A State of Prevention

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ETSU Grand Rounds
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Disclosure Statement of Financial Interest

• I DO NOT have a financial interest/arrangement or affiliation with one or more organizations that could be perceived as a real or apparent conflict of interest in the context of the subject of this presentation.
Prevalence of Substance Misuse in US

It is estimated that 24.6 million individuals aged 12 or older were current illicit drug users in 2013, including 2.2 million adolescents aged 12 to 17. (9.4% of the population)
Prevalence of Substance Misuse in US

In 2013, 60.1 million individuals (12 or older) were past month binge drinkers, including 1.6 million adolescents. (nearly 25% of the population)
The Cost of Substance Misuse (U.S.A.)

=$191.6 billion

=$167.8 billion

=$510 Billion

Annually

=$151.4 billion

$510 Billion
TN Prevalence

- An estimated 7.95% of Tennessee adults 18+ (or 384,000 people) “abused or were dependent on alcohol or illicit drugs in the past year”.
- An estimated **17.3%** of Tennessee young adults ages 18 to 25 (or about 118,000 people) “abused or were dependent on alcohol or illicit drugs in the past year,” compared to **6.4%** (or about 273,000 people) of adults ages 26 and over.

“Illicit drugs” include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription type psychotherapeutics used non-medically.

Results from the 2011-2012 National Survey on Drug Use and Health: Summary of National Findings. U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration
Impact of Substance Misuse/Abuse

- Cancer
- Foetal Alcohol Syndrome
- Brain Damage
- Pancreatitis
- Heart Disease
- Liver Disease
- Disinhibition
- Accidents
- Drink Driving
- Violence
- Crime
The number of emergency department visits for prescription drug poisoning has increased by approximately 40% from 2005 to 2010.

* Does not include heroin poisoning.
Healthcare Costs

- The Healthcare Cost and Utilization Project shows that the total Tennessee hospital charges for prescription opioid poisonings has risen exponentially over the past 10 years. In 2001, the cost was $4,118,187 and increased by 600% to $29,308,823 in 2011.


* Does not include heroin poisoning.
Overdose Deaths

• From 1999 to 2010, the number of people dying from drug-related overdoses increased at a greater rate in Tennessee than in the United States.
  
• While there has been an increase of 127% nationwide, (16,849 deaths in 1999 to 38,329 in 2010), in Tennessee there has been a **210% increase**, (342 in 1999 to 1,059 in 2010), in the number of drug overdose deaths.
  
• In 2012, there were 1,094 drug related overdose deaths in Tennessee.

Office of Policy, Planning and Assessment, Tennessee Department of Health (2013)
Criminal Justice System Involvement

- Drug-related crimes against property, people and society have increased by 33% from 2005 to 2012. During the same period, non-drug-related crimes decreased.

- In 2008, the cost of apprehending, prosecuting, and incarcerating people involved with drug-related crimes in Tennessee was $356.5 million; adjusted for inflation in 2013, this cost is $387.3 million.


Children in State Custody

- Prescription opioid abuse is also resulting in children being removed from homes and entering state custody. **About 50% of the youth taken into Department of Children’s Services custody resulted from parental drug use.** It is projected that during 2013 there will be 1,534 substance abuse related custodies.

- Additionally, incidents of child abuse resulting from drug exposure are one of the primary reasons that children were referred to the Department of Children’s Services over the last four years. Using data from the first six months of 2013, it is projected that 22,714 incidents of child abuse will be reported as a result of drug exposure.

Tennessee Department of Children’s Services (2013)
Neonatal Abstinence Syndrome

- The average cost to stabilize a newborn with Neonatal Abstinence Syndrome is $62,973, while the cost of birthing newborns who are not suffering withdrawals is only $7,258.
- The average cost for 660 newborns without Neonatal Abstinence Syndrome would be $4,790,280 a difference of $36,771,900.
- Using TennCare eligibility records, it was determined that 179 of the 736 infants diagnosed with Neonatal Abstinence Syndrome in 2012 (24.3%) were placed in Department of Children’s Services custody within one year of their birth, a nine percent increase from 2011.
- Among all TennCare infants born in 2012, 1.6% were placed in Department of Children’s Services custody within one year of birth. Infants born with Neonatal Abstinence Syndrome are 14.8 times more likely to be in Department of Children’s Services custody during their first year of life as compared with other TennCare infants.

Bureau of TennCare (2013). Department of Finance and Administration.

Cumulative Cases NAS Reported

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<th>Week</th>
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Prevention Definition

• Proactive activities that empower individuals, families, communities, and systems to meet the challenges of life events and transitions.”
An ambulance or a fence?

Usual Approach

Prevention Approach
Tennessee Prevention Services

• Create and reinforce conditions that we know effectively promote healthy behaviors and lifestyles.

• Specifically, prevention services aim to:
  – prevent alcohol, tobacco, and other drug use (including prescription drugs misuse) and abuse,
  – reduce their negative consequences,
  – and minimize future needs for addictions treatment.
Substance Abuse Prevention
Theoretical Perspective

- Public Health Model
- Promotion and Prevention are key components
- Risk and Protective Factor model
- Multiple contexts
- Developmental Perspective
- Planning Process
Different levels of prevention are distinguished by the level of risk of disorder/distress in various populations groups targeted.
Institute of Medicine Classification of Prevention Interventions

- Universal
- Selective
- Indicated
Universal Prevention Interventions

- Designed to reach the **entire population**, without regard to individual risk factors, and they generally are designed to reach very large audiences.
- Not recruited based on degree of substance abuse risk
- DADAS uses community anti-drug coalitions to do universal prevention services.
TN’s Universal Prevention

Prescription Drug Media Campaign:

http://vimeo.com/69996157
Community Anti-Drug Coalitions

• Work to change conditions in their local community that contribute to the consumption of alcohol and drugs as well as address the consequences related to the use of substances.
• Residents of the community understand their community and can best address its problems.
• Examples:
  – Provide “We Check IDs” signage to sales sites
  – Coordinate alcohol and tobacco compliance checks
  – Work with the school board to ensure that students involved with alcohol or drugs receive appropriate services instead of suspension/expulsion.
TN’s Universal Prevention

Counties with community substance abuse coalitions

Map Legend

- Counties community substance abuse coalitions

TDMHAS
Tennessee Department of Mental Health and Substance Abuse Services
Recent Coalition Work

Total Number of Permanent Prescription Drug Collection Boxes

Locations of Permanent Prescription Drug Collection Boxes; as of June 30, 2014

Map Legend:
- Yellow: Counties with permanently installed prescription drug collection boxes
- Light yellow: Counties without permanently installed prescription drug collection boxes
- Dark yellow: Targeted counties with permanently installed prescription drug collection boxes
- Brown: Targeted counties without permanently installed prescription drug collection boxes
- Blue: Represents number of permanently installed prescription drug collection boxes

Tennessee Department of Mental Health and Substance Abuse Services
Recent Coalition Work

Count it! Lock it! Drop it!

Staggering local data shows alarming rates of prescription drug usage among the youth. The Coffee County Anti-Drug Coalition, serving Coffee County, TN, have put into action a comprehensive plan to tackle the problem by putting information out there to parents of youth and providing them with the information and materials they need.

Don’t forget to ask about your own free lock boxes and counting

https://www.youtube.com/watch?v=LRul1boofJ8
Recent Coalition Work

• Nashville Prevention Partnership and Enforcement work

http://www.npponline.org/
Recent Coalition Work

- On June 3, Governor Bill Haslam signed into law H.B. 1466, S.B. 1832, which requires that prior to dispensing a prescription for any scheduled narcotic for greater than a seven-day supply, the distributor must require the person taking possession of the prescription to present a valid form of identification before receiving the medication.
Recent Coalition Work

Drop off old medicine, get a free Chick-fil-A sandwich

From staff reports 12:43 p.m. CDT September 24, 2014

Clear out the cabinets and make your home safer at the same time.

Local Walgreens stores in partnership with the Sumner County Sheriff’s Office will participate in National Drug Takeback Day Saturday. Last year more than 190 pounds of drugs were collected.

Residents can drop off old or unwanted medicines 10 a.m.-2 p.m. at Walgreens locations in the county, including two in Hendersonville, two in Gallatin, one in Portland and one in Goodlettsville.

In exchange for every drop-off, participants get a free Chick-fil-A sandwich coupon.

No. of Substance Abuse Prevention Coalition Prescription Drug Take-Back Events

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Partnerships for Success

• Five year grant totaling $11.5 million.
• Goal- Reduce binge drinking rates among 14-24 year olds in the State.
• 20 community coalitions were identified
• Community coalitions addressed binge drinking in their communities by using local level data to identify the conditions in their community that have made binge drinking possible and then decide on appropriate ways to address the problem.
Partnership for Success outcomes

Had Five or More Drinks of Alcohol in Row (within a couple of hours) or at least 1 day during the 30 days before the survey (YRBS)

- 2003: 28.3%
- 2005: 25.5%
- 2007: 25.5%
- 2009: 26.0%
- 2011: 24.2%
- 2013: 21.9%

Tennessee

United States

Tennessee Department of Mental Health and Substance Abuse Services
Selective Prevention Interventions

• Target subgroups of the general populations that are determined to be at risk for substance abuse.

• Recipients of selective prevention interventions are known to have specific risks for substance abuse and are recruited to participate in the prevention effort because of that group’s profile, but the degree of individual vulnerability or personal risk of members is not assessed.
Populations served through TPN

- **Selective Populations**
  - High school dropouts,
  - Foster care children,
  - Juvenile offenders,
  - Children of Substance Abusing Parents.
  - LGBTQ

- **Indicated Populations**
  - Early initiation of alcohol and drugs (13 and under)
  - Adolescents and young adults engaged in binge drinking and excessive alcohol use and associated problems;
  - Individuals who are using inhalants;
  - Adolescents who are abusing prescription drug;
  - or Adolescents who have co-occurring disorders and associated problems.
Tennessee Prevention Network (TPN)

- Network of providers around the State that deliver selective and indicated prevention services.
TPN Services

• Evidence Based
• Located throughout the State - All 7 mental health planning regions
• Services provided:
  – Education Activities, Mentoring, Referral Activities, Tutoring, Service Learning, Student Assistance Programs, and Alternative Activities.
Recent TPN Work

Why can’t we be... 

Just Us is an Oasis Center program dedicated to serving high school students who identify as lesbian, gay, bisexual, transgender, questioning, or intersex.

Just Us provides services focused on support and advocacy through:

1) Relentless outreach to young people, their families, and community allies

2) Support and educational events for engaged youth every Tuesday, 4:30-6:30pm, September through May

3) Individual support and group counseling

4) Advocacy with schools, families and others identified by youth

5) Referrals and door openers with other programs, agencies, and services
Recent TPN Work

• Students who are deaf or hard of hearing are naturally at higher risk for drug and alcohol abuse because of their increased difficulties with learning, communicating, isolation, depression and family connection.

• One out of ten hearing people may become dependent on drugs and alcohol, whereas one out of seven individuals who are deaf or hard of hearing may become dependent.
Recent TPN Work

Program helps stop repeat juvenile offenders in danger

Posted: Apr 01, 2013 6:47 PM CDT
Updated: April 1, 2013 10:20 PM

By Joseph Pleasant, Reporter

NASHVILLE, Tenn. - Funding for a program that helps keep juvenile offenders from returning to the system is in jeopardy because the state grant that helps fund the program is set to expire this summer.

Reaching Excellence as Leaders (REAL) works with juvenile offenders and other at-risk youth to change their behaviors and hopefully their futures.

"They are getting some more tools to pile in the tool belt just like mom has given them, dad has given them and school has given them," Program Manager Ron Johnson said. "They are getting them from a different perspective they are getting them from someone who walked the same road they are on."

Over the past three years, the program has helped more than 300 young people, with 85% not reoffending after graduation, according to R.E.A.L.'s Web site.

It is credited with helping the state of Tennessee cut its juvenile confinement by 83% since 1997.

The Justice Policy Institute listed Tennessee as one of the top five states in the nation for reducing juvenile confinement.

REAL started three years ago with the help of a grant from the Tennessee Commission on Children and Youth.
Indicated Prevention Interventions

- Identify individuals who are experiencing early signs of substance abuse and other related problem behaviors associated with substance abuse and target them with special programs.

- The individuals identified at this stage, though showing signs of early substance abuse, have not reached the point of a clinical diagnosis of a substance abuse disorder.
Indicated Example

• Project Towards No Drug Abuse (Project TND). This indicated prevention intervention targets high school age youth who attend alternative or traditional high schools. The goal is to prevent the transition from drug use to drug abuse, through considering the developmental issues faced by older teens.
Case Identification or Early Intervention

- Early identification and intervention means increasing access to substance abuse services, reducing the need for more intensive types of treatment and decreasing costs overall for health care, education and social services.
Screening

- Quickly assess the severity of substance use and identify the appropriate level of treatment.

Brief Intervention

- Increase insight and awareness of substance use; motivation toward behavioral change.

Referral to Treatment

- Provide those identified as needing more extensive treatment with access to specialty care.
Continuum of Substance Use

Severity

ABSTAINERS and LOW-RISK USERS (70%)

MODERATE TO HIGHER RISK 25%

SEVERE and DEPENDENT (5%)
Historic Response to Substance Use

Previously, substance use intervention and treatment focused primarily on substance abuse, universal prevention strategies, and on specialized treatment services for those who met the abuse and dependence criteria.

There was a significant gap in service systems for at-risk populations.
Re-Thinking Substance Use Problems From a Public Health Perspective

- Dependent Users
- At risk and binge drinkers
In the Emerging Public Health Paradigm, All Services Are Aligned

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<thead>
<tr>
<th>Primary Prevention</th>
<th>Universal Prevention</th>
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<tr>
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<td>Indicated Prevention</td>
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<table>
<thead>
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<th>Early Intervention</th>
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<td>Recovery supports, self-help, etc. (ROSC)</td>
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The primary goal of SBIRT is to identify and effectively intervene with those who are at moderate or high risk for psycho-social or health care problems related to their use.
Substance Use Continuum

Ranging from—

• Abstinence

• Moderate use (lower risk use)

• “At-risk” use (higher risk use)

• Abuse

• Dependence
Research Shows

Brief Interventions:

• Are low cost and effective.
• Are most effective among persons with less severe problems.
• “Brief interventions are feasible and highly effective components of an overall public health approach to reducing alcohol misuse.”

(Whitlock et al. 2004, for US Preventive Services Task Force)
Since 2003, SAMHSA has supported SBIRT programs with over 1.5 million persons screened.
Outcome data confirm a **40% reduction in harmful use of alcohol** by those drinking at risky levels and a **55% reduction in negative social consequences**.
Outcome data also demonstrate positive benefits for reduced illicit substance use.
PRESCRIPTION FOR SUCCESS:

Statewide Strategies to Prevent and Treat the Prescription Drug Abuse Epidemic in Tennessee

A report produced by the Tennessee Department of Mental Health and Substance Abuse Services, in conjunction with:
Objectives

• Participants will understand the extent of the prescription drug problem in Tennessee.
• Participants will gain knowledge of how the prescription drug problem is currently being addressed in Tennessee.
• Participants will gain knowledge of the strategic plan to reduce prescription drug use and assess ways that they can become involved in implementing the plan.
Goals of this Plan

• Decrease the number of Tennesseans that abuse controlled substances.
• Decrease the number of Tennesseans who overdose on controlled substances.
• Decrease the amount of controlled substances dispensed in Tennessee.
• Increase access to drug disposal outlets in Tennessee.
• Increase access and quality of early intervention, treatment and recovery services.
• Expand collaborations and coordination among state agencies.
• Expand collaboration and coordination with other states.
Questions/ Comments

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