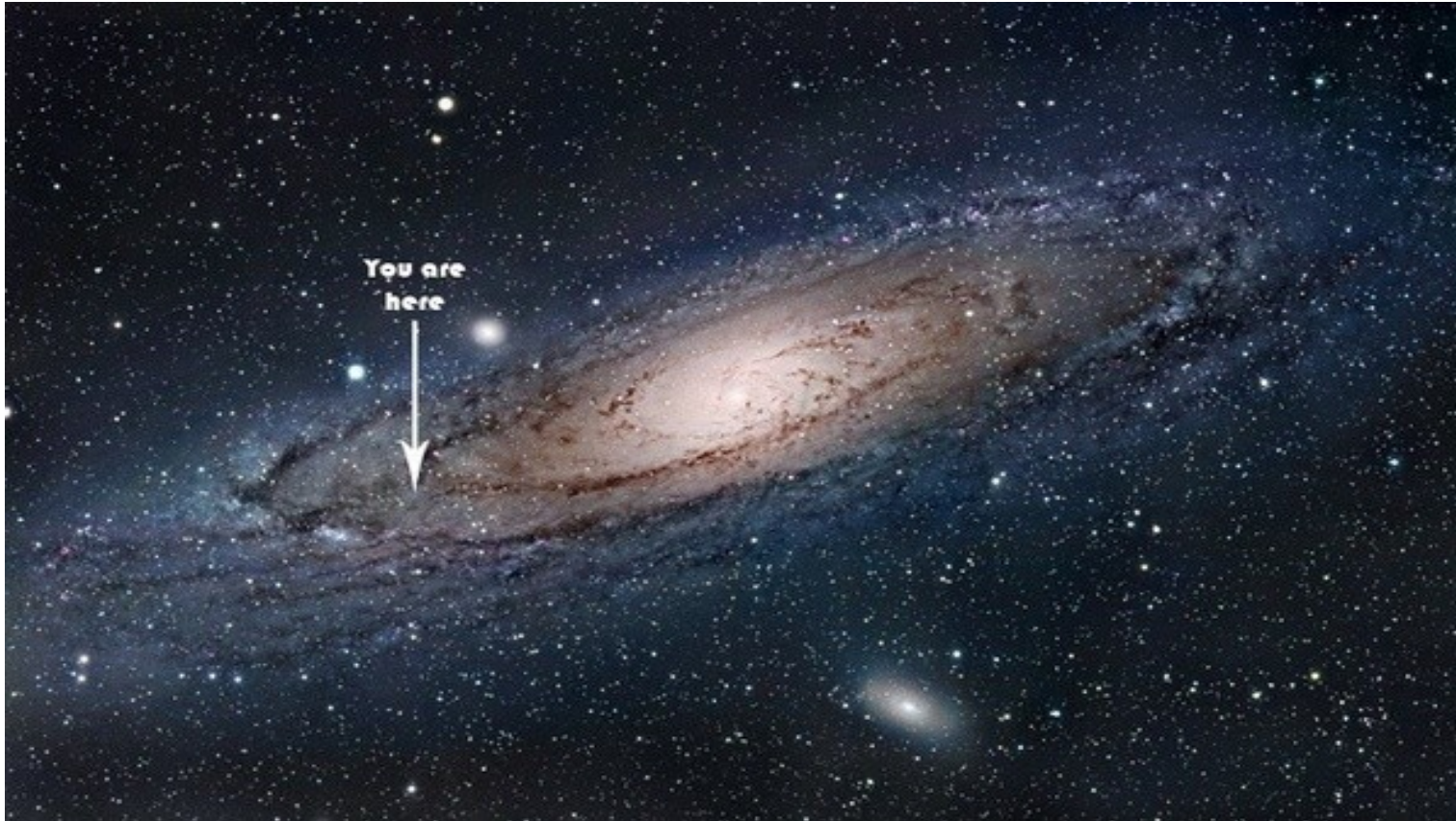# The Opioid Epidemic in an Uncertain World: Are People being Pushed over the Edge?

Jorge Delva, MSW, PhD
Dean and Professor
School of Social Work
Boston University

May 3, 2018

The Very Big Picture:
Beyond Health, Towards a Social Welfare / Population 'well-Being'[1] Perspective

You are here

Though It's about them

TEAM USA

Sources: Google. [1]Kottke, T.E., Stiefel, M., & Pronk, N.P. (2016). "Well-Being in All Policies": Promoting Cross-Sectoral Collaboration to Improve People's Lives. *Prev Chronic Dis, 13.*

Source: proud dad

A Nation in pain – some examples

~126.1 million adults report some pain in the previous 3 months (NHIS, 2012)

25.3 million American adults suffer from daily pain

23.4 million American adults report a lot of pain

25.4 million American adults experience category 3 pain

14.4 million American adults experience the highest level of pain, category 4

Source: https://www.washingtonpost.com/news/to-your-health/wp/2015/08/11/nih-more-than-1-in-10-american-adults-experience-chronic-pain/?utm_term=.d74e656a69d6. Nahin, R.L. (2012). *Journal of Pain, 16*, 769-780.

Fact: 43.8 million adults experience mental illness in a given year.

1 in 5 adults in America experience a mental illness.

Nearly 1 in 25 (10 million) adults in America live with a serious mental illness.

One-half of all chronic mental illness begins by the age of 14; three-quarters by the age of 24.

Treatment in America

60% Nearly 60% of adults with a mental illness didn't receive mental health services in the previous year.[4]

50% Nearly 50% of youth aged 8-15 didn't receive mental health services in the previous year.[1]

African American & Hispanic Americans used mental health services at about 1/2 the rate of whites in the past year and Asian Americans at about 1/3 the rate.[1]
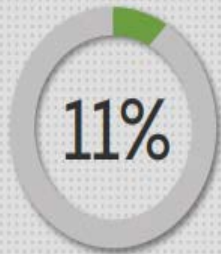
Whites
African Americans
Hispanic Americans
Asian Americans

Mental Health Facts
CHILDREN & TEENS

Fact: 1 in 5 children ages 13-18 have, or will have a serious mental illness.[1]

20%
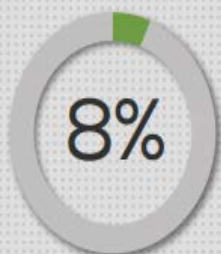20% of youth ages 13-18 live a with mental health condition[1]

11%
11% of youth have a mood disorder[1]

10%
10% of youth have a behavior or conduct disorder[1]

8%
8% of youth have an anxiety disorder[1]

Impact

50% 50% of all lifetime cases of mental illness begin by age 14 and 75% by age 24.[1]

10 yrs The average delay between onset of symptoms and intervention is 8-10 years.[1]

37% 37% of students with a mental health condition age 14 and older drop out of school—the highest dropout rate of any disability group.[1]

70% 70% of youth in state and local juvenile justice systems have a mental illness.[1]

Suicide

3rd Suicide is the 3rd leading cause of death in youth ages 10 - 24.[1]

90% 90% of those who died by suicide had an underlying mental illness.[1]

Sources: https://www.nami.org/NAMI/media/NAMI-Media/Infographics/Children-MH-Facts-NAMI.pdf

Altering One's Consciousness & Reducing Pain the Supply side

* Pharmaceutical companies

* Prescriptions by health care professionals

* Diversion by users

* Pill mills and drug traffickers

* Health insurance policies

What else might influence our desire to alter one's consciousness and to seek relief from the pain we experience to improve our welfare and sense of well-being?

Let's talk about society's welfare or "well-being" not just "health"

It is estimated that SES, healthy behaviors, and clinical care account for ~ 40%, 30% and 20%, respectively, of modifiable contributors to healthy outcomes.[1]

As an Addictions Counselor working with Native Hawaiians and as Director of MICHR (CTSA) Community Engagement Core working in Flint and Detroit with African American and American Indian populations I learned that when people are seeking relief from pain and pursuing well-being…

* Culture matters
* Culturally available, accessible, and adequate prevention & treatment services matter
* Reducing stigma matters
* Legal, social and economic contexts/policies matter

Source: [1]Hood et al. 2016. County health rankings: Relationships between determinant factors and health outcomes. *AJPM, 50*, 129-135.

Altering One's Consciousness & Reducing Pain the Demand side

Worldwide Threats

* Despite recent economic gains, social progress, and tremendous advances in medical and technological innovations, people live in a time of extraordinary economic, social, political, and climate uncertainty, and soaring inequalities.

* Unparalleled geopolitical crises – wars, terrorism, large population displacements, increased move towards authoritarian regimes, nationalism, etc…

* Increased intolerance, injustice, discrimination towards "the other": Hate groups are on the rise (or at least are more boldly making their presence known). Anti-Semitism, homophobia, and racial prejudice, among other 'isms', are making themselves known.

Altering One's Consciousness & Reducing Pain the <u>Demand</u> side

Erosion of the Social Safety Net in the U.S.

* Increased job insecurity, decreased health coverage

* Decreased support for unemployment compensation

* Decreased support to Aid to Dependent Children: Hunger and food insecurity are serious problems in our country.

* Ongoing attacks on Medicaid and Medicare, Supplemental Security Income Program (SSI), Women, Infants and Children (WIC), Earned Income Tax Credit, Temporary Assistance for Needy Families (TANF)

* Relentless attempts to undermine The Patient Protection and Affordable Care Act (ACA)

Altering One's Consciousness & Reducing Pain the Demand side

Decreased support to Educational Programs

* Cuts to Individuals with Disabilities Education Act; Title I funding for disadvantaged students (k-12 funding) (flat)
* Cuts to Student Support and Academic Enrichment Grants, Title IV of the Every Student Succeeds Act (funds for health, art, school climate, technology)

Head Start

Congress increased Head Start funding by over $600 million BUT the government's public narrative, to drastically cut Head Start programs particularly for undocumented

children or children of undocumented parents, is harmful to society's sense of well-being.

Other

* Mistrust of our institutions
* Gun violence
* Keeping up with the Kardashians?

Putting it all together:
Addressing SDoH & aiming for optimal social welfare and population well-being

Summary Recommendations for Vital Directions

1. Strengthen assessment and action on health-impacting social policies.
2. Expand policies that increase resources and environments fostering healthy behaviors.
3. Extend the reach and transform the financing of health care services.

Source: Adler, N.E. et al. (2016). Addressing social determinants of health and health disparities: A vital direction for health and health care. *NAM Perspectives.* Discussion Paper, National Academy of Medicine. p. 10.

Corollary: We often speak of the SDoH, but what are the "social determinants of well-being"? Well-being is "the sense of life satisfaction of the individual" as introduced by Evans and Stoddart in their classic paper on the determinants of health, in which they postulate that well-being is the ultimate objective of health policy [35]. Advancing "social determinants of well-being" versus health does not have the automatic association with hospitals, clinics, visits, tests, procedures, and medication that the term health has. This concept is promoted by Kottke, Stiefel, and Pronk who suggest we engage others and avoid medicalizing by focusing on "well-being in all policies" rather than health in all policies [36,37].

Source: Magnan, S. (2017). Social determinants of health 101 for health care: five plus five. *NAM Perspectives.* Discussion Paper, National Academy of Medicine, Washington, DC. https://nam.edu/social-determinants-of-health-101-for-health-care-five-plus-five/

Putting it all together

Certainly, we do need efforts to be increased in these areas:

* Proper regulation of availability and distribution of drugs.

* Use of Big Data to identify those most at risk, flag improperly filled prescriptions or medical claims.

* Adequate health insurance coverage for multi-modal treatments not just to pay for drugs.

* Education of health care professionals about addiction

<u>Source</u>: A framework for educating health professionals to address the social determinants of health. (2016).Consensus report, NASEM.
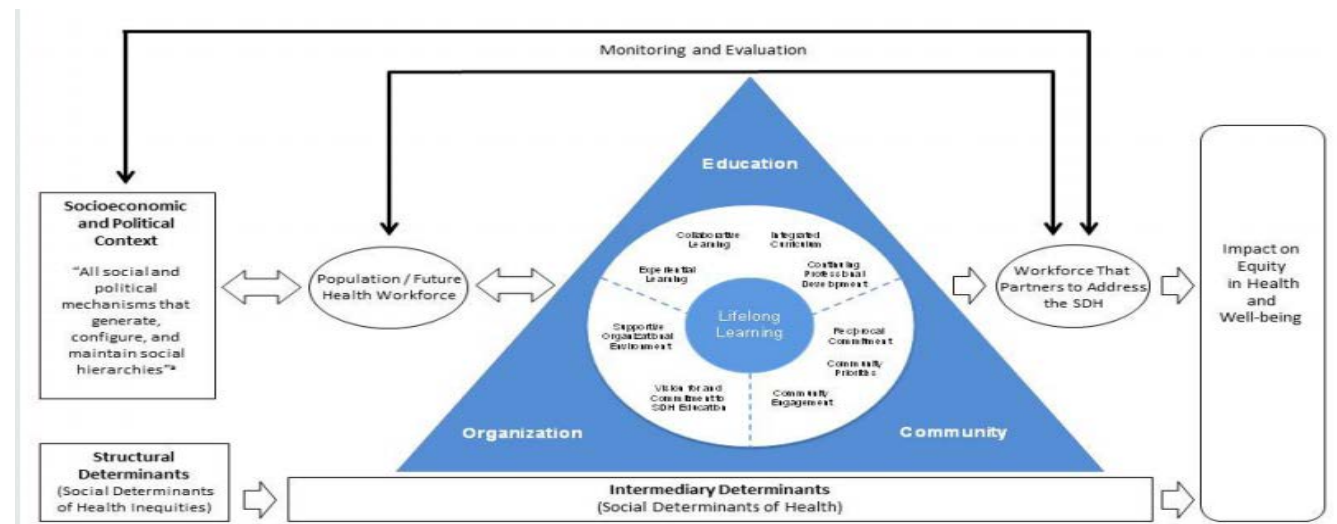
Putting it all together

* Increased prevention & treatment efforts by taking into consideration the SDoH

* Understand the needs of different populations as the epidemic impacts populations differently (e.g., gender, homeless, formerly incarcerated individuals, people with a history of mental health and substance use disorders, family history of SUDs, unemployment experiences, racial and ethnic minority populations).

* Partner with law enforcement

* Include social workers in your teams

MOBILIZE FOR CHANGE
Let's not sit on the sidelines

Let's work towards enacting policies that will optimize the populations' welfare and well-being

Don't stop marching

 Million Man March, Black Lives Matter, Women's March, March for Our lives, March for Science

Partner with communities to

 Continue working towards offering universal health care

 Make housing & education more affordable and eliminate hunger and food insecurity

 Support family leave programs and other employment benefits

 Strengthen our social welfare and public health infrastructures

 Combat the structural and individual practices to eliminate hate and intolerance

INJUSTICE ANYWHERE IS A THREAT TO JUSTICE EVERYWHERE

WE ARE CAUGHT IN AN INESCAPABLE NETWORK OF MUTUALITY, TIED IN A SINGLE GARMENT OF DESTINY. WHATEVER AFFECTS ONE DIRECTLY, AFFECTS ANOTHER INDIRECTLY

Source: Letter from a Birmingham Jail. Reverend Martin Luther King, April 16, 1963.