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# Opioid Crisis in Washington

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# Our Approach

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We examined WTN's data on opioid overdoses and opioid prescriptions we found an astounding connection between the two:



Overdoses are increasing, while opioid prescriptions are decreasing



This guided us towards focusing on **what** specific opioids are being prescribed and **who** they are impacting.

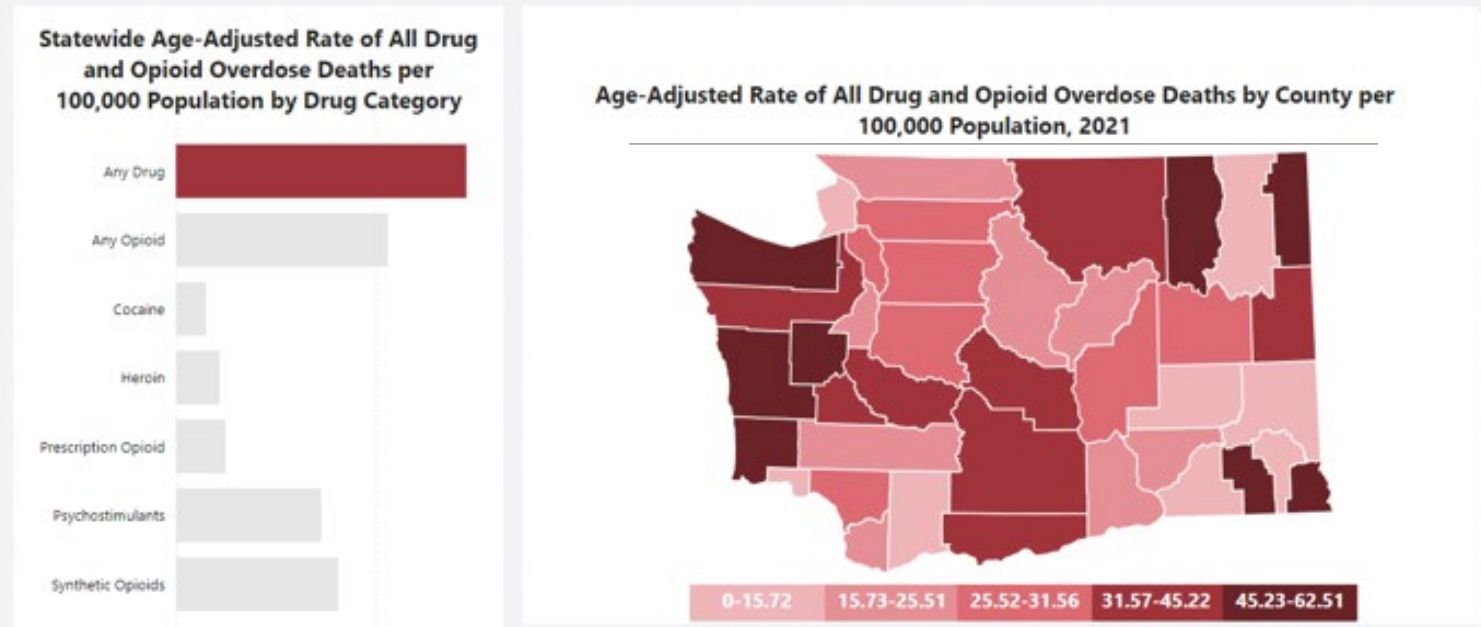
# Important findings and information

Over the past 15 years, 17,502 Washington residents died from drug overdose, 68% of those involved opioids.

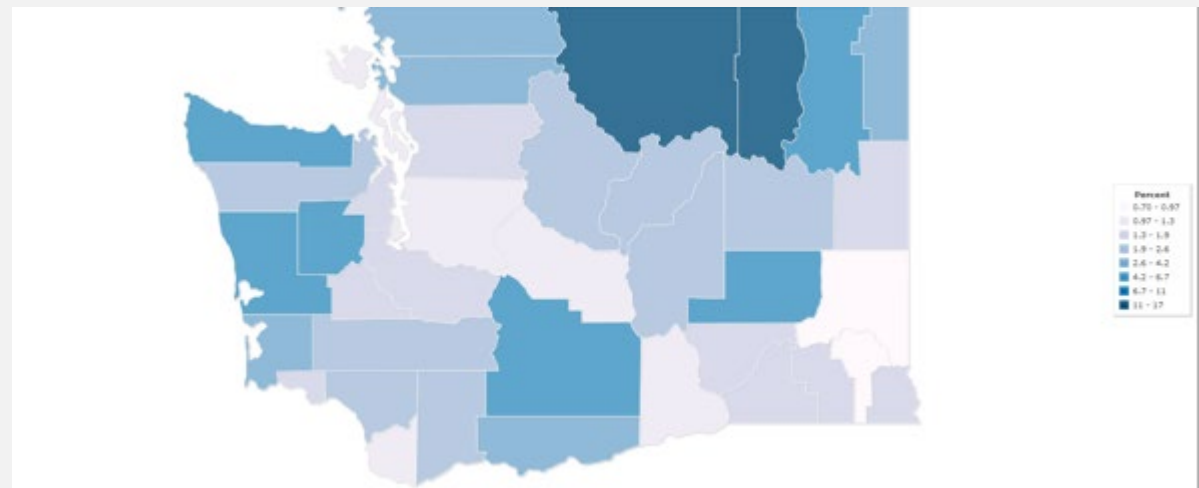
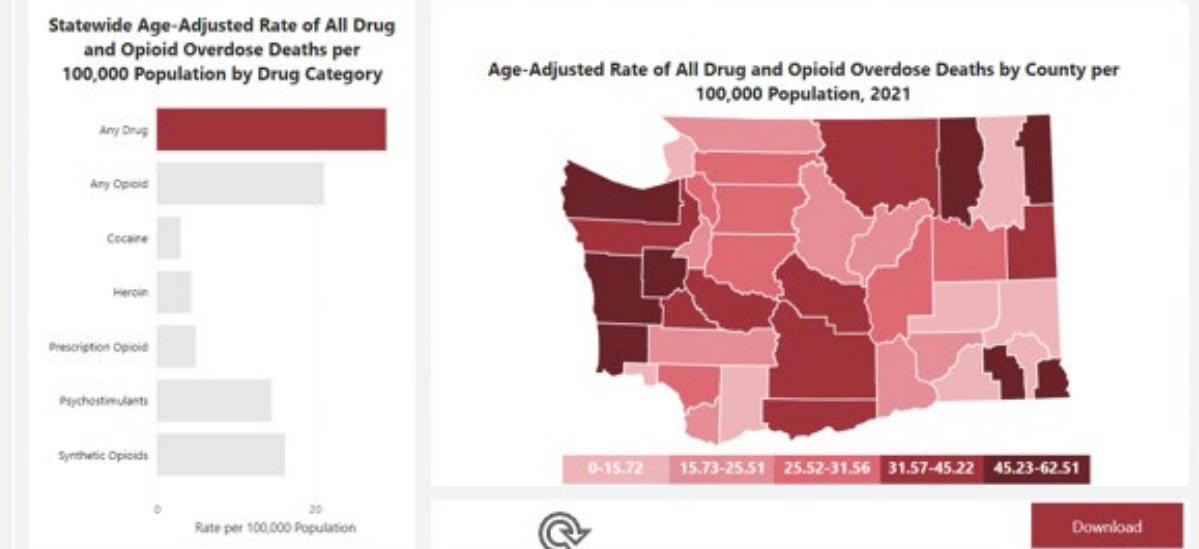
The annual number of opioid overdose deaths has almost doubled since 2019. From 827 deaths to 1619 deaths in 2021.

Of these deaths, American Indian/Alaska Native communities are affected the most in the highly affected counties.

- This graph displays the percentage of opioid related deaths that occur in Washington State.
- It is shown how counties with a high population density along with counties with high Native American populations have the highest Opioid Overdose Deaths per 100,000.
- The higher the population density, the higher the percentage of deaths, and counties with higher Native American Populations generally have a high percentage of opioid overdose deaths.

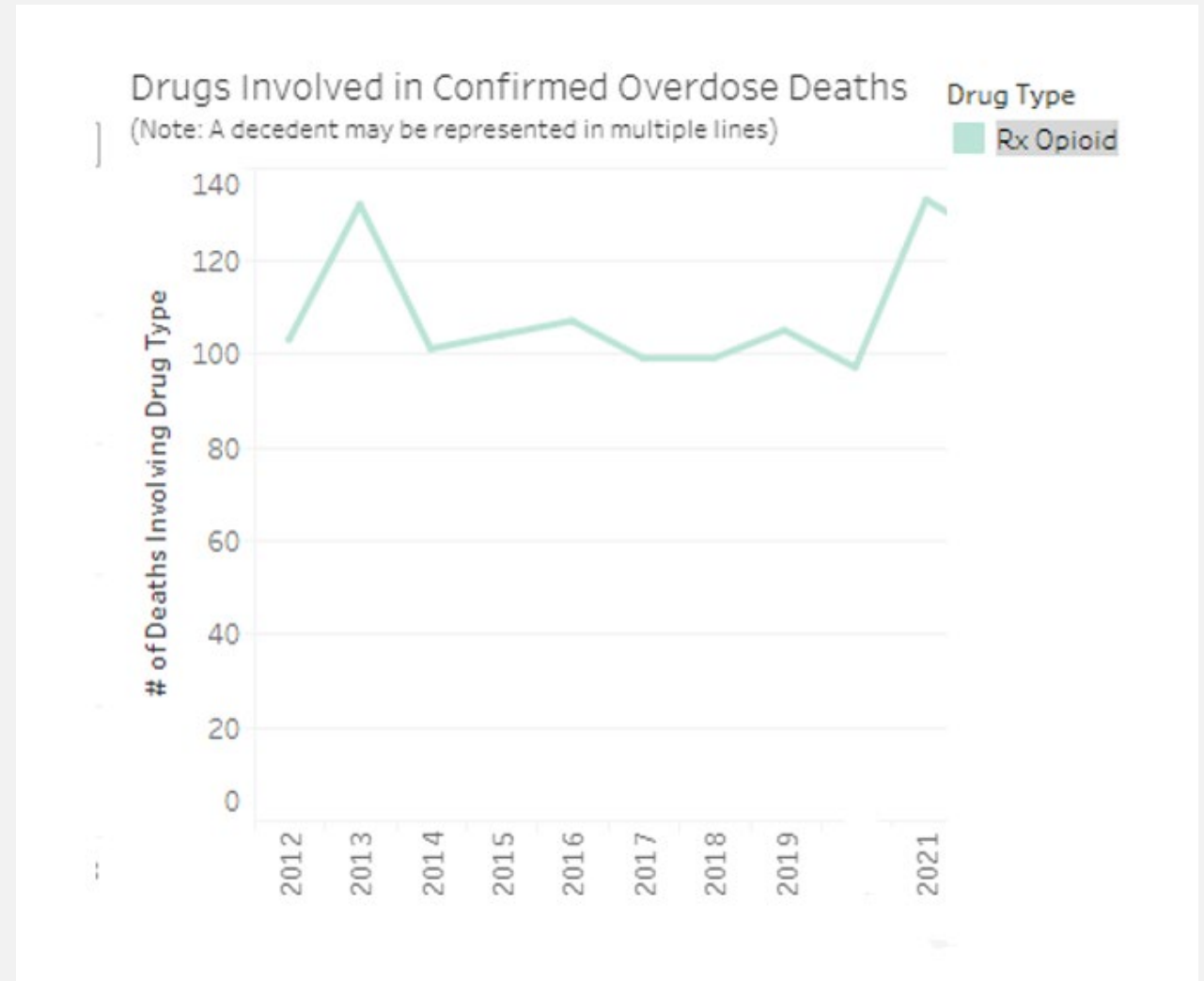


- The blue map displays Native American populations by percentage in Washington State counties.
- The red graph displays the death rate related to drugs in each county.
- There is a correlation of death rates being higher in counties with a higher percentage of Native American peoples.

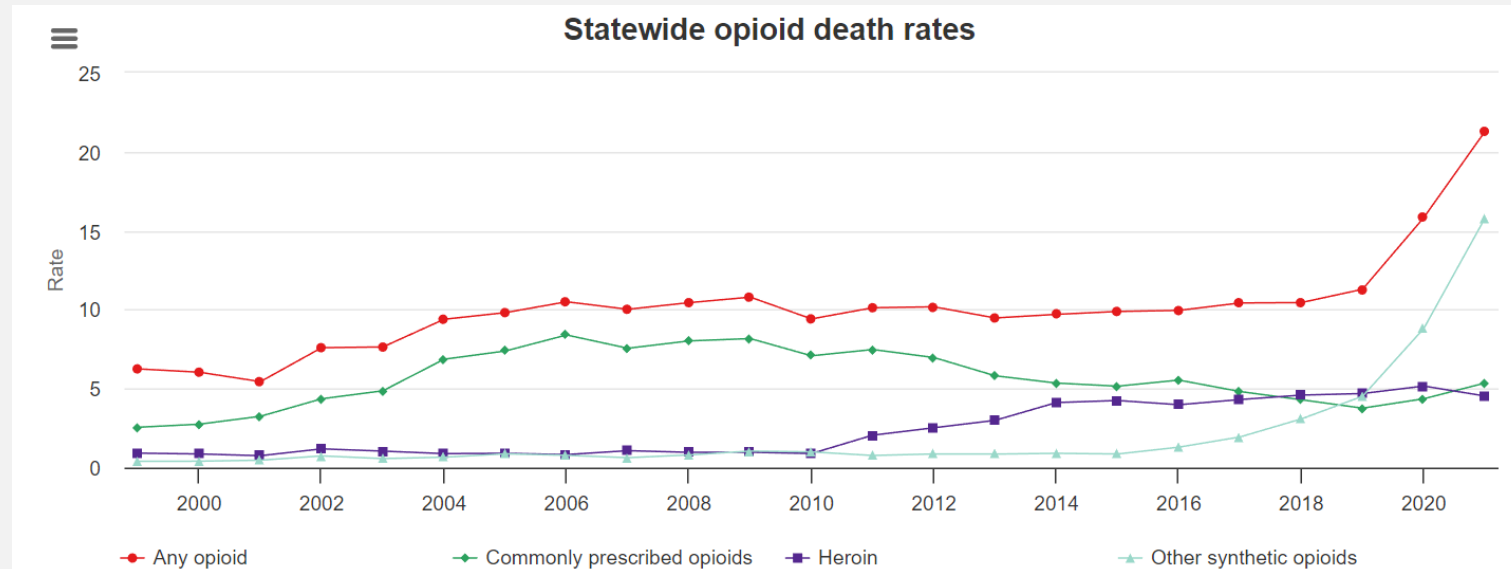




The negative correlation between prescription rates and overdoses due to prescribed drugs indicates that the opioids are becoming **more deadly**.



- **Synthetic opioids** are more correlated with the spike in opioid overdoses because deaths due heroin and commonly prescribed opioids are relatively insignificant.
- This explains the negative correlation between prescriptions and overdoses from 2018-2020





## Disparities by Race and Ethnicity:

- Age-adjusted rate of fatal overdose is greatest in the American Indian/Alaska Native community. It is about **5-times greater** than non-Hispanic white residents.
- Fatal overdose rates for black communities is higher in comparison to white.
- Fatal overdose rates of Black versus white residents has grown from about 0.4 times greater in 2013-19 to 2.5 times greater in 2021.

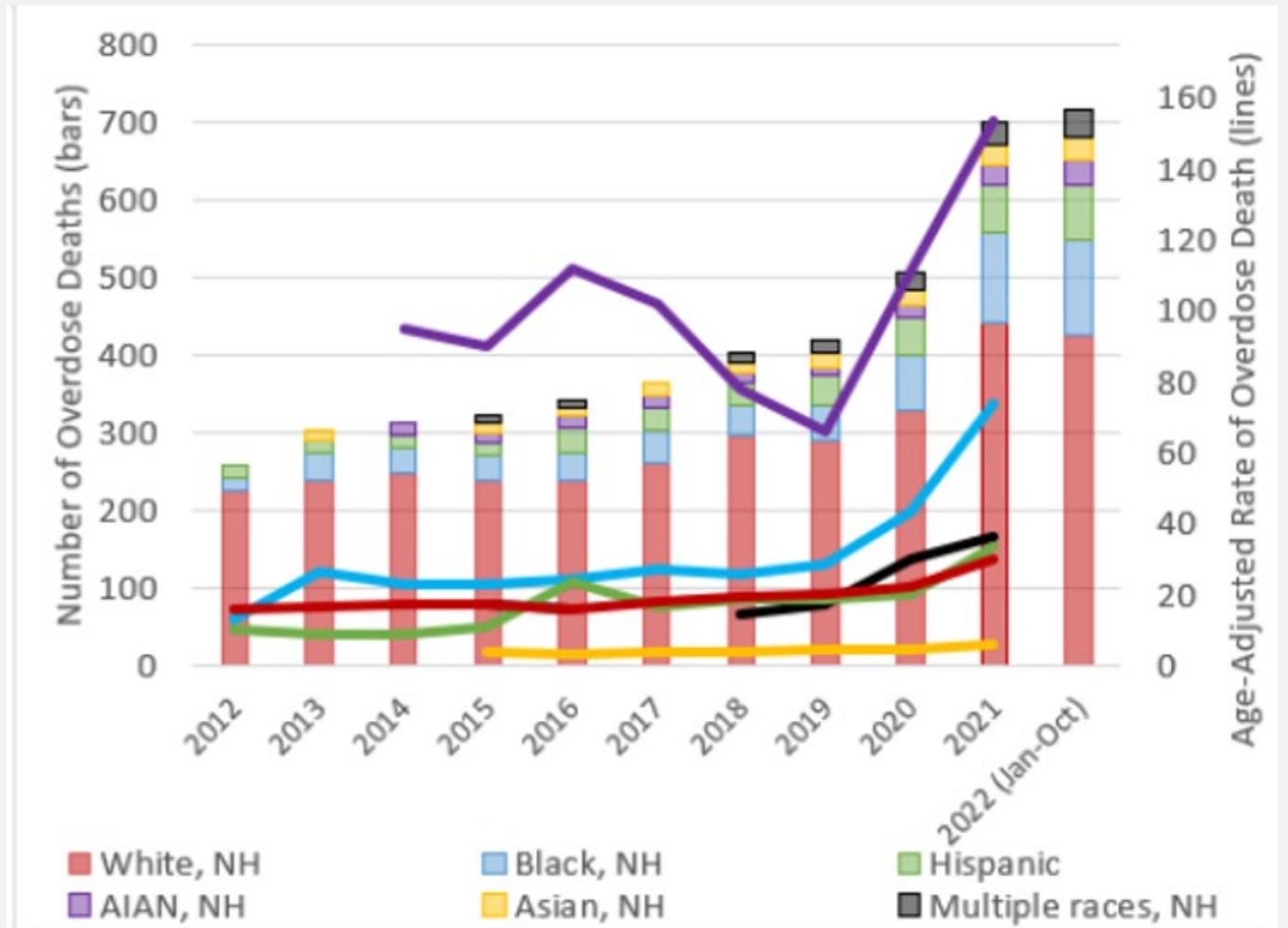


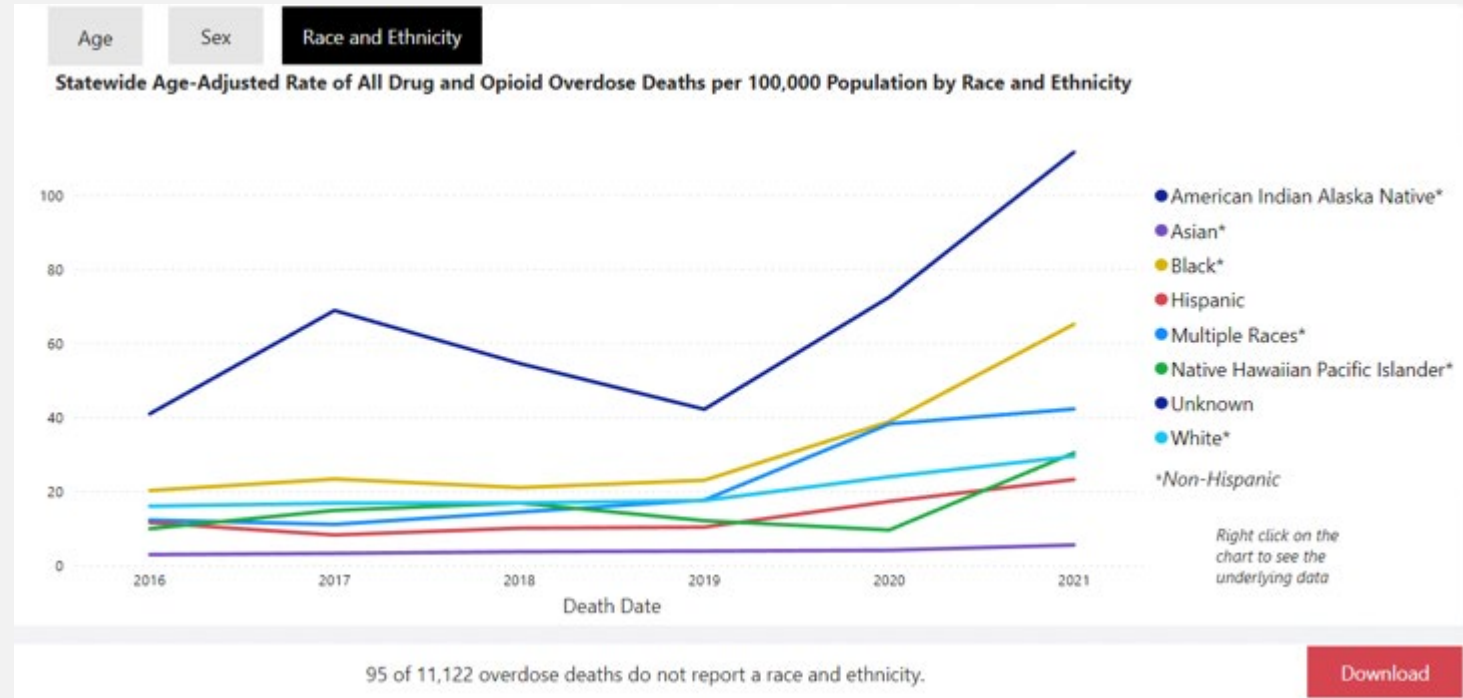
Figure 3: Racial and Ethnic Disparities in Overdose Deaths

Note: The bars represent the absolute number of overdose deaths occurring in each racial/ethnic group. The lines correspond to the age-adjusted rates, a unit of measure that accounts for the underlying population size and age-structure of racial/ethnic groups, facilitating comparisons between groups and across years.

- This image displays the overall rate of drug/opioid overdose deaths by Race and Ethnicity ranging from 2016-2021.

- There is a massive disparity between American Indian and Alaskan Native rates in comparison with the rest of the population.

- Death rates for groups such as Black and Multiple Races are still high, but the rates of **Native populations** are the most significant outlier.



# Equity Impact

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Opioid deaths have been rising across the country; however, the crisis has been growing disproportionately among Native American communities

This trend is caused by historical trauma, violence, poverty, discrimination and racism, lack of insurance, inadequate transportation, lack of education, and an increased risk for many health issues within these communities.

# Potential Solutions

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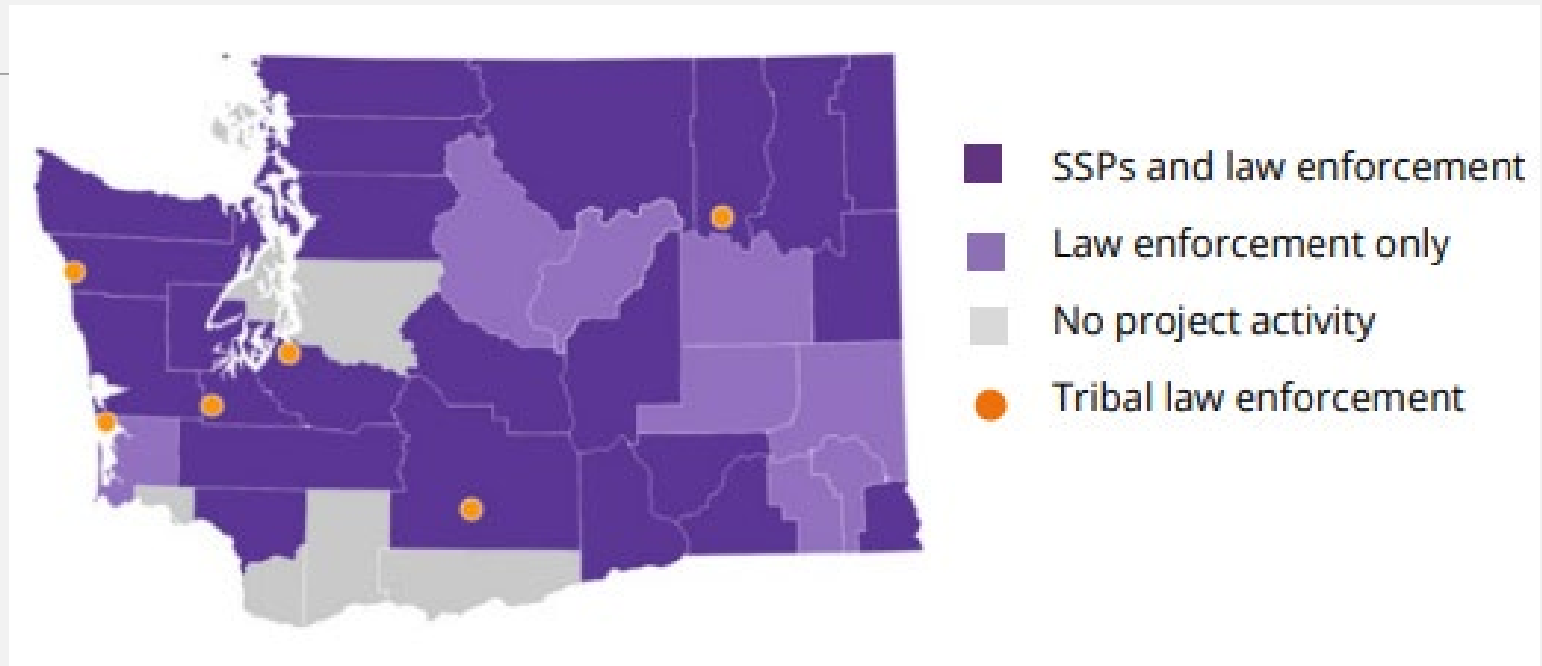
A Washington University project started by its Addictions, Drug & Alcohol Institute spanning from 2016 to 2021 has been distributing and training members of the community on using **Naloxone** to **prevent** and reverse opioid overdoses.

## PROJECT AT A GLANCE

### 5 YEARS OF DISTRIBUTION

<b>55,155</b> NALOXONE KITS	<b>16,214</b> RECIPIENTS TRAINED	<b>9,526</b> OVERDOSE REVERSALS
<b>50,730</b> Lay responders <b>4,425</b> Law enforcement 11,031/year avg	<b>14,677</b> Lay responders <b>1,537</b> Law enforcement 3,243/year avg	<b>9,240</b> Lay responders <b>286</b> Law enforcement 5 reversals per day avg

This graph shows where the project has affected and who has participated in the distribution of Naloxone. They were in **32** counties, involving **107** law enforcement units, **6** tribal police units, **24** SSPs (Syringe Service Programs)



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# Other Solutions

The National Institutes of Health has put in place a *Heal Initiative* which seeks to incorporate medication-based treatment into **Native healing traditions** to help combat addiction within their communities. This allows for more effective distribution of treatment to Native Americans.

A settlement for 590 million dollars between Johnson and Johnson along with other distributors and the Native American tribes. What this settlement has the potential to do is to create more drug treatment opportunities for these communities and others to help reduce opioid misuse.

# Significance of new Ideas/Approaches

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The success of the Naloxone training and distribution program indicates that programs that help respond to opioid misuse are effective and should be utilized in Washington and in other states.

**Preventative measures** are proven to be crucial towards improving the overall health of those in Washington. Looking at Native American data trends, it shows they have many risk factors that increase their chances of misusing opioids. Many of their risk factors are linked to the **lack of options** for treatment and education on substance abuse.

Providing transportation to

# Significance of new Approaches

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Native American culture puts a large emphasis on **cultural identity** and **spirituality**, which should be taken into consideration when implementing new programs, this would reduce stigma surrounding drug-abuse. Destigmatizing drug-abuse will encourage more Native Americans to seek treatment earlier and increase their chances of following-through treatment programs.

This **culturally sensitive** approach used by *Health Initiative* develops treatment and education programs that reach a larger audience, especially those that use drugs as a coping mechanism. These groups rarely seek help because they feel a physiological and psychological dependence on drugs.



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# Reflection

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The reason we chose this topic was because we were first introduced to opioids and the opioid crisis from our required high school health class, however we never had the chance to go more in depth into the topic and it felt very brushed over. From our personal experience living around Seattle, we have seen firsthand the effects of drugs in our communities and recognize how big of an issue this was which drove us to dig deeper.

# Challenges we faced (Reflection)

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Our initial goal was to research issues regarding all drugs, however, the first challenge we encountered was that it was difficult to track the distribution of illegally distributed drugs. Because of this, we had to shift our focus more on prescription drugs and their specific effects on our community

The second challenge we faced was gathering data about the Native American population and how drugs impacted them. Because they are such an underrepresented group, information regarding the opioid crisis in their communities was much more limited, further showing why we need to support this groups more to help solve this crisis.