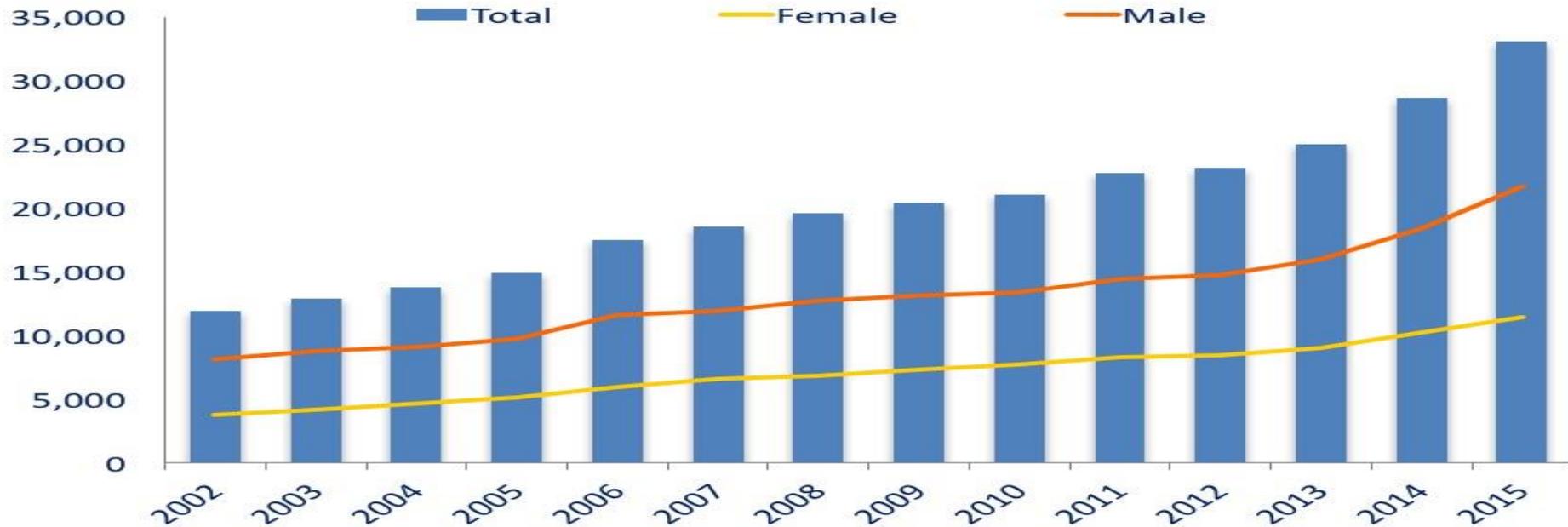
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Fifty percent of people incarcerated are classified as being dependent on drugs.

Overdose Epidemic Nationally



National Overdose Deaths Number of Deaths from Opioid Drugs



Source: National Center for Health Statistics, CDC Wonder

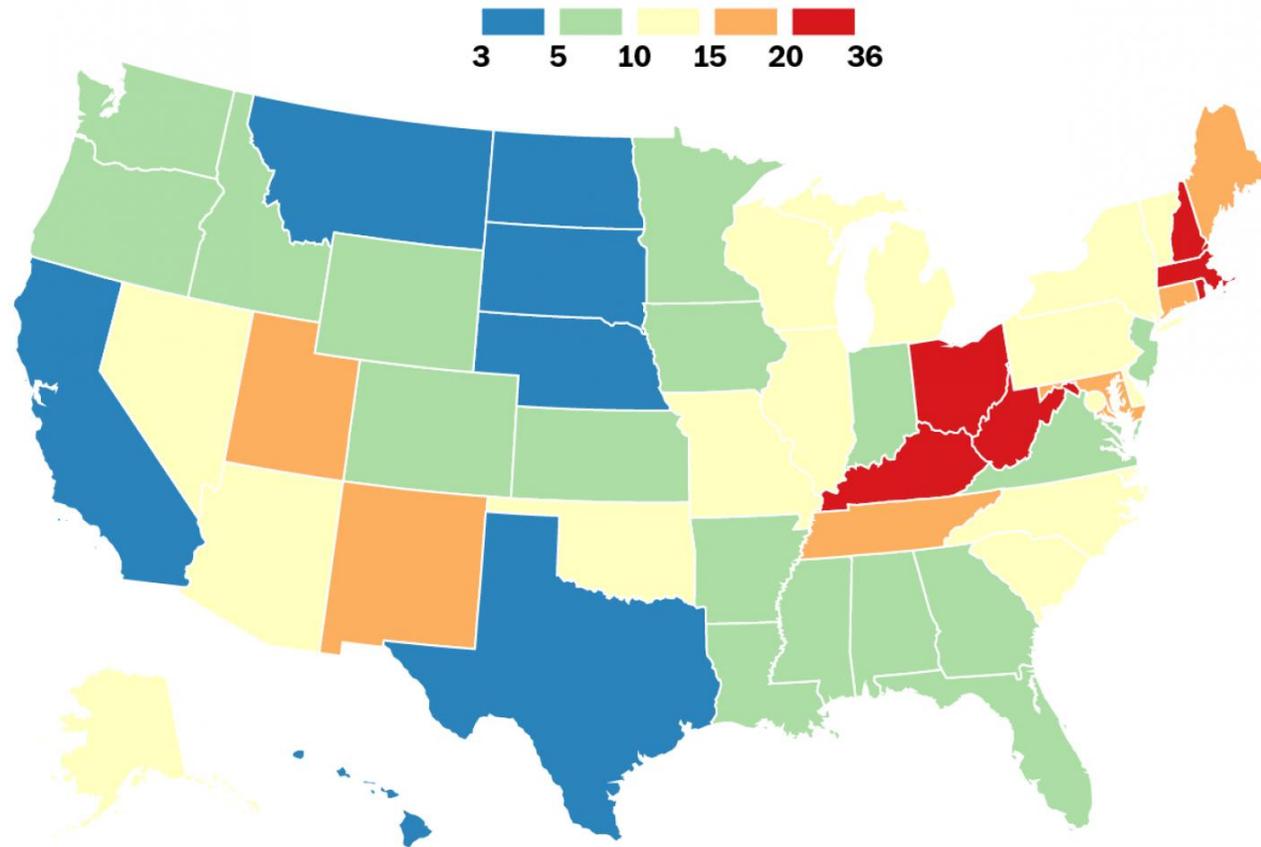
Overdose Epidemic Nationally

- Over 60,000 drug overdose deaths in the United States in 2016
- Outpaces homicides and traffic accidents
- Some parts of the country have been hit harder than others

Variation among the states

Opioid deaths in 2015

Age-adjusted death rates (per 100,000) for overdose deaths from all opioid drugs

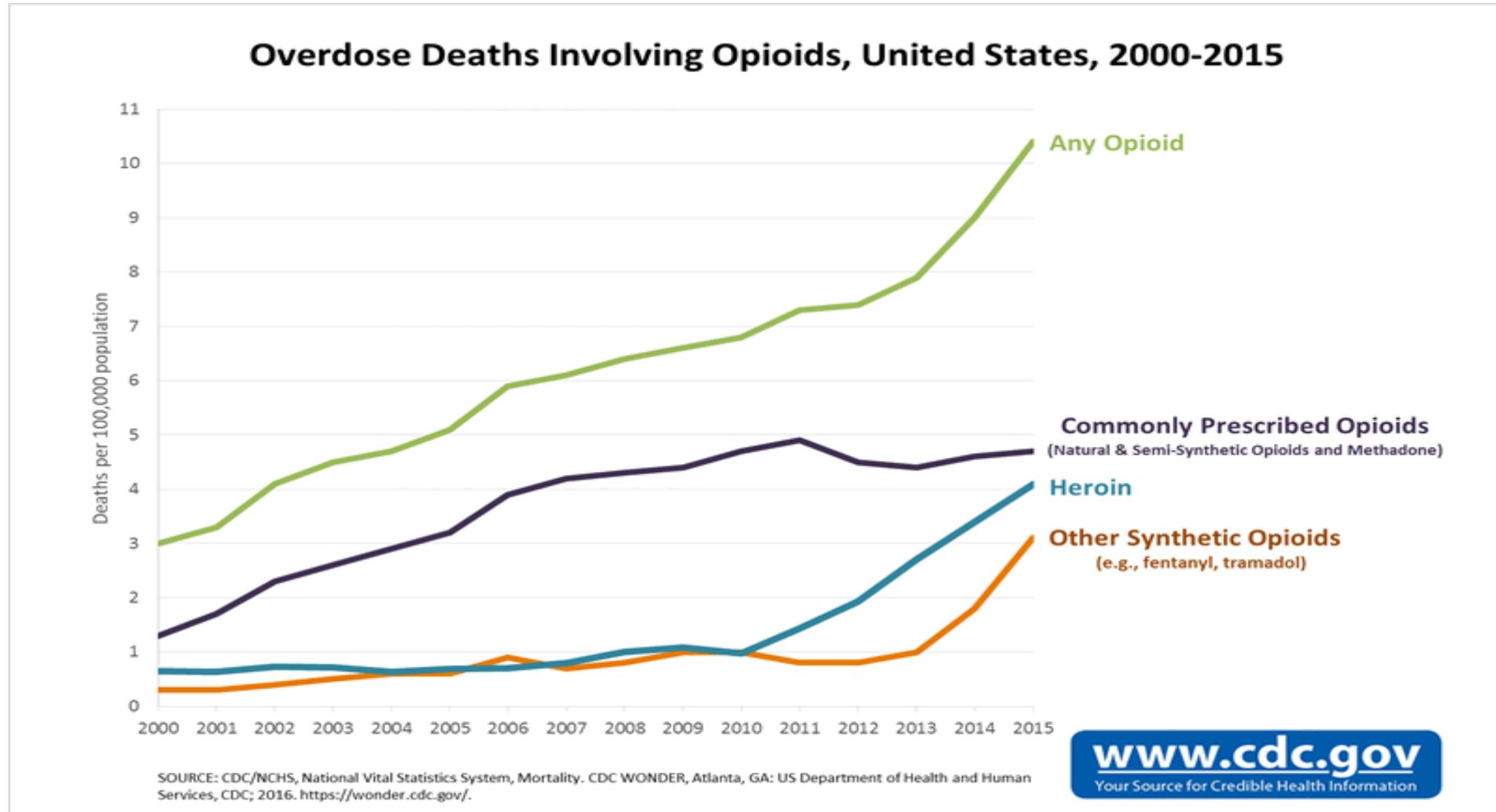


Fentanyl

Fentanyl is a deadly synthetic opioid that is dozens of times stronger than morphine and heroin



Fentanyl on the Rise Nationally



Costs \$80 billion annually

- Unemployment and missed work
- Criminal justice and incarceration
- Health care costs

6 Key Elements of a Comprehensive Response

Criminal Justice Reform

Provide evidence-based treatment in the jails and prisons and expand alternatives to incarceration to treat individuals in communities

Prevention

Expand prevention and education efforts aimed at teens, parents, other caretakers.

Law Enforcement

Training and interventions so police can better connect individuals with substance use disorders to drug treatment

Treatment

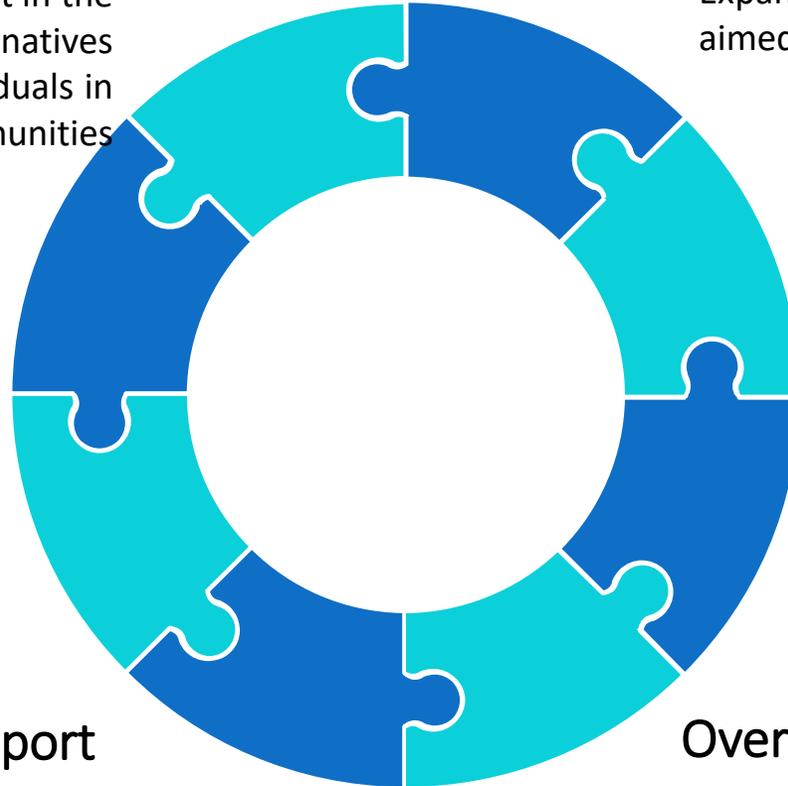
Expand evidence-based treatment nationwide including medication-assisted treatment (MAT)

Recovery Support

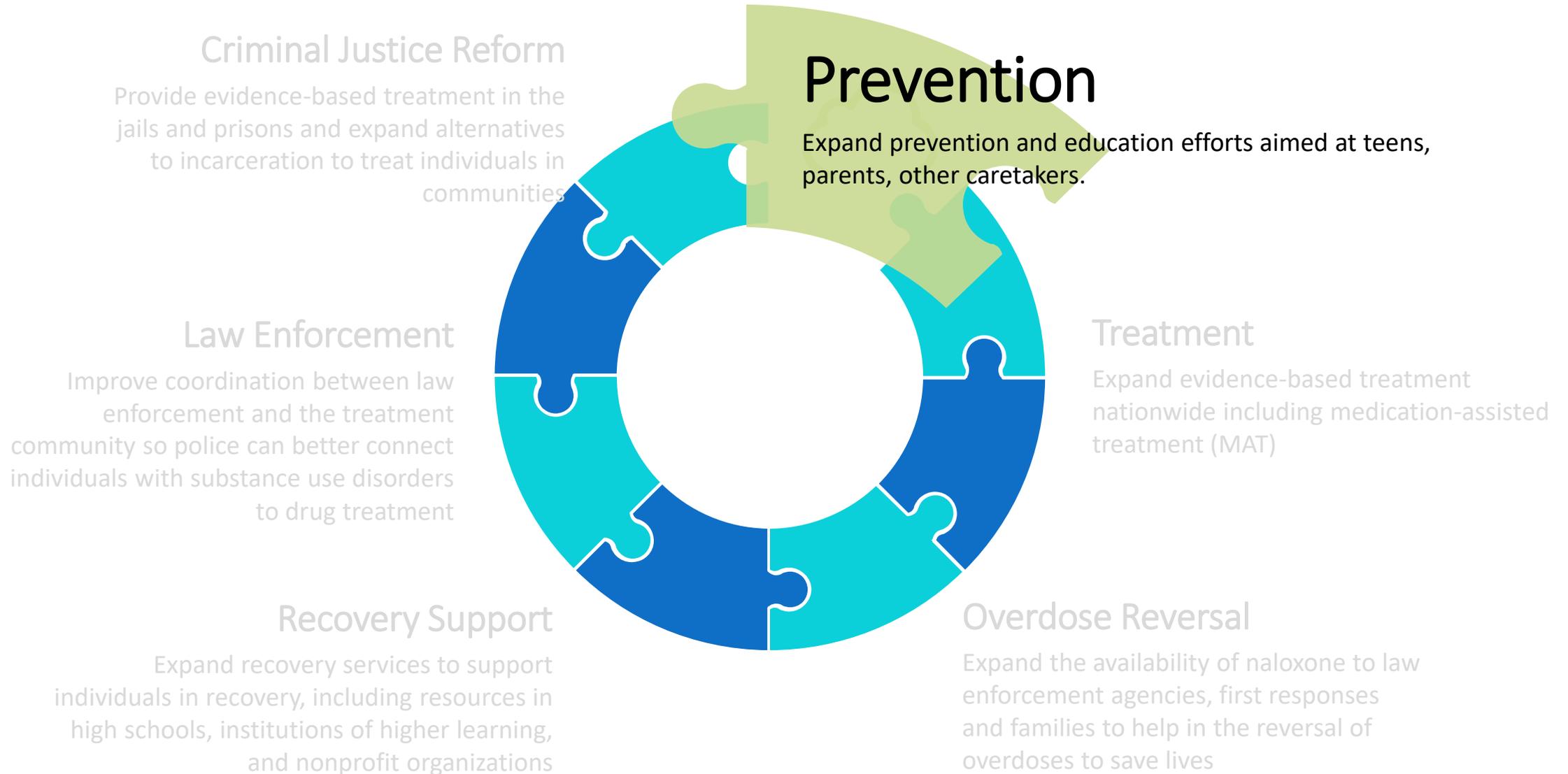
Expand recovery services to support individuals in recovery

Overdose Reversal

Expand the availability of naloxone to law enforcement agencies, first responders and families to help in the reversal of overdoses to save lives

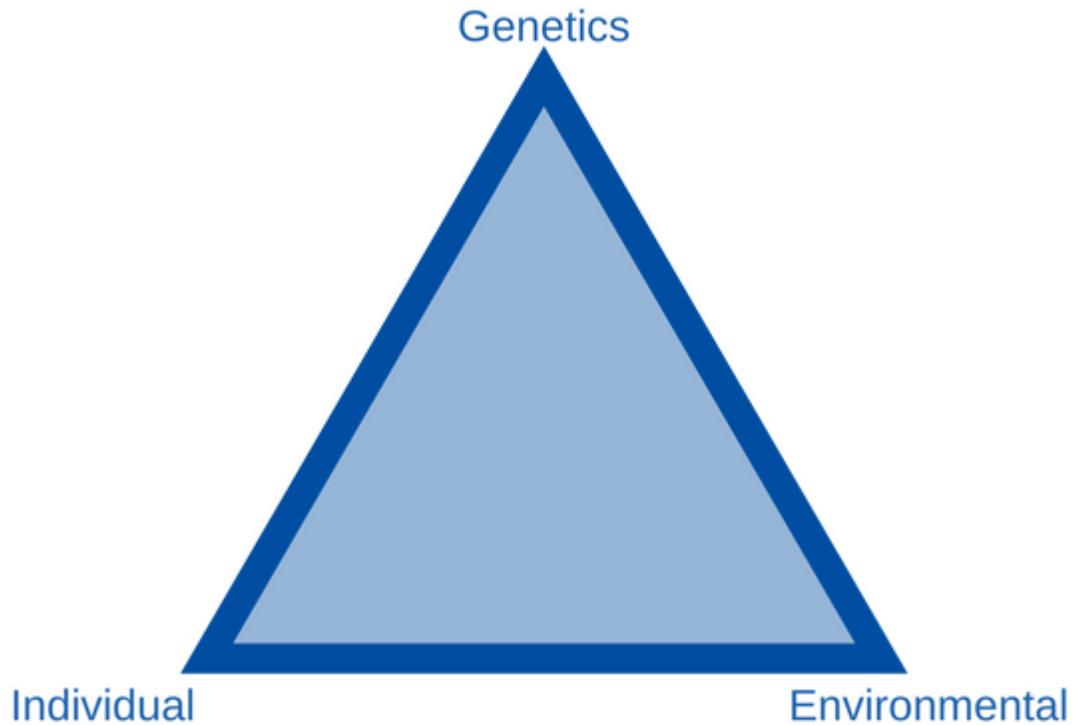


6 Key Elements of a Comprehensive Response



Prevention

Addressing factors that protect or put adolescents at risk



01

At the individual level, risks include lack of parental monitoring, unstable home, lack of attachment to your community or school and early onset of use of alcohol, marijuana or other drugs.

02

High risk environments include high drug availability, normalizing alcohol and drug use so adolescents feel like it's normal behavior, poverty and crime.

03

Family studies suggest that as much as half of a person's risk of becoming addicted to nicotine, alcohol, or other drugs depends on his or her genetic makeup.

START, Kentucky

Child Welfare intervention to parents with substance use disorders and services for the family.

How It Works

Goal: Help families with parental substance abuse and child abuse/neglect achieve sobriety. Keep children safe and reduce placement in state custody and keeping children with their families when appropriate.

Pairs social workers with a family mentor to work in collaboration with the families, providing:

- Peer support
- Intensive treatment
- Child welfare services

Each START team has up to four specially trained caseworkers from Child Protective Services and a family mentor.

Each team member conducts multiple visits each month to their assigned families.

Together, the START team creates a customized service plan based on the family's needs.

Demonstrating Success

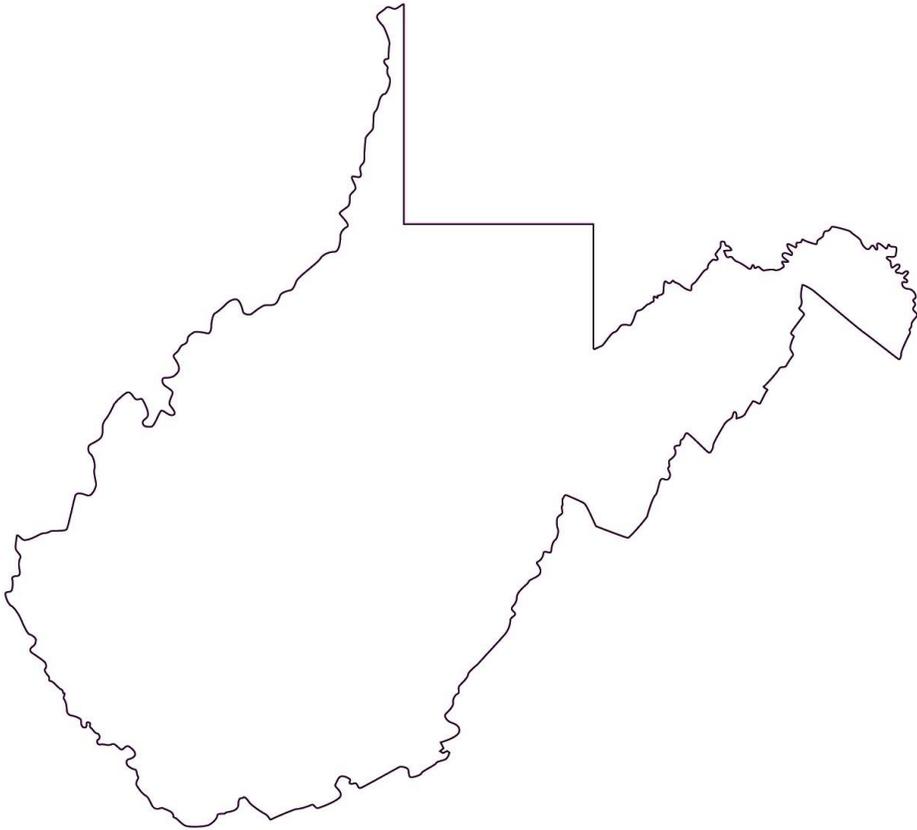
Effective at improving outcomes for mothers. Mothers who participated in START achieved sobriety at nearly twice the rate of mothers treated without START (66 percent and 37 percent, respectively).

Effective at keeping children at home. Children of participating families were half as likely to be placed in state custody as compared with children in a matched control group (21 percent and 42 percent, respectively).

Significant outcomes in cost-effectiveness—for every \$1.00 spent on START, Kentucky avoided spending \$2.22 on foster care.

Jackson County Anti-Drug Coalition

- Multi-sector coalition formed in 2006
- Strategy to address root causes



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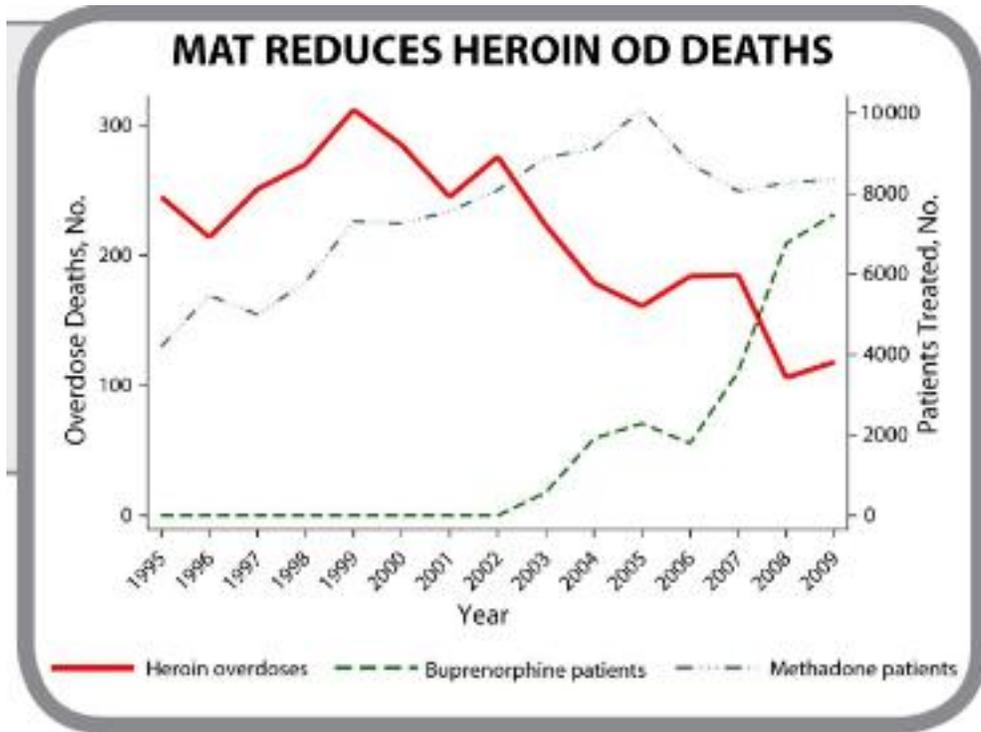
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Effective Treatment

Opioid Use Disorder Affects Millions



1

Over 2.5 million Americans suffer from opioid use disorder. Use of opioids, including heroin and prescription pain relievers, can lead to neonatal abstinence syndrome as well as the spread of infectious diseases like HIV and Hepatitis.

2

Medications, including **buprenorphine**, **methadone**, and extended release **naltrexone** are effective for the treatment of opioid use disorders

3

Medications should be combined with behavioral counseling for a “**whole patient**” approach, known as Medication Assisted Treatment (MAT).

4

MAT decreases opioid use, opioid-related overdose deaths, criminal activity, and infectious disease transmission. After buprenorphine became available in Baltimore, heroin overdose deaths decreased by **37 percent**.

Drug Treatment Principles

Adapted from NIDA Principles of Effective Drug Treatment

1. **Drug addiction can be treated**, but it's not simple. Addiction is a complex but treatable disease that affects brain function and behavior.
2. **No single treatment is appropriate for everyone.** Treatment varies depending on the type of drug and the severity of the disorder.
3. Successful **treatment has several steps.** Effective treatment attends to multiple needs of the individual, not just his or her drug abuse.
4. **Medications** can be used to manage withdrawal symptoms, prevent relapse, and treat co-occurring conditions.
5. **Behavioral therapies** help patients modify their attitudes and behaviors related to drug use.
6. **Treatment does not need to be voluntary to be effective.** Sanctions or enticements from family, employment settings, and/or the criminal justice system can significantly increase success of drug treatment interventions.
7. **Remaining in treatment for an adequate period of time is critical.** Research indicates that most addicted individuals need at least 3 months in treatment to significantly reduce their drug use requires long-term recovery support.
8. **Assess for Co-Occurring Disorders.** Many individuals have both substance use and mental health disorders.
9. Drug use during **treatment must be monitored continuously**, as lapses during treatment do occur. Monitoring provides an early indication of a return to drug use, signaling a possible need to adjust an individual's treatment plan to better meet his or her needs.
10. **The treatment plan must be assessed and modified continually.** A patient requires a continuing care approach with services and treatment components ranging from counseling, medication, medical services, family therapy, parenting instruction, vocational rehabilitation, and/or social and legal services.

Hub & Spoke, Vermont

Streamlining opioid use disorder and integration into medicine

How It Works

Goal: Creates a coordinated, reciprocal clinical connection between specialty addiction treatment centers and general medical practice.

Provides medication-assisted treatment for individuals with opioid addictions, creates a framework for integrating treatment for addiction into general medicine, and expands recovery support and continuum of care needed to improve outcomes.

“Hub”: Regional, specialized intensive treatment centers that works in coordination with general medicine and other supports locally to create a continuum of care.

“Spoke”: A three-person team of a care coordinator, clinician, and physician. Together, they use a multipronged approach, which includes the use of general medicine along with a continuum of care for recovery support.

Demonstrating Success

Since the implementation, Vermont has improved access to care and the integration of addiction treatment into healthcare.

Participants report improved functioning after discharge.

Vermont has continued to see a decline in all age groups reporting misuse of prescription pain relievers in the past year.

At the same time, the number of people in the state receiving treatment for opioid abuse and dependence has significantly increased

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Naloxone Saves Lives

Naloxone can quickly restore normal breathing and save the life of a person who is overdosing on opioids.

- In 2015, over 33,000 people died from an overdose on opioid drugs, including prescription pain relievers, heroin, and fentanyl.⁶ Naloxone is a safe medication that is widely used by emergency medical personnel and other first responders to prevent opioid overdose deaths. Unfortunately, by the time a person having an overdose is reached, it is often too late.
- A naloxone distribution program in Massachusetts reduced opioid overdose deaths by an estimated 11 percent in the nineteen communities that implemented it without increasing opioid use.
- From 1996 to 2014, at least 26,500 opioid overdoses in the U.S. were reversed by laypersons using naloxone.

How Does Naloxone Work?

Naloxone is an opioid receptor antagonist meaning it binds to opioid receptors and reverses or blocks the effects of other opioids. Giving naloxone immediately reverses the effects of opioid drugs, restoring normal respiration. It can be administered by injection or through a nasal spray.

Naloxone +



AnchorED, Rhode Island

Emergency Room embedded peer recovery support

How It Works

Goal: Connect individuals with peer recovery coaches after being admitted to the ER for an opioid-related overdose

Upon admission, hospital staff members call the AnchorED hotline, which is available 24/7 in all 12 hospitals in RI

Caller speaks with a recovery coach, who is then dispatched to the hospital

Prior to release, the recovery coach meets with the patient to discuss available resources in the community

Once released, AnchorED staff follows up with the patient for the next 10 days, encouraging them to engage in recovery support services

Demonstrating Success

In the first 29 months, over 1,400 people were connected with AnchorED.

Of those, 80% engaged in recovery support services when released

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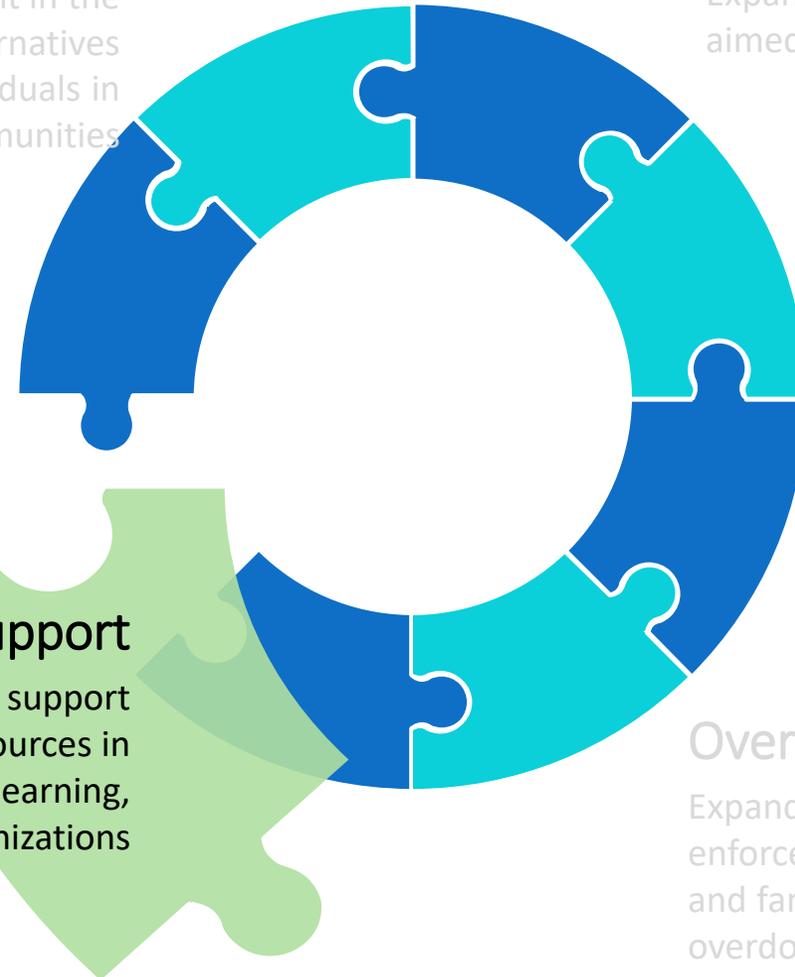
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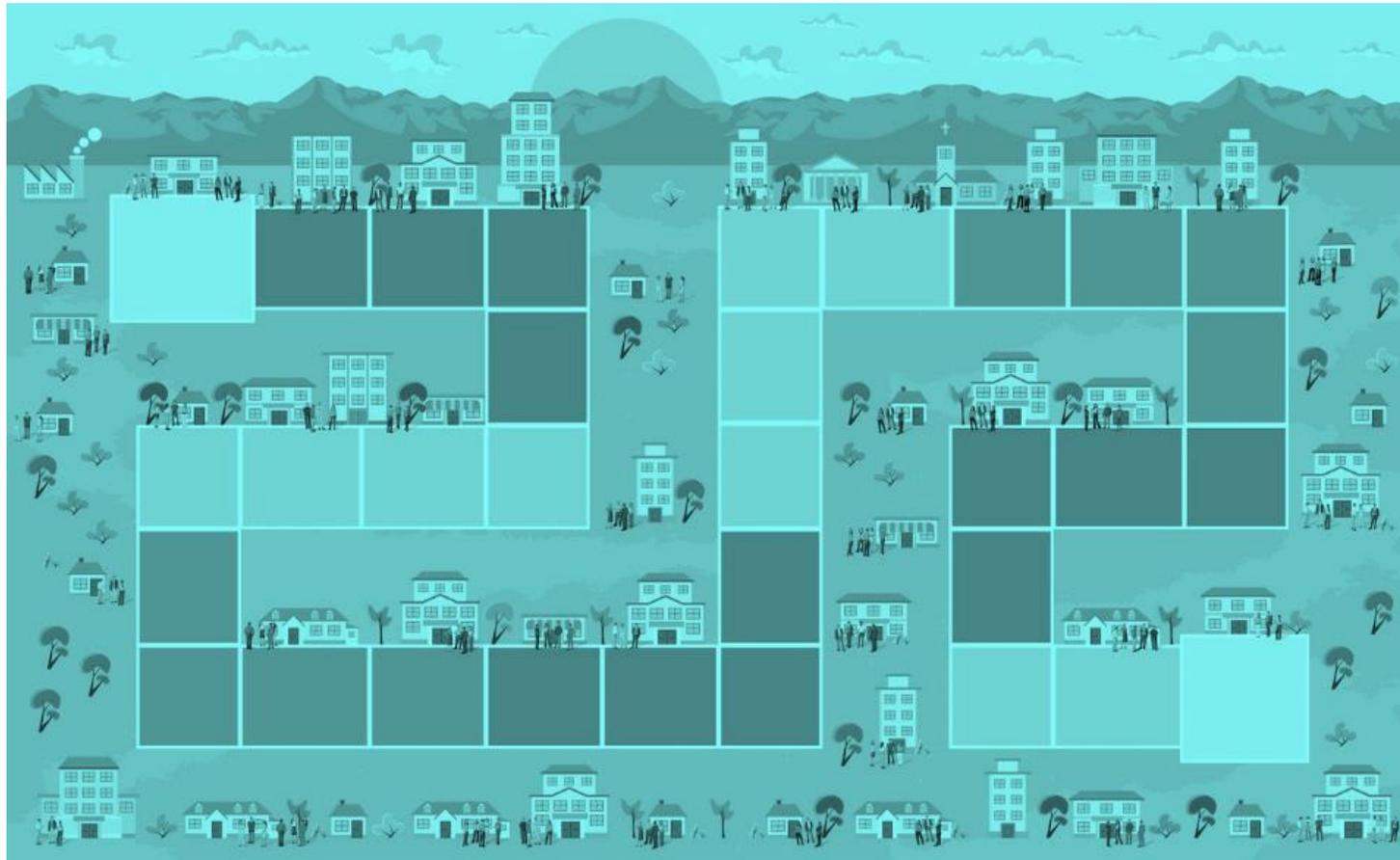


Recovery Pathway

Tx + Long term Recovery Support

Treatment

Advancements have been made to treat substance use disorders, from medications to treat addiction, Narcan to reverse overdoses, counseling, to cognitive behavioral therapies that help retrain the brain while it is healing. And there is support for when setbacks happen.



Recovery

There is also recovery support including 12 step groups and meetings, peer to peer support, recovery community centers and even recovery housing and schools. These types of interventions can help drive out the hijacker and treat the disease so individuals can find a life in recovery and wellness.

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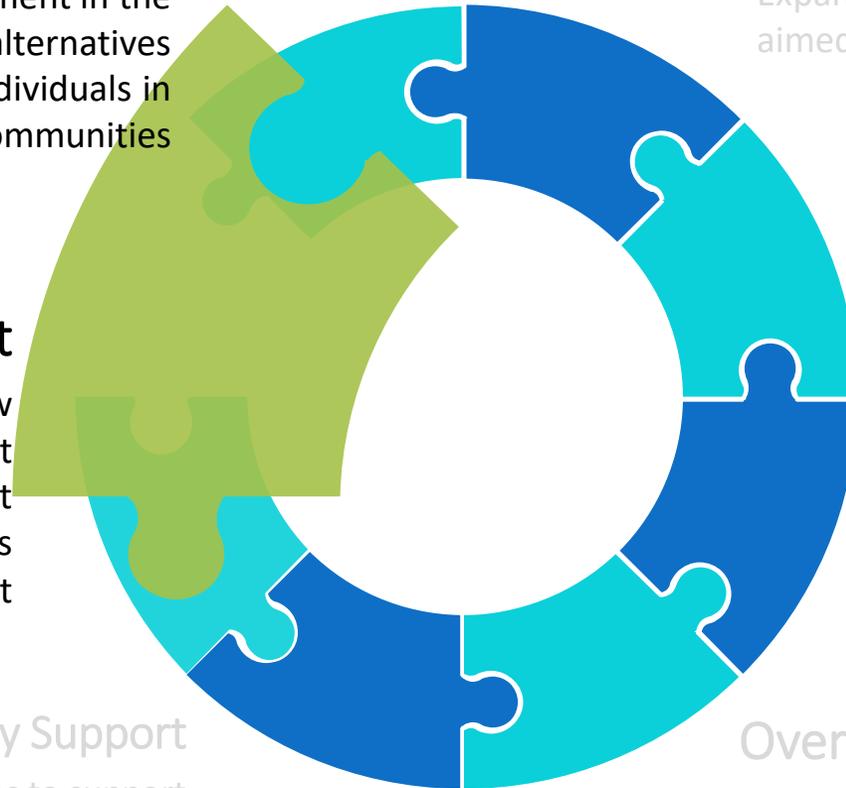
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Sequential Intercept

Sequential intercept is a different framework for the criminal justice system's handling of substance use disorders through implementation of criminal justice diversion policies, medication assisted treatment and other treatment programs and practices that intervene at the earliest point in the system to divert into community treatment, improve consumer outcomes and reduce costs.



Federal Funding

Comprehensive Addiction and Recovery Act (CARA)

PROGRAM	FY17	FY18 HOUSE MARK
CARA – DOJ Grants and Program	\$13 million	\$30 million
CARA – Enhancement Grants	\$3 million	\$3 million
CARA – Veterans Administration Initiatives and Programs	\$50 million	\$55.82 million
First Responder Training – Overdose Reversal	\$12 million	\$12 million
Building Communities of Recovery	\$3 million	\$3 million
Pregnant and Postpartum Women	\$19.93 million	\$19.93 million
Targeted Capacity Expansion Grants - MAT	\$56 million	\$56 million
Access to Overdose Treatment	\$1 million	--
CARA Total	\$153 million	\$179.75 million

Federal Funding

21st Century Cures Act

PROGRAM	FY17	FY18
21 st Century Cures Act	\$500 million	\$500 million
CURES Total	\$500 million	\$500 million



THANK YOU

Questions?

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