Observations on Upstream Measures Needed to Protect Youth from the Harms of Substance Use

Joint Committee on Addiction and Community Safety Response Informational for January 2024 Legislative Days

Wed Jan 10, 2024

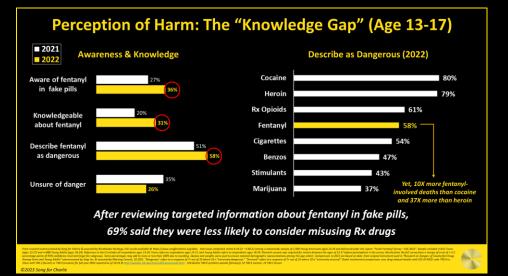
Jon Epstein

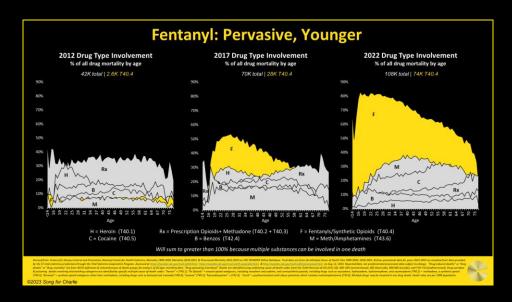
A New Landscape





- Cal
- Synthetic flood & deception
- Naive users
- Evolving crisis





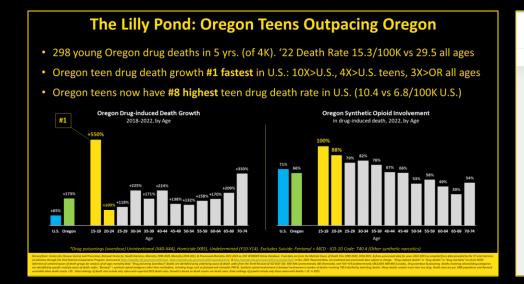
Some Success at the Tip of the Iceberg

Synthetic Opioids | Fake Pills | Recognizing Overdose | Good Sam Laws | Naloxone



- Community response
- Family & youth pull
 / bi-partisan
- Fentanyl Tool Kit & HIDTA bulletin
- SB238/HB2395
- HR5625 FACTS Act
- Family Awareness

Deeper Problems



Measure 110 audit finds slow rollout of services, lack of youth, culturally responsive programs

Mental Health

M110 & M91

lacked prevention

The Lilly Pond

prevention gap

Systemic

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Lund Report Independent health news for Oregon and SW Washington

HEALTH NEWS: CHILDREN RURAL BEHAVIORAL EQUITY AGING MORE V | HEALTH HIRES job

State inaction left Oregon teens vulnerable to fentanyl's fatal spread

A lack of prevention, education and youth addiction programs opened the door to tragedy as dealers added the potent opioid to local drug markets



More like this

New clinic in Portland poised treat fentanyl addiction in you and adults PREMIUM FEB 7, 2023

New year brings new laws on insurance coverage, Narcan availability and more PREMIUM

Judge's psychiatric discharge deadlines spawned 'legal limt service gaps, locals say | PREMIU NOV 8, 2023

Governor, lawmakers need to action on Oregon kids' menta health, advocate says PREMIUM OCT 31, 2023

Oregon Capital Chronicle

POLITICS ENVIRONMENT EDUCATION ECONOMY HEALTH OREGON'S PEOPLE

GOVERNMENT HEALTH

OHA Ombuds report calls for improvements to children's behavioral health

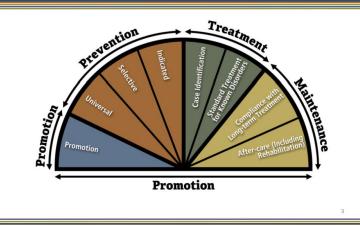
Report calls for Oregon to address disparities that prevent children and youth from accessing life-saving behavioral health services

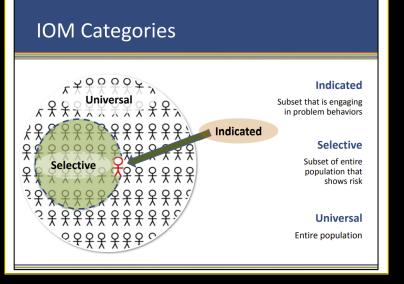
BY: BEN BOTKIN - JANUARY 3, 2024 6:51 PM

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Prevention and the Continuum of Care in Behavioral Health





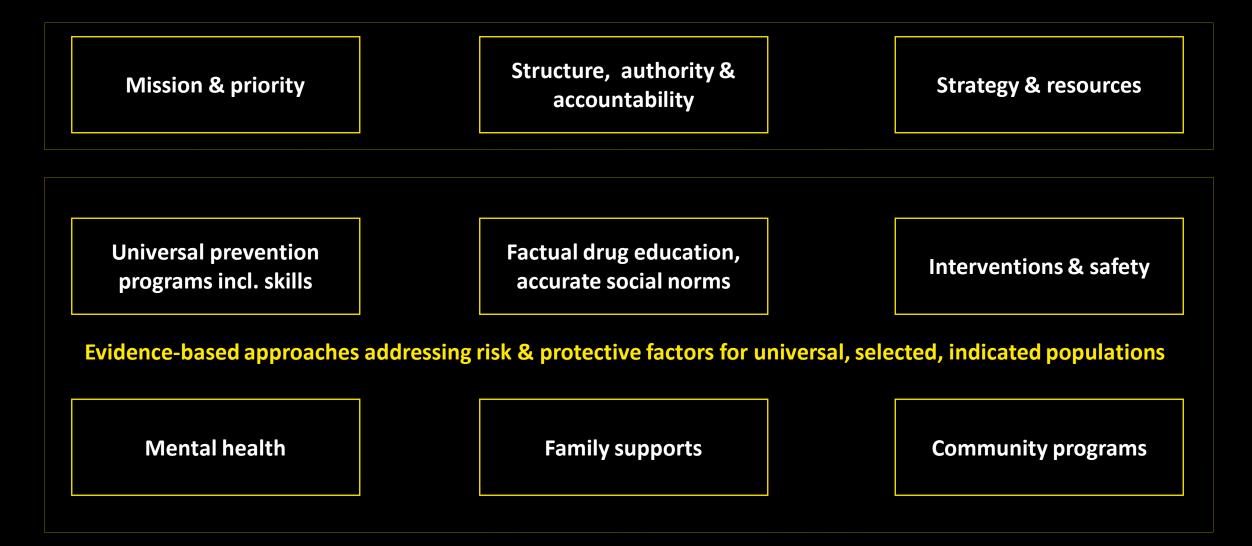
The River



If we never stop or reduce how many people enter a cycle of harmful substance use to begin with, we'll forever be subject to the growth of this crisis and its tragic consequences.

<u>Community Prevention Initiative, California</u> Department of Health Care Services

Prevent, Reduce, Delay Initiation & Use

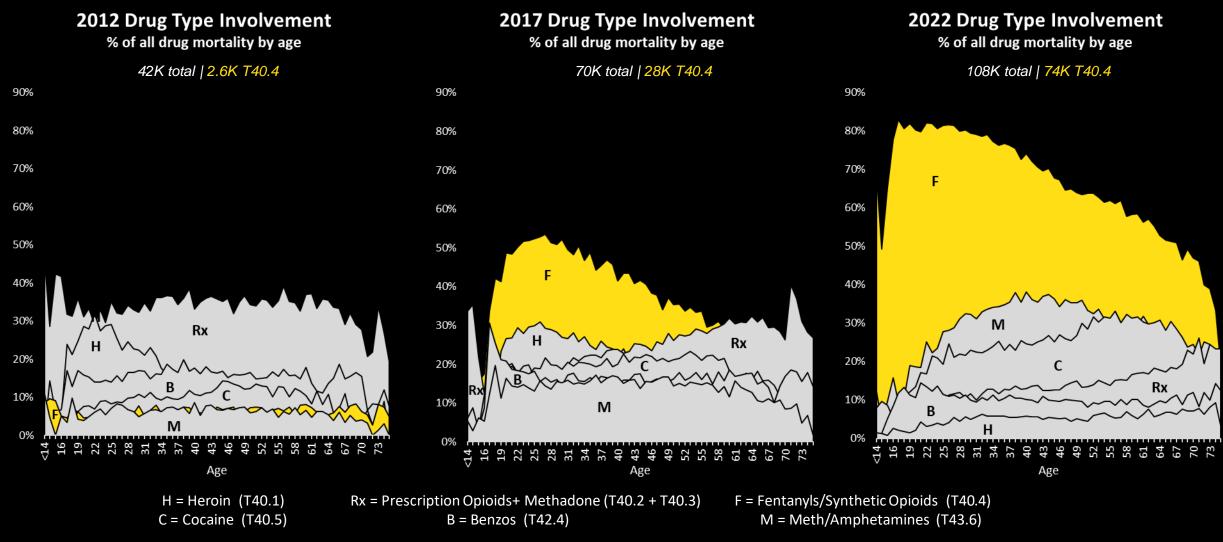


Summary

- The drug landscape is rapidly evolving and youth are more at risk than ever before.
- Fentanyl has catalyzed progress in promotion / awareness, results TBD
- Primary prevention is a necessary pillar of effective drug policy. Unchecked youth behavioral harms lead to harm to them now... and add to the future burden
- Primary prevention is a systemic gap in Oregon
- Variables in Oregon have increased risk, with no additional protection
- Prioritize upstream/youth efforts as a must-have
- Ensure a systemic & accountable primary prevention approach; increment capacity as soon as possible.
- Monitor & adjust

Backup: supporting information

Fentanyl: Pervasive, Younger

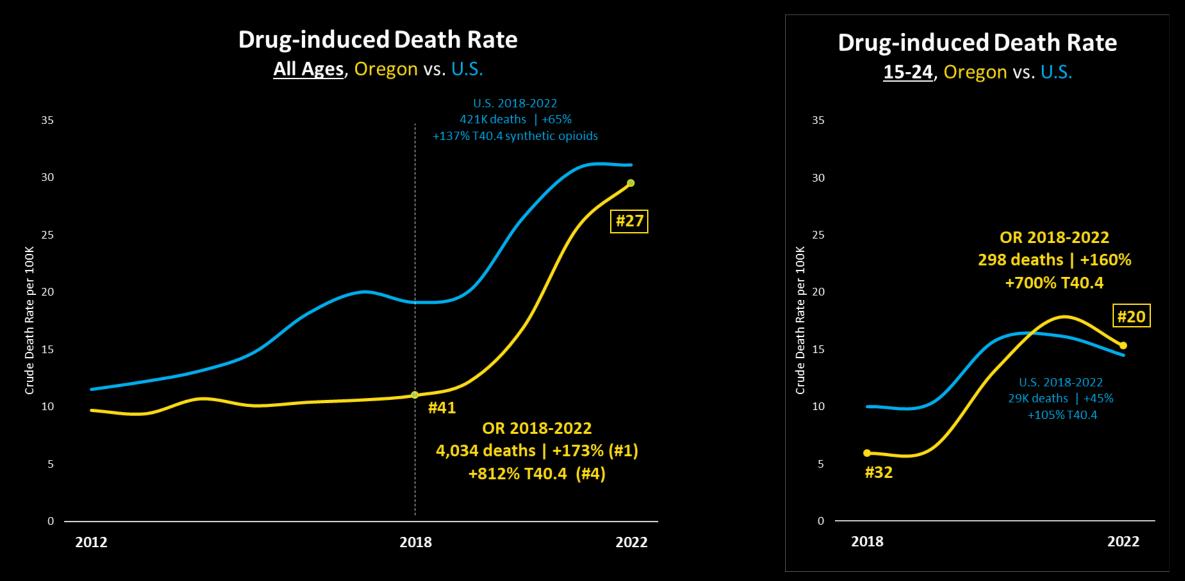


Will sum to greater than 100% because multiple substances can be involved in one death

Derived from: Centers for Disease Control and Prevention, National Center for Health Statistics, Mortality 1999-2020, Mortality 2018-2021, & Provisional Mortality 2018-2021, & Provisional Mortality 2018-2021, & From provisional data for years 2022-2023 as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at https://wonder.ccc.gov/mcd-icd10-spanieded.html on Aug 12, 2023. Reported data, not predicted and provisional data for years 2022-2023 as compiled from data provided data, or treatistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at https://wonder.ccc.gov/mcd-icd10-spanieded.html on Aug 12, 2023. Reported data, not predicted and provisional data subject to change. "Drug-induced deaths," or "drug deaths" or "drug mortality" are from XLS definition of selected acues of death groups for analysis of all ages mortality data: "Drug poisoning deaths involving selected drug categories are identified using underlying cause-of-death codes: "heroins, including morphine and acdeine, and semisynthetic opioids, including morphine, and oceline, and semisynthetic opioid, analysis of IAO-X44 (unitational), XRO opioids" = natural opioid analgesis, including morphine, and oceline, and semisynthetic opioid, including drugs such as fentanyl and tramadol (T40.4); "cocaine" (T40.5); "benzodiazepines" = (T42.4); "meth" = psychostimulants with abuse potential, which includes methamphetamine (T43.6). Multiple drugs may be involved in one drug death. Death rates are per 100K population.

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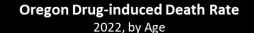
Oregon Outpacing U.S.

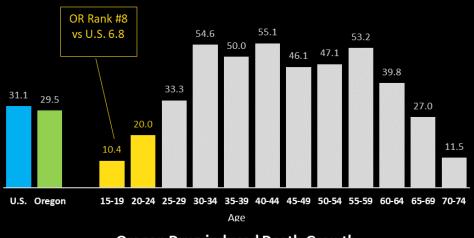


*Drug poisonings (overdose) Unintentional (X40-X44), Homicide (X85), Undetermined (Y10-Y14). Excludes Suicide. Fentanyl = MCD - ICD-10 Code: T40.4 (Other synthetic narcotics)

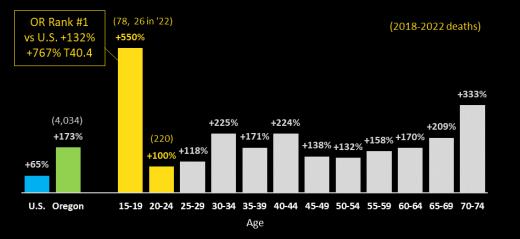
Derived from: Centers for Disease Control and Prevention, National Center for Health Statistics, Mortality 1999-2020, Mortality 2018-2021, & Provisional Mortality 2022-2023 on CDC WONDER Online Database. Final data are from the Multiple Cause of Death Files 1999-2020, 2018-2021, & from provisional data for years 2022-2023 as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at https://wonder.cdc.gov/mcd-icd10-provisional.html to Ct, 2023. Reported data, not predicted and provisional data for years 2022-2023 as compiled from data provided by the 57 vital statistics for the Vital Statistics Cooperative Program. Accessed at https://wonder.cdc.gov/mcd-icd10-provisional.html to Ct, 2023. Reported data, not predicted and provisional data for years 2022-2023 as compiled from data provided by the 57 vital statistics for the Vital Statistics Cooperative Program. Accessed at https://wonder.cdc.gov/mcd-icd10-provisional.html in Oct, 2023. Reported data, not predicted and provisional data for years 2022-2023 as compiled from data provided by the 57 vital statistics for the Vital Statistics Cooperative Program. Accessed at https://wonder.cdc.gov/mcd-icd10-provisional.html in Oct, 2023. Reported data, not predicted and provisional data for years 2022-2023 as compiled from data provided by the 57 vital statistics for the Vital Statistics Cooperative Program. Accessed at https://wonder.cdc.gov/mcd-icd10-provisional.html in Oct, 2023. Reported data, not predicted and provisional data for years 2022-2023 as compiled from data provisional data provisional data subject to change. "Drug-induced deaths" or "drug deaths" or "drug deaths" or "d

Youth Fentanyl Impact in Oregon



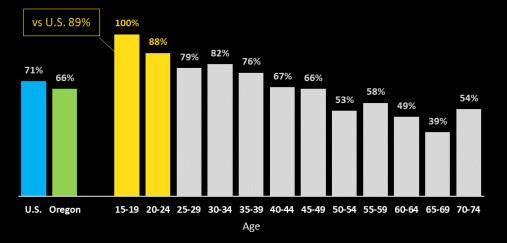


Oregon Drug-induced Death Growth 2018-2022, by Age



Oregon Synthetic Opioid Involvement

in drug-induced death, 2022, by Age

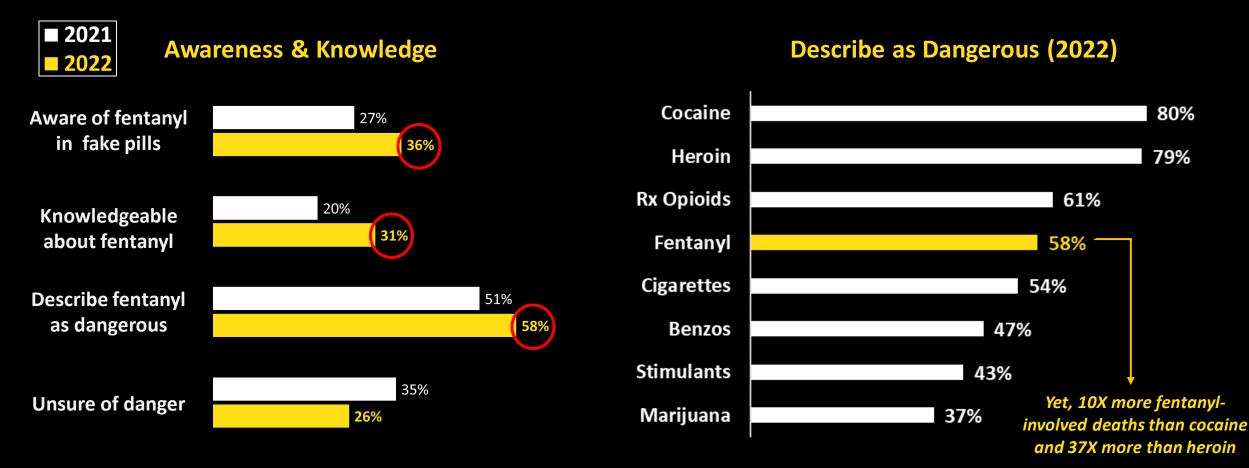


- 2018-2022: 298 young OR drug deaths out of ~4,000
- OR Teens 8th highest teen death rate in US: ~2x the US
- #1 fastest teen growth: 4x US teen growth, 3x faster than all OR, far faster than other OR age groups
- 100% fentanyl in teen deaths: 2022 OR youth drug deaths involve fentanyl more than other OR age groups

*Drug poisonings (overdose) Unintentional (X40-X44), Homicide (X85), Undetermined (Y10-Y14). Excludes Suicide. Fentanyl = MCD - ICD-10 Code: T40.4 (Other synthetic narcotics)

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Perception of Harm: The "Knowledge Gap" (Age 13-17)



After reviewing targeted information about fentanyl in fake pills, 69% said they were less likely to consider misusing Rx drugs

From research commissioned by Song for Charlie & executed by Breakwater Strategy. Full results available @ https://www.songforcharlie.org/data. Interviews conducted online 8.19.22 - 9.30.22 among a nationwide sample of 1,500 Young Americans aged 13-24 and delivered under the report: "Youth Fentanyl Survey - Fall 2022". Sample included n=612 Teens

percentage points @ 95% confidence level and larger for subgroups. Some percentages may add to more or less than 100% due to rounding. Quotas and weights were used to ensure national demographic representations among this age cohort. Comparisons to 2021 are based on data from original instrument used in "Research on Dangers of Counterfeit Drugs" Among Teens and Young Adults" commissioned by Snap Inc. & executed by Morning Consult, 10.2021. "Dangerous" "Stressed" refers to a response of 7+ out of 10 where 10 is "extremely stressed". Death involvement comparisons uses drug-induced deaths with ICD-10-MCD code T40.4 vs.

those with T40.1 (heroin) or T40.5 (cocaine) for full year 2022 reported as of 10.23 @ http://wonder.cdc.gov/mcd-icd10-provisional.html.. 526 deaths T40.4 synthetic opioids (fentanyl), 52 T40.5 cocaine, 14 T40.1 heroin.

(ages 13-17) and n=888 Young Adults (ages 18-24). Reference to Gen Z includes all respondents ages 13-24, Teens refers to respondents ages 13-24, Teens refers to respondents ages 13-24. Parental consent was required for minors between the ages of 13-17 before participation in the survey. Results from the full survey have a margin of error of +-2.5

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Mitigations: An Outsized <u>Upstream</u> Opportunity

Drug Overdose Deaths Among Persons Aged 10–19 Years — United States, July 2019–December 2021, CDC 12.22

"Urgent efforts to prevent overdose deaths among adolescents are needed...collaboration among public health and safety agencies, physicians, mental health and substance use treatment providers, and educators to implement these efforts could save lives."

Supply	Public health & public safety partnership to reduce availability of illicit drugs
	 Education/awareness about dangers of IMFs & counterfeit pills
Prevention	 Preventing substance use initiation and promoting protective factors
	 Expand efforts focused on resilience & connectedness of adolescents
Harm Reduction	• Expanding naloxone access and train family & friends in overdose recognition and response
	 Promote safer drug use for those who use drugs, such as don't use alone & naloxone
Treatment	• Ensure access to effective, evidence-based SUD and mental health treatment.
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[©] Drug Overdose Deaths with Evidence of Counterfeit Pill Use — United States, July 2019–December 2021, CDC 9.23

"Overdose prevention messaging that highlights the dangers of pills obtained illicitly or without a prescription, encourages drug product testing by persons using drugs, and is tailored to persons most at risk (e.g., younger persons) could help prevent overdose deaths."



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Fentanyl Ed. in the Universal Youth Population

nature/risk of synthetic opioids • counterfeit pills • recognize & respond to OD • naloxone • good samaritan laws



<u>Community_involvement@beaverton.k12.or.us</u>

- BSD collaboration with Washington County Health & local law enforcement starting in Q1 2021
- Included in all MS/HS classroom health instruction and integrated into comprehensive school-wide approach
 - Includes substance use specialists, social workers
 - "Character Strong", culturally responsive, research...
- Broad parent outreach/ "Community Conversation"
- Staff development & training
- Naloxone/safety & supports /policy
- Free, available for download & use
 - <u>https://www.beaverton.k12.or.us/departments/</u> <u>communications-community-involvement/fake-and-fatal</u>
- Also: CLEAR Alliance "Counterfeit Pill Education Course"
 - <u>https://www.clearalliance.org/</u>

HR 5625: Fentanyl Awareness for Children and Teens in Schools (FACTS) Act Suzanne Bonamici (D)*, Lori Chavez-DeRemer (R), Kevin Kiley (R), Joseph Neguse (D)

- Creates a pilot grant program at the Department of Health and Human Services (HHS) for partnerships between local or state educational agencies (LEAs or SEAs), local or state public health agencies, and nonprofit organizations to provide education, awareness, and prevention regarding the misuse of synthetic opioids;
- Convenes an interagency task force led by the Secretaries of HHS and Education (ED) to coordinate and improve federal responses to synthetic opioid overdose and misuse in youth. The task force will also include officials from HHS, ED, and subagencies within each respective agency; parents of youth who died from an overdose of fentanyl or another synthetic opioid; and representatives from national nonprofit organizations working to raise awareness about and prevent misuse of synthetic opioids by youth;
- Makes amendments to the Elementary and Secondary Education Act to provide professional development for school personnel regarding synthetic opioid misuse and overdose, and make amendments to LEA and SEA plans required under the Elementary and Secondary Education Act to describe how they will engage teachers, school leaders, parents, and other entities to address and prevent the misuse of synthetic opioids by youth;
- Makes amendments to key federal education data collection efforts, including the Civil Rights Data Collection and the National Center for Education Statistics' School Crime and Safety Data, to identify the prevalence of synthetic opioids in public secondary schools and disciplinary outcomes for students using or in possession of synthetic opioids in public secondary schools;
- Allows school-based health centers to use their funding for Naloxone to increase the availability and accessibility of a critical overdose reversal drug in school settings; and
- Makes amendments to the National Institute on Drug Abuse's Monitoring the Future Survey, and conducts an evaluation of the effectiveness and reach of the CDC's State Unintentional Drug Overdose Reporting System.

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09/21/2023: Referred to the Committee on Education and the Workforce, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

https://bonamici.house.gov/media/press-releases/bonamici-kiley-introduce-bipartisan-bill-protect-students-fentanyl-poisoning