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Preventing Opioid Addiction in Wilkes County, North Carolina

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COUN 6785: Social Change in Action:
Prevention, Consultation, and Advocacy

Social Change Portfolio

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OVERVIEW

Keywords: opioid addiction, Wilkes County, North Carolina

Preventing Opioid Addiction in Wilkes County, North Carolina

Opioid addiction is a problem in Wilkes County, North Carolina. Preventing opioid addiction would slow opioid related deaths and decrease problems such as the number of children in foster care, crime rates, homelessness, and improve mental and physical health. Opioid addiction has been on the rise since around 2007 after pharmaceutical companies began offering lavish incentives to doctors for prescribing opiates. Opioid addiction is devastating families across the nation hence the need for prevention (State of North Carolina, 2017). Prevention efforts must reach children and adults. Addiction does not discriminate and can happen to people of various ages and cultural backgrounds. There is not a lot of diversity in Wilkes County, North Carolina but I want my prevention efforts to reach everyone in the community.

Goal Statement: The goal of this social change project is to make the community in Wilkes County, North Carolina aware of the seriousness of opiate addiction in order to prevent opioid use through the means of education by raising public awareness and knowledge of local resources to prevent use.

Significant Findings: The number of opioid related deaths has increased over the last 10 years in Wilkes County, North Carolina, as well as in the United States (State of North Carolina, 2017). There was a 73% increase in opioid related deaths from 2005 to 2015. This gives rise to concern and the needs for prevention efforts to make the community aware. In 2022 there were 108,000

opioid related deaths reported in the United States and 28,000 North Carolinians lost their lives to drug overdose from 2000-2020 (NC Dept of Health & Human Services, Division of Public Health, 2020). Social Cognitive Theory and Life Skills Training are evidenced based programs that have proven beneficial in creating healthy environments and would work well for promoting prevention effectively.

Objectives/Strategies/Interventions/Next Steps: Objectives to prevent opioid addiction in Wilkes County, North Carolina includes attending community mental health centers and networking with other agencies to spread awareness via pamphlets or presentations. It would be beneficial to utilize evidence based programs such as Social Cognitive Theory and Life Skills Training in schools to reach all ages. Advocating for public policy changes as needed increases access to resources to prevent opioid addiction. Counselors can recommend changes in laws to law makers. Education about opioid addiction and its effects is important in order to prevent it. This can be done in neighborhoods with more diverse populations to ensure everyone is reached. There are several interventions for the prevention of opioid addiction. Coordination with law enforcement is essential for reducing stigma and assisting with educating the public.

INTRODUCTION

Preventing Opioid Addiction in Wilkes County, North Carolina

Opioid addiction in Wilkes County, North Carolina has increased over the past 15 years. There have been several premature deaths related to Fentanyl recently. Opioid addiction impacts families. It causes trauma to other family members and rips families apart. Often children have to go live with family members or end up in foster care. Opioid addiction causes people not to be able to work or function in society. Those with opioid addiction may have mental health issues

that are unresolved. Prevention is key to combat opioid addiction before it happens. In terms of prevention, awareness about opioid addiction is important. I aspire to find ways to educate the community about opioid addiction in hopes to reduce the number of opioid deaths, keep families together, and increase awareness regarding local community resources.

PART 1: SCOPE AND CONSEQUENCES

Preventing Opioid Addiction in Wilkes County, North Carolina

Local Trends

Opioid addiction is a growing health problem in Wilkes County, North Carolina. It can impact a person or family member's mental health, create financial hardships, lead to rising crime rates and treatment costs, and often results in death. In 2005 there were 14 opiate related deaths and in 2015 there were 24 reported in Wilkes County (State of North Carolina, 2017). North Carolina saw an increase in opiate related deaths from 2005 to 2015 by 73% with over 1,100 opioid related deaths in 2015 (State of North Carolina, 2017). Opiates could include pills, heroin, or fentanyl. Education and prevention are necessary to end the problem before it occurs.

National Trends

There appears to be more national data available regarding opioid addiction. In the United States for a 12-month period ending in April 2022, there were more than 108,000 overdose deaths according to the American Psychiatric Association (2022). The top 3 drug classes for overdose deaths include opioids, synthetic opioids, and cocaine with opioids accounting for almost 75% of all drug overdose deaths in 2020 (APA, 2022). Opioid deaths continue to increase each year. Especially now that drugs are stronger. Narcan often does not work on fentanyl except in larger quantities, creating the need for more Narcan to be utilized by family, friends, and law enforcement to prevent overdose deaths. Synthetic opioids may contain

a plethora of substances that could kill a person once ingested. Opioid addiction could end up deadly, leaving loved ones in the wake of emotions.

Consequences

Opioid addiction causes multiple problems in Wilkes County, North Carolina. Opiate use causes individuals to stop caring for themselves as they normally would. This leads to increased physical and mental health problems, such as contracting hepatitis which requires costly treatment. Other health issues stemming from opiate addiction include depression, anxiety, paranoia, and lack of motivation to work. Opiates can depress a person's breathing and result in hazardous situations such as driving while impaired (APA, 2022). Some insurance companies cover the costs of opioid treatment at medication assisted treatment facilities, detox, or while in the hospital. Often mental health treatment is needed as well due to trauma experienced by opioid users and their families. Insurance is usually involved in mental health treatment costs. Opiate use can lead to criminal charges due to paraphernalia, driving while impaired, larceny, breaking and entering, trafficking, possession, or even more serious crimes such as manslaughter. The opiate crisis costs the economy billions of dollars each year.

Goal Statement

The goal of this social change project is to make the community in Wilkes County, North Carolina aware of the seriousness of opiate addiction in order to prevent opioid use through the means of education by raising public awareness and knowledge of local resources to prevent use.

PART 2: SOCIAL-ECOLOGICAL MODEL

Preventing Opioid Addiction in Wilkes County, North Carolina

Opiate addiction does not discriminate. It effects people of all ages, cultures, races, and socioeconomic statuses. The same is true in Wilkes County, North Carolina just like it is in the

United States. When looking at prevention of opiate use, we must consider the social-ecological model. According to the CDC (n.d.), the social-ecological model looks at the complex interplay between individual, relationship, community, and societal factors. Each of these levels have factors that influence the other levels. There are risk factors and protective factors.

On an individual level, an individual may have protective factors such as a supportive family, income, a job, education, or no family history of mental health or substance use issues (CDC, n.d.). An individual may also have risk factors including no support system, being unemployed, childhood trauma, lack of education, living in poverty, or family history of mental health or substance use disorders. Prevention is important to promote positive beliefs, behaviors, and attitudes of abstinence.

On a relationship level, an individual may have protective factors such as positive relationships with friends or family and religious involvement (CDC, n.d.). An individual may have risk factors such as friends who use illicit substances, lack of natural support involvement, or negative relationships with family or teachers. Prevention related to relationships would include promoting healthy relationships, initiating a peer program in schools, and promoting positive social norms.

On a community level, an individual may have protective factors such as feeling safe at their job or school, living in a safe neighborhood, and knowing community resources to connect with as needed (CDC, n.d.). Whereas an individual may have community risk factors including unsafe work or school environments with lots of violence or stress, easy access to illicit substances, living in poverty, unstable lives, and they may lack transportation or other community resources. Prevention of opiate use in Wilkes County on a community level would include educating others on community resources (e.g. food banks, transportation), ways to

increase positive social supports, and discussing ways to create safe places to work and live in the community.

The last component of the social-ecological model includes societal factors. Some protective factors of society include health and educational policies regarding opiate use (CDC, n.d.). The risk factors include cultural or societal norms that support opiate use. For prevention efforts with regard to opiate addiction on the societal level, it would be beneficial to link individuals with the local health department for affordable access to healthcare while reducing barriers for culturally appropriate care and assisting with facilitating access to public transportation.

An individual has many facets of their lives that interact to determine whether or not they are at risk for opiate addiction. One's individual, relationship, community, and societal factors all play a part. Each individual has certain risk and protective factors at each level that play a role in the development of opiate addiction. The Substance Abuse and Mental Health Services Administration (SAMHSA) mentions that people with some risk factors are at risk of experiencing even more risk factors, and they are less likely to have protective factors. This means that prevention is extremely important in working to prevent opiate addiction in Wilkes County.

PART 3: THEORIES OF PREVENTION

Preventing Opioid Addiction in Wilkes County, North Carolina

It is important to utilize theories of prevention that are evidence based when considering how to prevent opioid addiction in Wilkes County. Theories with evidence that can back them up have been proven effective. Social Cognitive Theory and LifeSkills Training are both evidence

based and would reach people of all ages. When speaking of opioid use, there is no discrimination when it comes to addiction so prevention is necessary to reach youth, as well as adults.

Social Cognitive Theory (SCT) evolved from Bandura's Social Learning Theory (SLT) and integrates concepts from cognitive, behaviorist, and emotional models of behavior change (Social Programs that Work, 2018). SCT involves 3 main factors, self-efficacy, goals, and outcomes. By helping individuals to set achievable goals and increase their motivation, they have less time to focus on opiate use and more time to improve themselves. One concept in SCT is reciprocal determinism. This includes interactions amongst an individual, behavior, and the environment. In order to prevent opioid addiction, it is important to consider an individual's environment and if necessary help them find healthier environments to reduce the risk of substance use. I plan to educate individuals on how to locate healthy environments, such as with supportive friends or family or amongst religious groups who do not use substances. By helping individuals recognize healthy environments, they can find activities in those environments that are not self destructive but uplifting. SCT emphasizes the important of learning through actual skills training. Counselors need to set expectations by modeling appropriate behavior and let clients observe these behaviors (Social Programs that Work, 2018). Counselors must explain and promote self initiated rewards so that individuals are able to see the work they have done in preventing the use of opiates or other substances while decreasing the likelihood of future substance use in order to live a healthier lifestyle. People learn from their own experiences as well as by observing others. This is why SCT would be a good choice to prevent opioid addiction.

The LifeSkills Training program (LST) is also evidenced based. It is a school based substance abuse prevention curriculum. LST was created in the 1970s and is used for elementary, middle, and high schools (Promising Practices Network, 2014). I think prevention is just as important for children and adolescents as it is for adults. LST works to modify knowledge related to drug use and attitudes, teach drug refusal skills by resisting social influences, and enhance social skills. All of these would help prevent opioid addiction. LST is taught by regular classroom teachers, sometimes with the assistance of peer leaders. LST utilizes teaching techniques to teach substance use prevention skills. The teachers and peer leaders model behaviors, give behavioral homework assignments to students. They offer classroom demonstrations and rehearse learned behaviors with students (Promising Practices Network, 2014). By learning about substance use and implementing new behaviors, students can see the damaging effects and hopefully refrain from opioid use. LST addresses ways for students to resist peer pressure and how to be assertive when being pressured to use illicit substances. LST utilizes group discussions to facilitate prevention. It offers short term consequences to substance use and makes prevalence rates of substance use known to students. LST helps students learn to make their own decisions while working to improve their sense of self control. It also helps students cope with anxiety while being more assertive (Promising Practices Network, 2014). All of these skills could actually be used with adults or children even though the LST program is aimed at working with children and adolescents. By teaching these life skills to students, more children will be armed with the knowledge they need to make wise decisions related to opiate use and other substances which in turn will reduce the risk of opioid addiction. I believe the LST program should be implemented in Wilkes County Schools.

Both SCT and LST have evidence that backs their effectiveness for substance use prevention. I believe SCT will work well with adults and can be utilized in community agencies such as Daymark Mental Health Center, Wilkes Recovery Revolution, Atrium Health Wilkes Regional Medical Center, parent education nights at local schools, and/or Project Lazarus. By partnering with these agencies to address prevention, I would broaden my network to reach as many people possible to prevent opioid addiction. I would also want to partner with Wilkes County Schools to discuss the LST curriculum and how to implement it. I would inform the school district of the benefits of using the program and how it has worked in other school systems based on evidence and studies that currently exist.

PART 4: DIVERSITY AND ETHICAL CONSIDERATIONS

Preventing Opioid Addiction in Wilkes County, North Carolina

When discussing the prevention of opioid addiction in Wilkes County, North Carolina, I must consider diversity and ethical considerations. According to the NC Department of Health and Human Services, Division of Public Health (2020), in Wilkes County unintentional opioid overdose deaths were high from 2011-2020. The unintentional overdose death rate for males was higher than that of females. It is important to note that White Non-Hispanics had the highest rate of unintentional overdose deaths by a landslide compared to the African American and Hispanic populations in Wilkes County. Overdose rates were highest in adults ages 45-54. Adult, White Non-Hispanic males is the target population where prevention efforts must be focused. It is important to add that Wilkes County had a 33.6 rate of medication and drug overdose deaths including all intents per 100,000 North Carolina residents in 2016-2020 and the statewide number was 23.9 (NC Dept of Health & Human Services, Division of Public Health, 2020).

Some mechanisms to increase the cultural relevance of prevention among adult white males between the ages of 45-54 includes providing services in venues that are more inviting to some ethnic communities such as community centers, schools, and places of worship by improving access to mental health services, attending to individual and community concerns more systematically, and getting involved in advocacy efforts that guide the development of public policy (Reese & Vera, 2007). The primary goal of prevention is to prevent the use of opioids by raising awareness and improving communication and coordination among agencies. Given the other populations of African Americans and Hispanics, venturing into areas that are inviting to ethnic communities would reach various populations, not just white males. Part of my prevention efforts would be to strengthen relationships with other community agencies and provide psychoeducation to the community as well as reaching schools in effort to try to thwart opioid addiction before it happens.

When working with my target population, I must take into account ethical considerations. It is important to get support from all stakeholders, such as family members, educators, and community agencies when focusing on the prevention of opioid addiction. When working with clients you must respect client rights. According to the ACA Code of Ethics (2014) B.1.a. counselors maintain awareness and sensitivity regarding cultural meanings of confidentiality and privacy. Counselors when working to prevent opioid use must respect that people have differing views. They must learn from their clients about how they would like their information shared and with whom. Ethics code B.1.b mentions that counselors respect client privacy and only request information from them when it benefits the counseling process and code B.1.c. states that counselors protect client information and only disclose when necessary

(ACA Code, Section B 1.a, 1.b, & 1.c, 2014). Prevention involves reducing stigma and being aware of one's cultural background is imperative to meeting people where they are.

PART 5: ADVOCACY

Preventing Opioid Addiction in Wilkes County, North Carolina

Advocacy involves counselors taking action to facilitate the removal of external and institutional barriers to clients' well-being (Toporek, Lewis, & Crethar, 2009). Advocacy is important work for counselors. They are change agents because they realize that clients often need more services than can be provided, aside from basic counseling. However, clients often lack access to needed services.

Some resources that would be useful while advocating for opioid prevention include a couple of substance use initiatives listed on the SAMHSA website. Part of advocacy is being involved and knowing what is going on in your community. The Talk They Hear You Campaign aims to reduce underage drinking and substance use in youth under the age of 21 by providing resources to parents and caregivers (SAMHSA). This campaign could be used in local schools or mental health centers to reach the youth about opioid use. Also, National Prevention week is held in May and it promotes community involvement and resource sharing to increase awareness of substance use and mental health disorders (SAMHSA). National Prevention week is well known and has been in place for several years. These initiatives would reach the community and may be appropriate for use institutionally with the goal to prevent opioid addiction. An important law to familiarize my advocacy efforts with is the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act of 2018. This law aimed to reduce the demands for opioids by prevention and treatment, reduce the supply of opioids by

limiting inappropriate and nonmedical use of prescription opioids and reducing harm by providing support (Congressional Budget Office, 2022). This law addresses both adults and youth and is part of public policy. In preventing opioid addiction it is important to reach everyone as addiction does not discriminate. In Wilkes County, NC, the target population for opioid addiction is white males. The opioid crisis has occurred in waves and the demand for opioids tends to get worse when economic conditions or social conditions trigger use. My goal from my advocacy efforts is to help clients resolve social and economic conditions to live healthier lives while being free from substance use.

As part of my advocacy efforts, I plan to raise awareness of opioid addiction through the use of education to adults, youth, and caregivers. Partnering with other community agencies will help to expand my advocacy network to reach more people in the community, as well as reaching students in schools. According to Toporek, Lewis, and Crethar (2009), the counselor and client community collaborate together in efforts to alert the public to macrolevel issues regarding human dignity. This type of advocacy may consist of a community-wide issue that needs addressed in the media to gain attention. It is safe to say that opioid addiction being a crisis could definitely warrant media attention. Advocacy may also mean working to develop access to services for my clients based on the need or working with lawmakers to recommend changes. Counselors can be creative with advocacy efforts since there are so many ways to be change agents to better help those in need.

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