

# DHSS Briefing

## The Opioid Epidemic in Missouri





# SECONDARY RESEARCH

# Company

Department of Health and Senior Services



# Background History

- The organization was developed because the state could not prosper if the residents were not protected.
- The Department of Health and Senior Services allowed the department to more effectively focus on prevention and quality of life for all Missourians.

# Responsibilities of the DHSS

- Providing [public health services](#) and support to all citizens.
- Ensuring [regulation of facilities and service providers](#) that deliver care to Missourians.
- [Performing oversight of programs](#) and protections for our elderly and vulnerable residents.

# National Rankings

State of Missouri rankings in the United States:

- 39th in overall health in 2019 (according to United Health Foundation)
- 37th in health for women and children in 2019

# Financials

## Key Drivers of Revenue and Profit

- Local taxes, grants, contracts, fees and donations

## DHSS State Fiscal Year

- \$1.4 billion dollars of taxpayer money



# MO Hope Project

## Missouri Opioid-Heroin Overdose Prevention and Education (MO HOPE)

- The current company's effort to [opioid prevention](#).

**Goal:** To reduce opioid overdose deaths in Missouri through expanded access to overdose education and Naloxone, public awareness, assessment and referral to treatment.

# Category

Drug Prevention



# Economic Trends

Category is **growing**

- More opioid and drug misuse.

## Statistics:

- From 1999 to 2017, more than **702,000** people have died from drug overdose.
- **Leading cause of death for Americans under 50** - deadliest drug crisis in American history.

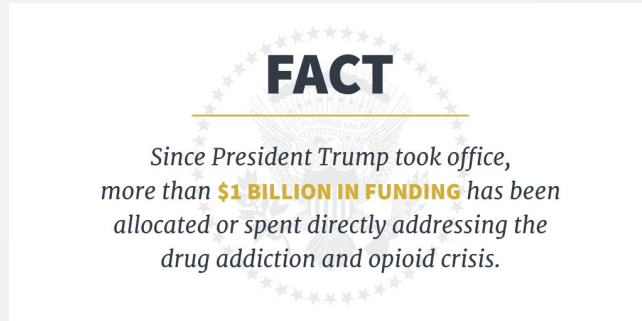
# Campaigns

- CDC Rx Awareness:
  - Real stories about the struggles of having an opioid addiction.
  - Importance of recovery programs and resources



# Campaigns

- **President Trump's Initiative**
  - **Part 1:** Reducing over-prescription
  - **Part 2:** Fixing international and domestic supply chains
  - **Part 3:** Helping those who struggle with addiction



# Campaigns

- **The Office of National Drug Control Policy (ONDCP)**
  - Preventing and reducing the misuse of opioids
  - Targets young adults of **18-24 year olds**



MORE THAN  
**2 MILLION AMERICANS**  
**WILL SUFFER FROM**  
ADDICTION TO  
PRESCRIPTION OR ILLICIT  
**OPIOIDS IN 2018**

# Consumer

15-24 year olds



# General Facts

## epidemic adjective

ep-i-dem-ic | \,e-pə-'de-mik

- 1 : affecting or tending to affect a disproportionately large number of individuals within a population, community, or region at the same time
- 2 : excessively prevalent
- 3 : characterized by very widespread growth or extent : of, relating to, or constituting an epidemic

Prescription drugs are the most commonly misused drugs in the country.

This is an epidemic.





In 2017 alone,

**70,000** **Americans**

died from overdoses, making it the **leading cause**  
of death in America.



Of those 70,000 deaths, about **68%** involved an opioid.

## opioid noun

opi·oid | \ 'ō-pē-ōid

*plural* opioids

: a natural, semisynthetic, or synthetic substance that typically binds to the same cell receptors as opium and produces similar narcotic effects (such as sedation, pain relief, slowed breathing, and euphoria):

### Common opioids include:


- Codeine
- Fentanyl
- Vicodin
- Morphine
- OxyContin
- Percocet
- Hydrocodone
- Heroin



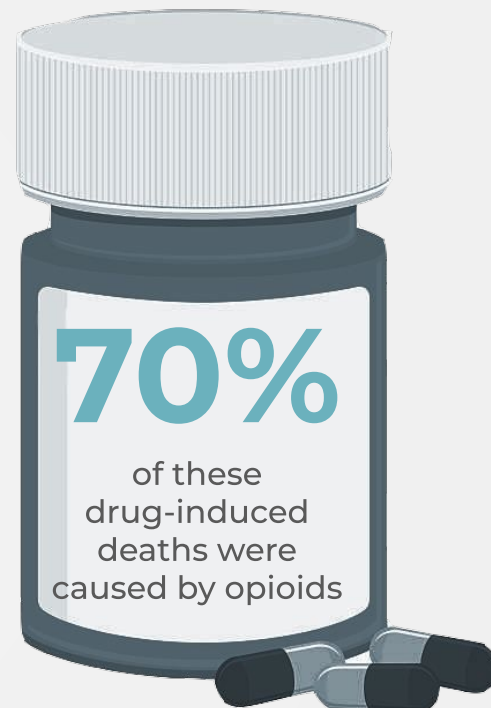
**130** Americans

die **every day** from an opioid overdose



A teal-colored map of the state of Missouri with a white border. Inside the map, there is white text.

As of 2016,  
drug-induced  
deaths were up  
**243%**  
in Missouri alone.



In 2018,

**32.5%** of 12th graders

believed that opioids were **easily accessible** to them, which is proven to play a factor in their use.

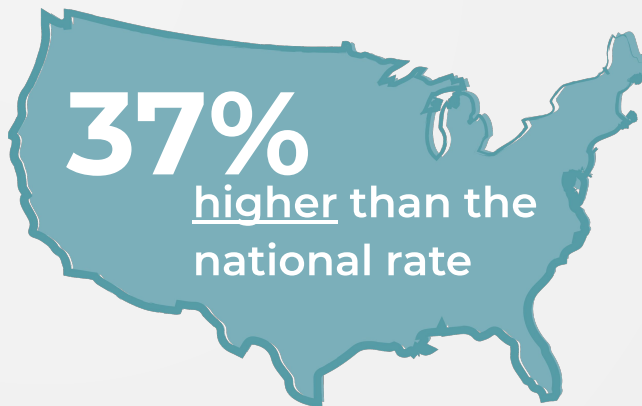
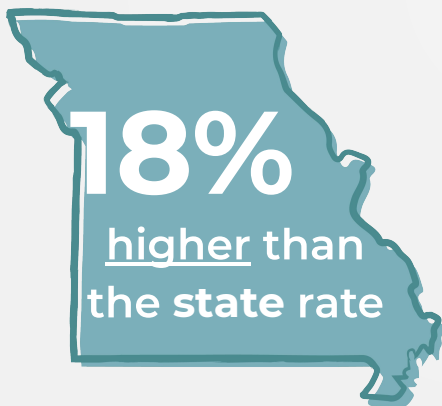
**60%** of teens who report abuse of prescription medicine are **getting them from friends**, family and acquaintances.



# Rural vs Urban Areas

Missouri's opioid mortality rate for **rural** areas is **21% lower** than the national average.

**Urban** areas have a mortality rate that is ...



**Urban counties** have seen a larger spike in **both** heroin and non-heroin overdoses than rural counties.

While many factors contribute to overdose, this seems to indicate that those in urban counties have easier access to opioids - including heroin.

# Competition

Finances, grants and the cost of the crisis





# Competitive Strategies

DHSS's strategy includes:



# Direct Competitors

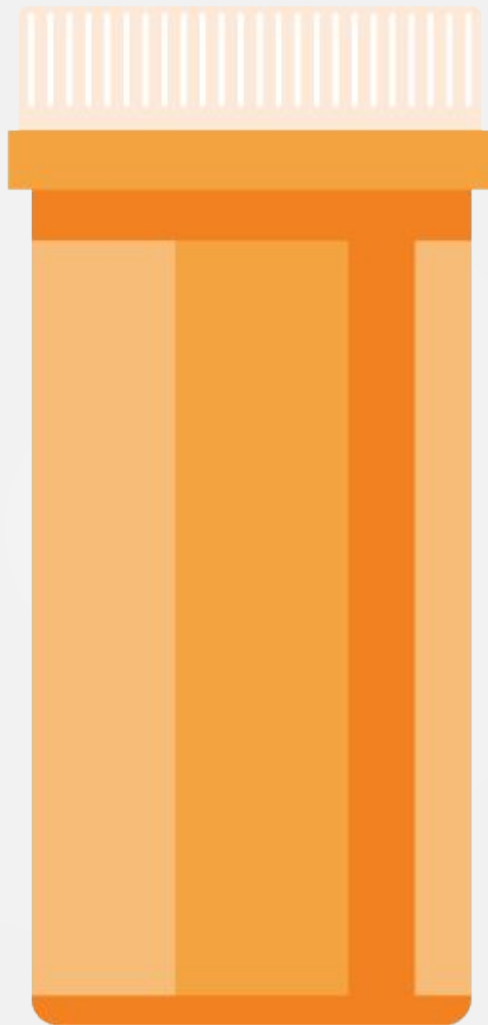
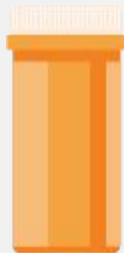
## Assisted Recovery Centers of America (ARCA)

- Outpatient care includes **18 medical providers**
- More than **2,100 patients a month**
- **Receives about \$3 million** from a federal grant



# Indirect Competitors

Only \$787,000 (.05%) of DHSS funding goes to the Bureau of Narcotics and Dangerous Drugs.

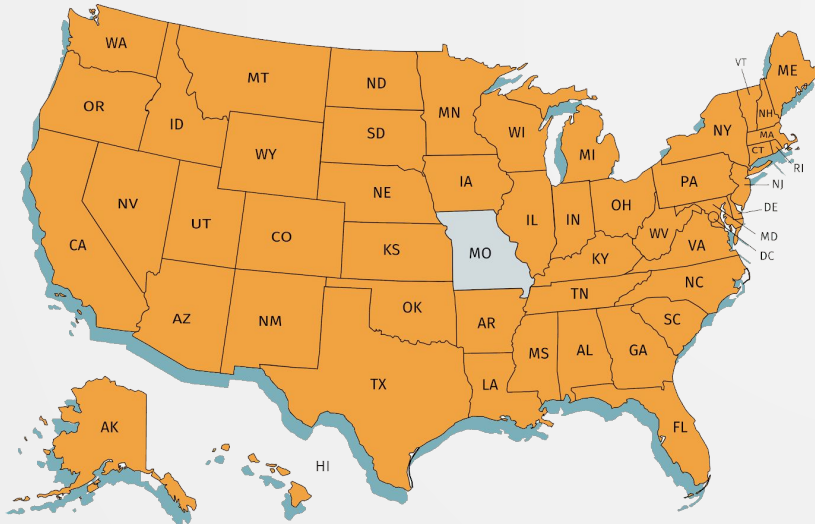


Medical marijuana takes \$13 million (.94%) of the budget.

# What Missouri is doing differently?

In 2017, Missouri providers wrote about **72 opioid prescriptions** for every 100 persons compared to the average U.S. rate of **59 prescriptions** for every 100 persons.

*But why is this number so high?*



Missouri is the only state in the nation without a **PDMP**, which is an electronic database that collects data on controlled substance prescriptions within a state.

In 2018 there were,

**8,000+**  
**ER VISITS**

due to opioid misuse and

**1,100+**  
opioid overdose  
**DEATHS**



# Cost of the Opioid Epidemic

In the state of Missouri alone, the average cost of medical bills is approximately **\$30,000** per individual with a prescription opioid addiction.

In total, the **Council of Economic Advisers** estimated the cost of the opioid epidemic in the United States is between

**\$294-622 billion.**



# Cost to Missouri

As of 2018, The Missouri Hospital Association determined that the total cost of the opioid crisis in Missouri was more than

**\$12 billion.**

They then broke that staggering number down into an hourly figure and compared it to major industries. The results showed that the opioid abuse crisis is costing Missouri

**\$1.4 million an hour.**



# PRIMARY RESEARCH



# 3 RESEARCH METHODS



**Survey**



**Focus  
Group**



**IDIs**

# Survey

823 participants, 2 weeks, 10 min or less



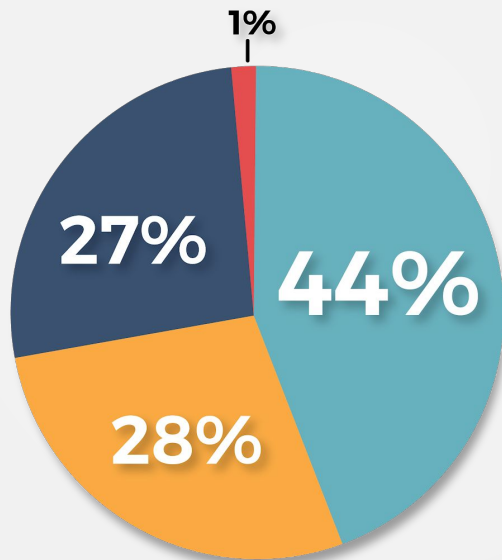
# METHODOLOGY

- We designed the survey to allow students, non-students, parents, teachers and medical personnel to participate.
- We want to use survey results to understand quantitative and qualitative data related to the younger demographics perspective on opioids.

# DEMOGRAPHICS

800+

total responses

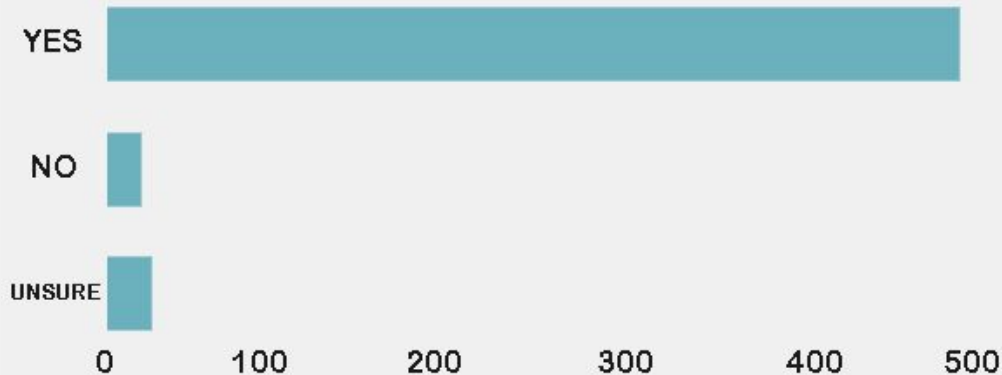


20-24 25 and older 15-19 Under 15

# QUESTION 1

Do you know what an opioid is?

- **510 participants** answered **YES**
- **21 participants** answered **NO**
- **28 participants** answered **UNSURE**



# QUESTION 2

Which of these drugs do you recognize as an opioid?

## OPIOIDS

Hydrocodone: 391

Vicodin: 317

Morphine: 378

Fentanyl: 333

Oxycodone: 452

Heroin: 293

## MISIDENTIFIED AS OPIOIDS

Tylenol: 70

Pseudoephedrine: 118

Marijuana: 61

"I don't know": 66

# QUESTION 3

How effective do you think Missouri's efforts are when it comes to dealing with the opioid epidemic?

## TREATMENT

42%

I do not know

24%

Slightly effective

## PREVENTION

35%

I do not know

28%

Slightly effective

## EDUCATION

31%

Not effective at all

29%

Slightly effective

## AWARENESS

26%

Slightly effective

23%

Moderately effective

**When it comes to prevention and treatment, how educated do you feel about the opioid epidemic in Missouri?**

Most of the survey participants responded that they were **moderately uneducated.**

- **Survey Results:**
  - Extremely educated (2%)
  - Moderately educated (19%)
  - Neutral (23%)
  - Moderately uneducated (34%)
  - Extremely uneducated (21%)



# QUESTION 5

In order from most to least time, which app do you spend the most time on? (Target Audience)



40%



11%



25%



8%



12%



3%

Ordered by percent of responses marked as first choice.

# QUESTION 5

In order from most to least time, which app do you spend the most time on? (Respondents over 25)



**77%**



**4%**



**11%**



**3%**



**5%**



**1%**

Ordered by percent of responses marked as first choice.

# QUESTION 6

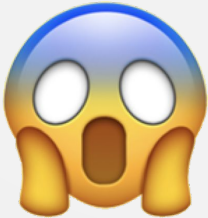
If you see an advertisement about drugs, what tone will stand out most to you? (Target Audience)



**55%**



**19%**



**14%**



**10%**



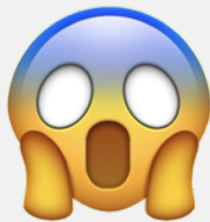
**2%**

# QUESTION 7

If you see an advertisement about drugs, what tone will stand out most to you? (Respondents over 25)



**51%**



**37%**



**7%**



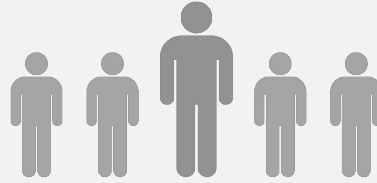
**5%**

# Focus Group

5 participants (ages 15 - 24)

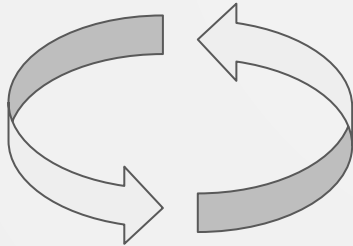


# METHODOLOGY



We asked **5 students** about their...

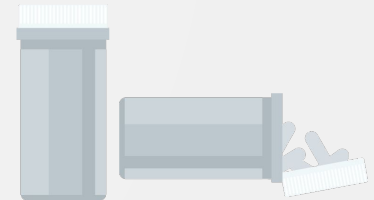
**routines and habits**



**experiences with doctors**



**opioid knowledge**



# DEMOGRAPHICS

**3** females and **2** males.

All participants are aged 20 - 22.

# QUESTION 1

**When you think of people with opioid addictions, what types of stereotypes come to mind?**

- All participants spoke on the **misconceptions** about opioids and that they are **bad and misused**.
- Participants gave the description of **normal, everyday people** when asked what kind of person suffers from opioid addiction.
- One participant said they believe opioids are **not** as much of a problem among the **African American** community.



# QUESTION 2

Where do you think opioid usage begins?

**4/5** participants thought opioid addictions start in a  
**doctor's office or emergency room**

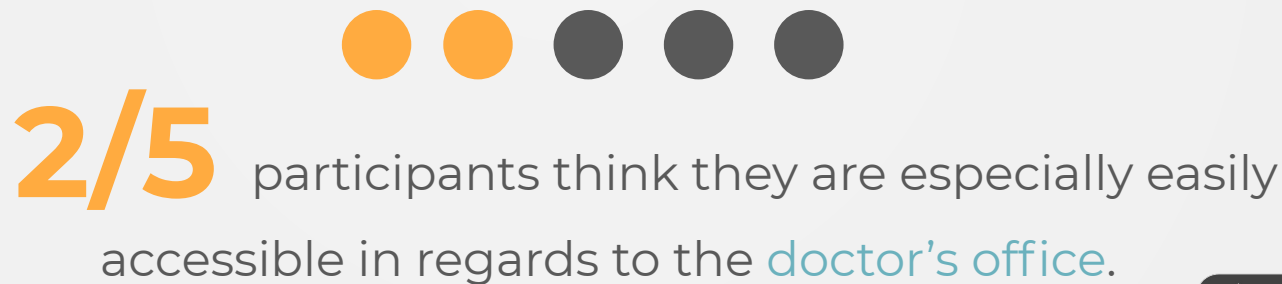
How do you believe people first start using opioids?

All participants said opioid addictions start with a  
**prescription**



# QUESTION 3

Do you believe opioids are easily accessible?



# QUESTION 4

Have you ever been exposed to some type of drug prevention method?

- All participants believe that drug prevention is **not taken seriously** enough in Missouri.
- **None** of the participants could name a specific campaign for drug prevention.

“We don’t treat addiction like the disease that it is.  
We **criminalize** it instead of **humanizing** people.”

# QUESTION 5

## How effective do you believe drug prevention / information programs are at schools?

- None of the participants think the opioid prevention program in the state is **effective** enough.
- All participants believe that drug prevention is **not taken seriously** enough in Missouri schools.

# QUESTION 6

## Where do you get information on current news / events?

- Participants **actively** sought out news, would **research more** about a topic if interested or do **not actively** seek out news.
- Participants who got their information from social channels would do more **in-depth research** if desired.

# QUESTION 7

When spotting an anti-drug commercial on social media, what are some factors that draw your attention?

4/5



participants would prefer ads that move away from **scare tactic** and more toward **sympathy**

3/5



participants feel that the campaign needs to be **serious, not funny**

“It’s hard to take (anti-drug advertising) seriously if no **human-figure** is involved.”



# In-Depth Interviews

27 interviews with  
nurses, teachers, parents and students





# Medical

## What do you think more people need to know about opioids?

- “They shouldn’t be taken as a **chronic pain medication**. They should be for **instant relief** after surgery and then more gradually ease into other medications.”
  - **Kelie Dahl**, ER Nurse
- “It is really truly **okay** to take your prescription if it is actually being prescribed to you because sometimes, that’s the **only thing** that works.”
  - **Natalie Harmon**, Nursing Student at Rockhurst University
- “Opioids decrease pain sensation but **do not resolve** the issue.”
  - **Tiffany Roderick**, ER Nurse at Mizzou Women’s and Children’s Hospital
- “People don’t feel like they deserve treatment. The stigma around it makes people feel shameful. **Shame** plays a huge role in an addicts’ life.”
  - **Stephanie Lilly** of Boone County Public Health and Human Services

## QUESTION 2

## What is your biggest concern regarding the opioid crisis?

- “The number of opioids being prescribed is concerning because when opioids are taken for **longer periods of time**, it increases the likelihood of addiction occurring.”
  - **Tiffany Roderick**, ER Nurse at Mizzou Women’s and Children’s Hospital
- “Addiction can start by **experimentation** with any drug, by trauma, in athletes, by being overprescribed. There is something a little different about different people’s chemical makeup because there could be one kid who takes five pills after surgery and doesn’t get addicted, while there can be another kid who takes two pills and gets addicted.”
  - **Tracy Bathe** of Boone County Public Health and Human Services
- “**Treatment** can be a barrier based on cost, so agencies should focus on treatment that the general public can afford so that people aren’t avoiding treatment because of the cost.”
  - **Jaclyn Brown**, Community Services Manager of Jefferson County Health Department
- “I think we have made some improvements but we have such a long way to go. Everyone is getting really involved in **coronavirus** right now but this (the opioid crisis) is a real problem in our country and it’s devastating families. It’s not going to go away any time soon.”
  - **Sandra Hewlett**, Administrator for Audrain County Health Department

## QUESTION 3

## Do you have any specific experiences that stand out regarding opioid misuse?

- “People that stand out to me are people who are **very crafty** and use every excuse to get their opioids.”
  - **Julie Crabb**, Trauma Coordinator for Delnor Northwestern Hospital
- “We actually just had to fire a nurse for stealing opioids from the hospital. **Nurses and medical staff** specifically are at risk because it’s so easy, so we’re more of an at-risk population than people might think.”
  - **Natalie Harmon**, Nursing Student at Rockhurst University
- “My husband is a fire chief and the department has seen an increased call volume and involvement in overdose responses. Something people often don’t think about is how the opioid epidemic has impacted the jobs of **first responders** as well.”
  - **Jaclyn Brown**, Community Services Manager of Jefferson County Health Department

## QUESTION 3

## Do you have any specific experiences that stand out regarding opioid misuse? (cont'd)

- “I went into the ER because of this woman. She was a “frequent flyer.”... For her, I think it was pain meds and recreational use. She lost it one day. All she wanted was something for pain. She was going through withdrawal.... She became so frustrated with her 5-year-old she smashed her kid’s head into the table.”
- “Justin (Dahl’s stepbrother) had his knee surgery back in 2003, and we knew he was on them (opioids) and got them for back issues a few years later. But we were adults, we weren’t kids anymore. So it wasn’t something that we really paid attention to. But things were different then. We knew he wanted them because back in 2015, our Grandma passed away and he asked: ‘Hey does Grandma have any pills left.’ I told him I didn’t know. I was cleaning out drawers, and the next day they were gone. Nobody faced up and out of the 15 people, no one confessed. We knew who had them now, but we didn’t then. We had no idea. He seemed like his normal self. He died in 2016. We couldn’t get a hold of him. We eventually found him and his girlfriend both dead. They had killed themselves with a handgun. They couldn’t take [the addiction] anymore.”

- **Kelie Dahl**, Past Medic, Current ER Nurse, Stepsister of Former addict



# Parent/Teacher

## Do you feel equipped to have conversations with students about opioid addiction?

- “One time last year we had a speaker on prescription pills, but we [never followed up](#) after. We don’t see it as a huge problem.”
  - **Lucy Ultican**, Teacher at a rural HS outside of Columbia
- “Perhaps. I’m on the fence with this one. Teenagers don’t take a lot of those talks seriously at school. Not sure that school is the [right forum](#) for that.”
  - **Julie Shupe**, PTA Member

## Have you had discussions with your child about drug/opioid misuse?

- “We have certainly discussed drugs, probably on a more [general level](#) so far... I mean, when I bring it up they’re like ‘yeah, yeah we know. Drugs - bad, school and sports - good.’ I don’t think I’m [naïve](#). God, I hope I’m not naive. But... they’re just not away from us that much yet.”
  - **Kori Sands**, Parent
- “Not really. [Addiction](#) in general, yes.”
  - **Julie Shupe**, PTA Member



# QUESTION 2

Parent /  
Teacher

## What curriculum does your school / your child's school have for drug education and prevention?

- “We have a health class, but the textbook was published in 1988. ...The class is in the trailer, which doesn't communicate to the kids that learning about their mental and physical health is an [academic priority](#). It feels like a [joke](#) of a health class that you see in a movie.”
  - **Lucy Ultican**, Teacher
- I think they still have the [D.A.R.E. program](#) but I don't really know.
  - **Richard Walls**, Parent

## How prevalent do you think opioid misuse is in your neighborhood / schools?

- “I’m sure there is. I mean, I don’t know anyone personally in my neighborhood, but I would not be **shocked**.”
  - **Kori Sands**, Parent
- “The big thing last school year was **vaping**. ...Kids would answer like 80% of the school. It doesn’t seem prevalent, but if I wasn’t hyper-aware of vaping, I probably wouldn’t know that either.”
  - **Lucy Ultican**, Teacher
- “Not a concern, but always **possible**.”
  - **Julie Shupe**, PTA Member
- “**Fairly prevalent**, I don’t think it’s the majority of the people around here but I probably know about **4 people** who have died from overdoses so it’s definitely a problem.”
  - **Richard Walls**, Parent

## Do you think the opioid crisis could affect you?

- “I’m kind of an old mom, I’m 46, so a lot of my friends have teenagers and young adults and we’ve already seen overdoses and rehabs... They were [good kids](#). Somebody got in some [parent’s cabinet](#) with pain killers, you know? And then that led to something that led to something else. Heroin is more around all the time.”

....

“I’m sure you’re aware of that couple at the lake. Fentanyl overdose. You know, great couple. My college roommate knew them. They had [three little kids](#). They ran the football youth program. They took some Fentanyl and it was too much.”

- **Kori Sands**, Parent

- “[Absolutely](#).”
  - **Julie Shupe**, PTA Member

## Do you believe your child's peers could expose them to opioids?

- "Yes. I mean starting in [parents' medicine cabinets](#) or somebody who's already been there done that and is already on opioids."
  - **Kori Sands**, Parent
- "Of course. You have no idea what [background / family / issues](#) each child has been exposed to."
  - **Julie Shupe**, PTA Member
- "I mean there are [parties](#) that could definitely have influences on them. My kids go to private school so everyone kinda knows each other, including parents so I think if there was an issue everyone would know about it."
  - **Richard Walls**, Parent

## Do you have any opioids in your house?

- “We do not. I’m pretty vigilant, though they don’t happen often enough, about those [drug take backs](#). It seems like almost any time you get [extensive dental work](#), they’re prescribing you something more than a Tylenol 3. If you had a baby... they’d be like ‘what do you want?’ like I could’ve said I wanted whatever. In those cases when we’ve had prescriptions that go unused. They’re not locked up, but we do eventually take them to one of those drug take backs, but those happen like [once or twice a year](#).... I think it’s a national take back day. If it’s available for any time, they don’t do a very good job with all of that... My husband just said at HyVee there’s a drug drop box. But I didn’t know that.”
  - **Kori Sands**, Parent
- “No.”
  - **Julie Shupe**, PTA Member
- “No.”
  - **Richard Walls**, Parent



**Student**

## Have you or anyone you know been affected by opioid misuse?

- “Yes, one of my [good friends in high school's mom](#) had back surgery several times and she got addicted to pain pills. Their whole family ended up falling apart, and they ended up getting divorced. She did go to rehab and her and her mom are closer now, but she and her husband aren't together still.”
  - **Bailey McMillan**, Nursing Student
- “Yes, I have [two stepbrothers](#) Max, who is 28, and John, who is 26 that are both addicted to heroin. They both started using in their early 20s and have been in and out of rehab. They are living in San Diego where Max is currently incarcerated and John has been missing for a few weeks. It has a huge impact on my family because we [feel powerless](#) as there isn't much we can do to help.”
  - **Reed Wilson**, MU Student
- “Yes. In the past four years I have [lost three friends who all died from opioid misuse](#). Two overdosed and one crashed his car while high on percs.”
  - **Grant Kimmle**, Student
- “Not that I'm aware of. Going to a Catholic high school, it is [definitely not something that is talked about](#).”
  - **Erika Hillyer**, Student

## Would you feel comfortable calling the authorities if you saw someone or a friend overdosing?

- “I would because [I don't want to feel responsible for someone else's death](#), and I would want them to get help, even if it's a stranger.”
  - **Rachel Tingle**, MU Student
- “Yeah but no, because you don't want to get them in trouble. My first response would be to try and [help in any way I can](#).”
  - **Malek Ben-Ayed**, Student at Rock Bridge High School
- “Yes, my [first reaction](#) would be to call 911 if I saw a close friend, or anyone overdosing.”
  - **Paige Zilinskas**, MU Student

## What if you were involved?

- All participants still stuck to their original “yes.”  
A few even mentioned the [Good Samaritan Law](#).



## QUESTION 3

## Do you feel educated about the risks of taking opioids?

- “Yes, they are commonly overprescribed for things with [little follow up from the prescriber](#). Also, the street opioids that are available are usually laced with other things making them a lot riskier to take which leads people further down the path of addiction.”
  - **Olivia Osborn**, Nursing student
- “I feel educated on the risk of taking opioids because of my career. I have taken classes on drug abuse and overdoses. I do not think the general public really understands what opioids will do to you. I believe pharmaceutical companies will try to [hide how dangerous the drugs they are making are](#).”
  - **Grant Kimmle**, Student
- “No, I feel that my [school's curriculum does not cover](#) the risks or effects of opioids. From what I can remember, they have never specifically been discussed.”
  - **Erika Hillyer**, Student

## QUESTION 4

## Do you have access to opioids?

- “The most access I have is at my clinicals. I can help pass opioids but they do have a pyxis system at the University Hospital but I’m not allowed to give or collect drugs on my own.”
  - **Olivia Osborn**, Nursing student
- “Not in my parent's medicine cabinet, but I could find seniors to buy them from if I wanted to. People usually try to sell them after wisdom tooth surgery.”
  - **Malek Ben-Ayed**, Student at Rock Bridge High School
- “Yes. They are extremely easy to get whether off the streets or even a prescription from a doctor.”
  - **Grant Kimmle**, MU Student

## What kind of advertising do you remember concerning public health or drug use?

- “Basically I’ve seen a lot of [anti-vaping campaigns](#). I don’t really feel like I’ve seen any specific to opioids. I saw a Facebook post about a family who passed out in their car and died from opioids, but I don’t feel like I’ve seen very many that address the opioid crisis we’re having.”
  - **Rachel Tingle**, MU Student
- “[D.A.R.E.](#) Program.”
  - **Landon Bruer**, Student at Rock Bridge High School
- “Nothing really. I’ve mostly seen [marijuana or vaping](#) advertisements. I doubt there are any commercials or campaigns that focus on opioid addiction.”
  - **Reed Wilson**, MU Student

## What kind of advertising would catch your attention?

- “I would say honestly shocking things would get my attention, but also things like [statistics](#). I don’t think regular social media would be that helpful, but maybe like Instagram stories or Snapchat stories or Tik Tok or Hulu ad or something.”
  - **Rachel Tingle**, MU Student
- “I would think that something that would hit you really empathetically, and if you show that it’s [not just the people on the street, but the people right next to you](#) that have this addiction, then it hits closer to home.”
  - **Bailey McMillan**, MU Student
- “I’d say that advertisements that show the negations of the drug would be effective, showing the [worst case scenario always seems to scare people](#), especially with drugs like opioids.”
  - **John Powell**, Student at Rock Bridge High School

# SWOT Analysis

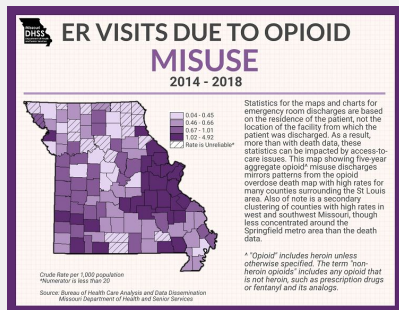
Strengths, Weaknesses, Opportunities, Threats



# STRENGTHS

- Data and charts are visually appealing and simple.
- Training programs for Narcan / Naloxone are in place and expanding.
- Overdose assistant teams are mobile.
- 100+ LPHA in Missouri.

# DATA & CHARTS



## ER VISITS DUE TO OPIOID MISUSE BY COUNTY OF RESIDENCE 2014 - 2018

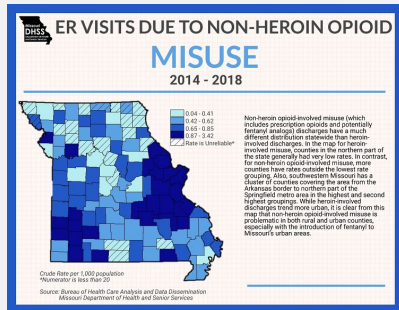
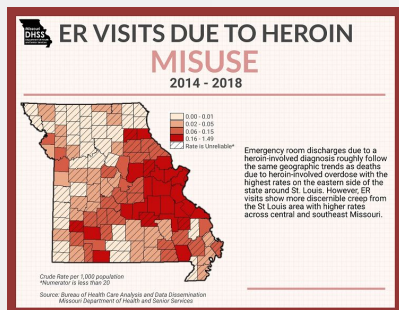
Data for ALL Missouri counties can be viewed by clicking on the data table below.

County	Count	Rate	County	Count	Rate
St. Louis City	2,648	4.92	Cedar County	71	1.03
St. Francois County	3,083	3.25	Lawrence County	194	1.03
Iron County	148	2.91	Ray County	111	0.97
Franklin County	1,166	2.27	Lancaster County	550	0.92
Warren County	376	2.22	Callaway County	203	0.90
Jefferson County	2,272	2.03	Perry County	86	0.90
St. Louis County	9,218	1.84	Boone County	770	0.87
Crawford County	214	1.76	Polk County	137	0.87
Lincoln County	483	1.74	Mississippi County	59	0.86
Phelps County	320	1.43	Bates County	70	0.85
Taney County	392	1.43	Henry County	92	0.85

\*Rate is unreliable; numerator is less than 20  
Crude rate per 1,000 population  
Source: Bureau of Health Care Analysis and Data Dissemination, Missouri Department of Health and Senior Services

As with opioid overdose deaths, ER visits with opioid misuse diagnoses show high rates for many counties surrounding the St. Louis area, also of note is a secondary clustering of counties with high rates in west and southwest Missouri, though less concentrated around the Springfield metro area than the death data. Note that because these statistics are based on the residence of the patient, they can be impacted by access-to-care issues.

 **1** out of every **56** deaths in 2018 were due to Opioid Overdose



 **1,132** 2018 Opioid Deaths

# WEAKNESSES

- [Narcan programs](#) are not widespread across the state.
- [Outreach programs](#) are outdated and thus less effective at connections with the community.
- [DHSS website](#) is unorganized.
- There is a lack of [social media presence](#).
- There is a [lack of communication](#) between hospitals and prevention groups.



# OPPORTUNITIES

- Education on [alternatives](#) to opioids could be expanded.
- There is a large public interest in [advocacy groups](#).
- The DHSS [mobile website](#) can be easily reorganized (potential app integration).
- [School nurses](#) are prime candidates for prevention and intervention techniques, especially for our target audience.
- The public can be educated on [Good Samaritan laws](#).

# THREATS

- **Narcan programs** are not required, and there is a lack of motivation to make them required.
- Doctors are **overprescribing** opioid medications.
- People demand **instant relief** from their pain
  - This has led to overprescription of opioids from hospitals.
- **Other drug prevention programs** may take state/federal funding.
  - For example, tobacco and marijuana prevention programs.

# THREATS (cont'd)

- There's a general attitude of “the opioid crisis doesn't apply to me.”
- There is potential community backlash due to denial.
  - The “Not in My Backyard” movement is an example of this.
- Messaging does not always reach the target audience.
- Uncontrolled regulation on prescriptions and the absence of a nationwide opioid prescription tracking system are problematic.

# THANK YOU

Questions?

