

# THE INTERSECTION OF OPIOID USE, MENTAL HEALTH & THE JUSTICE SYSTEM



# Observations from 14 years including Cabinet secretary for two administrations, executive director of OJA, and deputy commissioner for ODMHSAS

With appreciation to the following for background for this presentation:

- ▶ Oklahoma Department of Mental Health & Substance Abuse Services: Carrie Slatton-Hodges, commissioner
- ▶ Oklahoma Office of Juvenile Affairs: Rachel Holt, executive director

# WHAT ARE OPIOIDS

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Opioids are a class of drugs that include:

**Prescription Opioids** - can be prescribed to treat moderate to severe pain and include medicines such as oxycodone (e.g. OxyContin), hydrocodone (e.g. Vicodin), codeine, morphine, among others.

**Heroin** - an illegal opioid

**Fentanyl** - pharmaceutical fentanyl is a synthetic opioid pain reliever, approved for treating severe pain, typically cancer pain. Illegally made and distributed fentanyl is often mixed with heroin or cocaine with or without user knowledge.

Opioids interact with opioid receptors on nerve cells in the body and brain.

Opioids carry serious risks and side effects.

# WHAT ARE OPIOIDS

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## Risk for long-term use, addiction

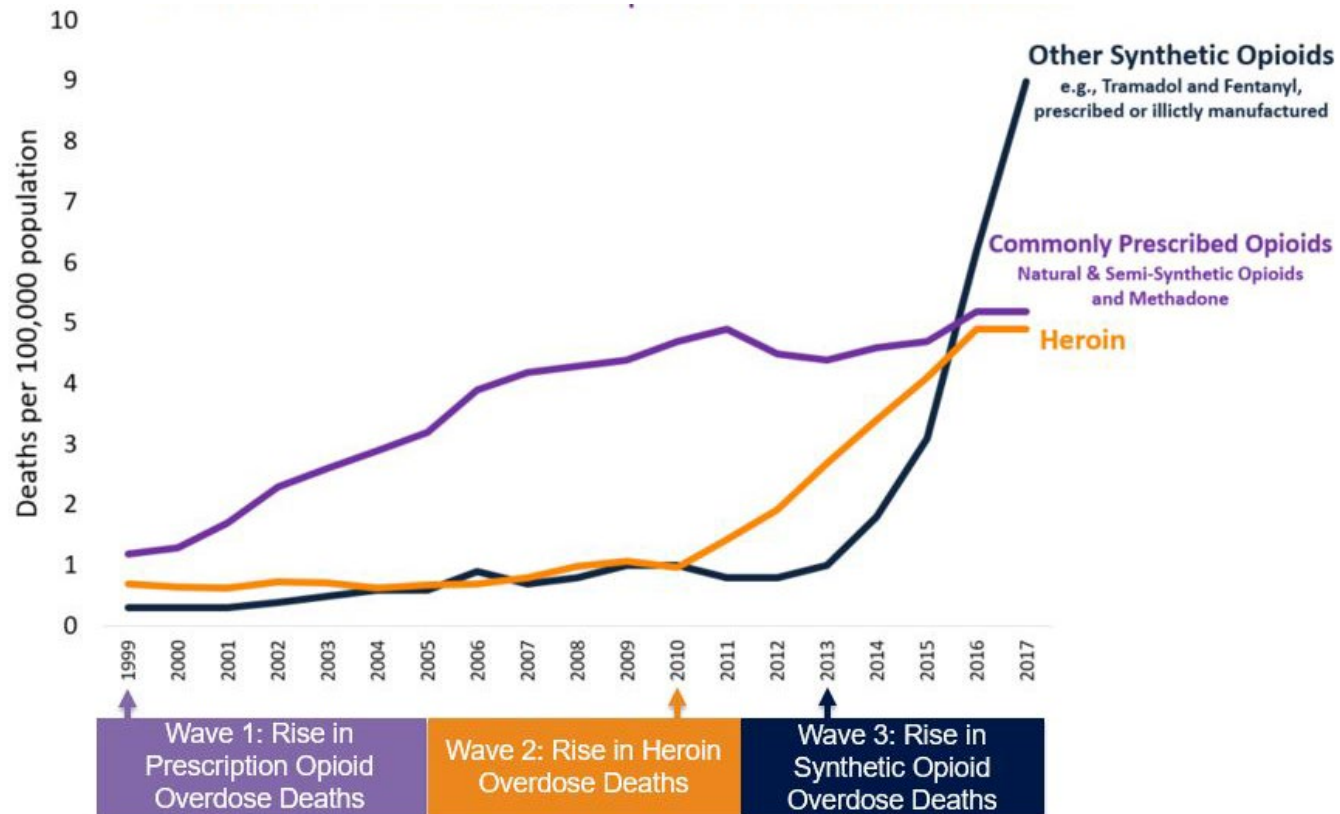
- As many as 1 in 4 people receiving prescription opioids long term in a primary care setting struggles with addiction.
- A 2017 study demonstrated risk of long term opioid use increases with each day of medication supplied starting at the 3rd day, with the sharpest increases after the 5th and 31st day.
- People who are addicted to prescription opioids are 40 times more likely to be addicted to heroin.

## Risk for overdose

- Dosages at or above 50 MME/day increase risk for overdose by at least 2 times the risk at under 20 MME/day.
- Even relatively low dosages (20-50 MME/day) increase risk of overdose.
- Higher dosages haven't been shown to reduce pain over the long term.

**Anyone can  
become addicted  
to opioids,  
even when  
prescribed by  
a doctor.**

# THE EPIDEMIC



SOURCE: National Vital Statistics System Mortality File.

In the U.S., almost 400,000 people died from an overdose involving opioids.

On average, 130 Americans die every day from an opioid overdose.

# THE IMPACT IN OKLAHOMA

## Opioid Use Disorder

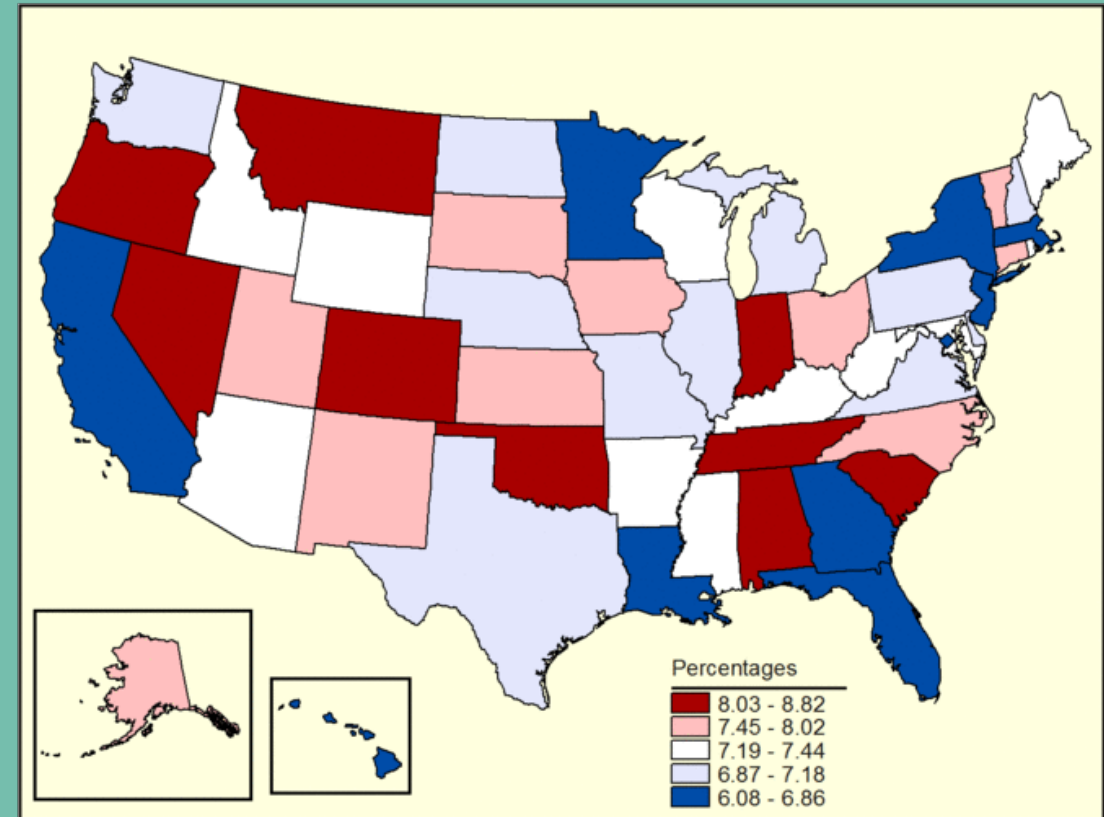
Approximately 153,000 (4.8%) of Oklahomans aged 12 years and older self-reported misuse of prescription pain relievers in the past year compared to 4.5% in the U.S.

An estimated 10,000 Oklahomans aged 12 years and older used heroin in the past year.

The prevalence of past-year nonmedical use of prescription opioids is twice as high among the 18 - 25 year age group as compared to the 12 - 17 and 26-and-older age groups in Oklahoma.

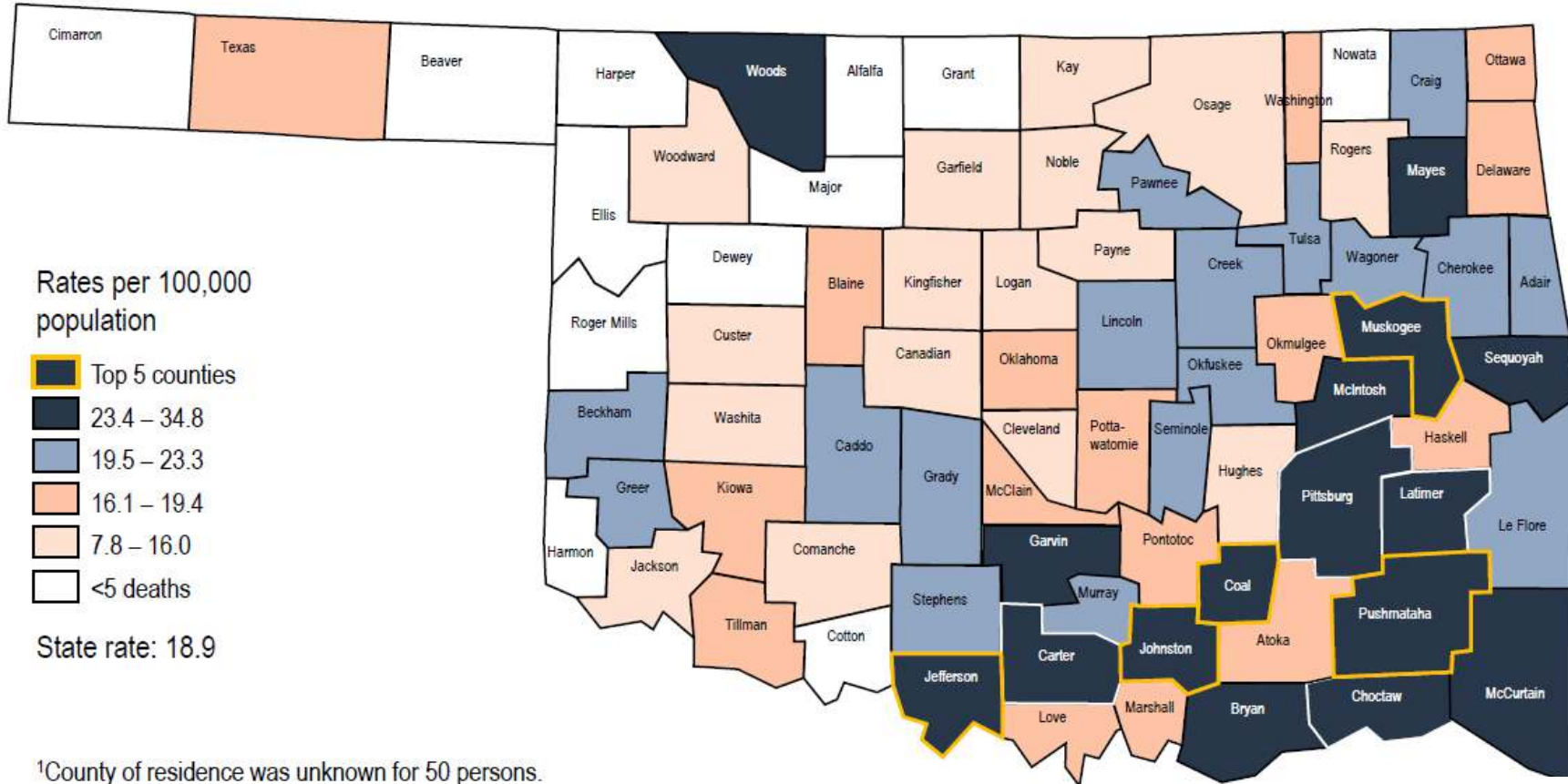
There were more than 28,000 admissions for opiate and heroin treatment through state services from FY12 to FY18.

Pain Reliever Misuse in the Past Year among Youths Aged 18 to 25, by State: Percentages, Annual Averages Based on 2016/17 NSDUHs



# THE IMPACT IN OKLAHOMA

Unintentional Poisoning Death Rates by County of Residence, 2012-2016



<sup>1</sup>County of residence was unknown for 50 persons.

Source: OSDH, Injury Prevention Service, Fatal Unintentional Poisoning Surveillance System (abstracted from Medical Examiner reports)

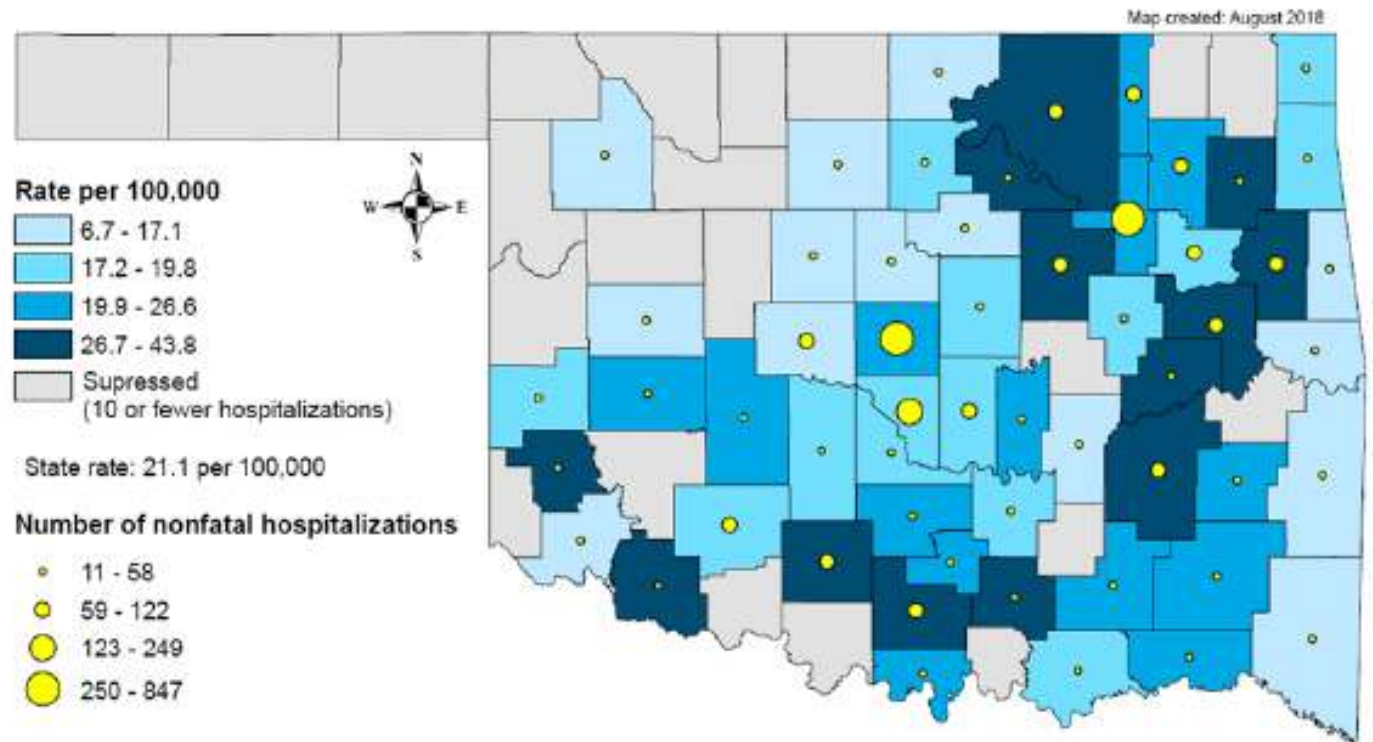


# THE IMPACT IN OKLAHOMA

## Nonfatal Inpatient Hospitalizations Due to a Non-Heroin Opioid Involved Overdose by County of Residence, 2012-2016

### Opioid Overdose

- There were approximately 4,400 nonfatal hospitalizations from 2012 to 2016 because of an opioid-related overdose in state-licensed, acute care hospitals. About 95% of these involved a prescription opioid.



Source: Oklahoma Discharge Public Use Data File, Center for Health Statistics, Oklahoma State Department of Health. Additional E-codes for the 2014 data, provided by OSDH, Injury Prevention Service, were merged with the 2014 Public Use Data File. Data were analyzed and compiled by the Oklahoma Department of Mental Health and Substance Abuse Services, Prevention Service.

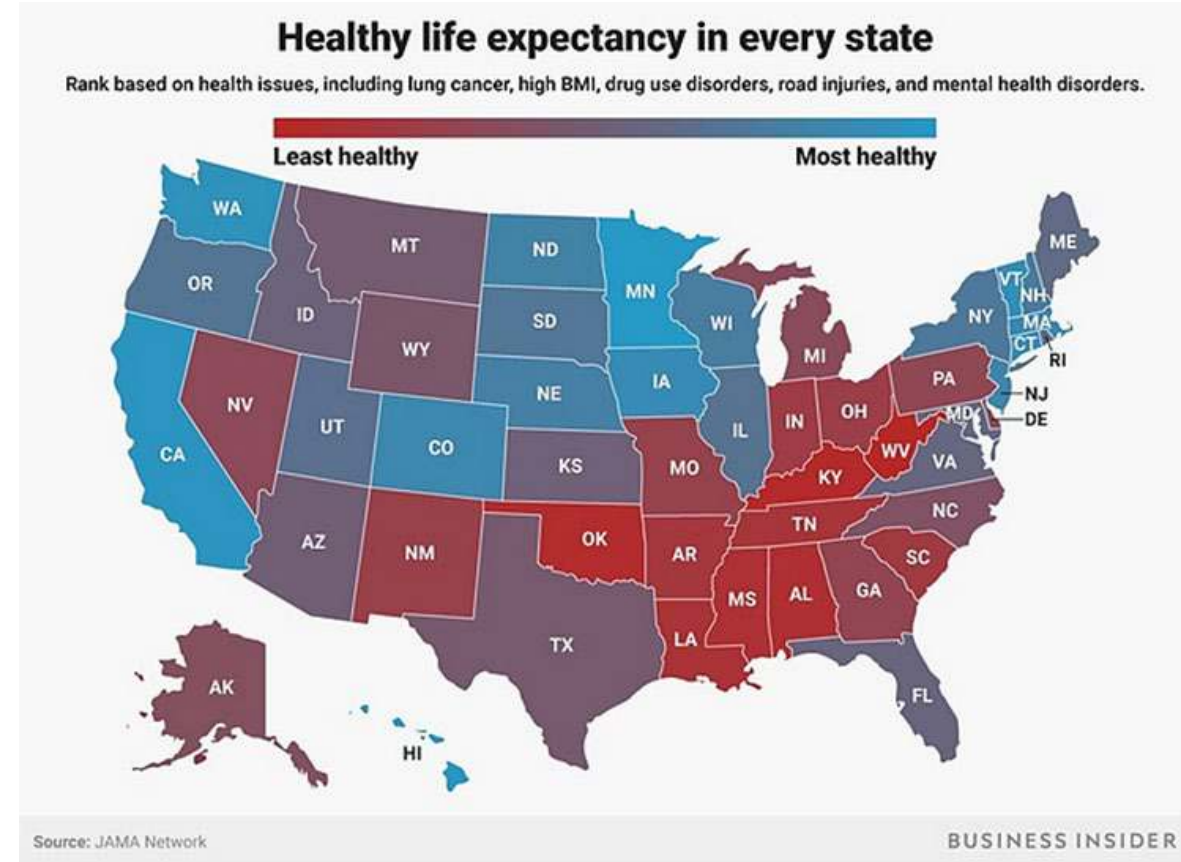
Note: Hospital discharges involving a non-heroin involved overdose are identified using ICD-9-CM Principal diagnosis codes: 965.00, 965.02, 965.09 OR first-listed valid external cause of injury codes (E-codes): E850.1, E850.2. Hospitalizations in 2015 and 2016 are identified using ICD-9-CM codes mentioned above as well as ICD-10-CM principal diagnosis codes: opioid T40.0x, T40.2x, T40.3x, T40.4x, T40.60 AND a 6th character of 1, 2, 3, or 4 AND a 7th character of A, D, or missing. Inpatient hospital discharge data are only collected from Oklahoma state licensed acute care hospitals. This excludes Indian Health Service (IHS)/tribal hospitals, non-acute care, or federal hospitals such as Veteran's Affairs (VA) and military hospitals.



# Lives Cut Short

- An April, 2018 study in the Journal of the American Medical Association named Oklahoma as one of two states with the highest increase in the probability of premature death for ages 20-55 (-2 years).
- The average lifespan of Oklahomans with mental and addictive disorders is far shorter than that of the general population:

General Population - 75.9 Years of Age  
Untreated Mental Illness - 57.5 Years  
Untreated Substance Use - 43.2 Years  
Untreated Dual Conditions - 40.6 Years



# Lives Cut Short

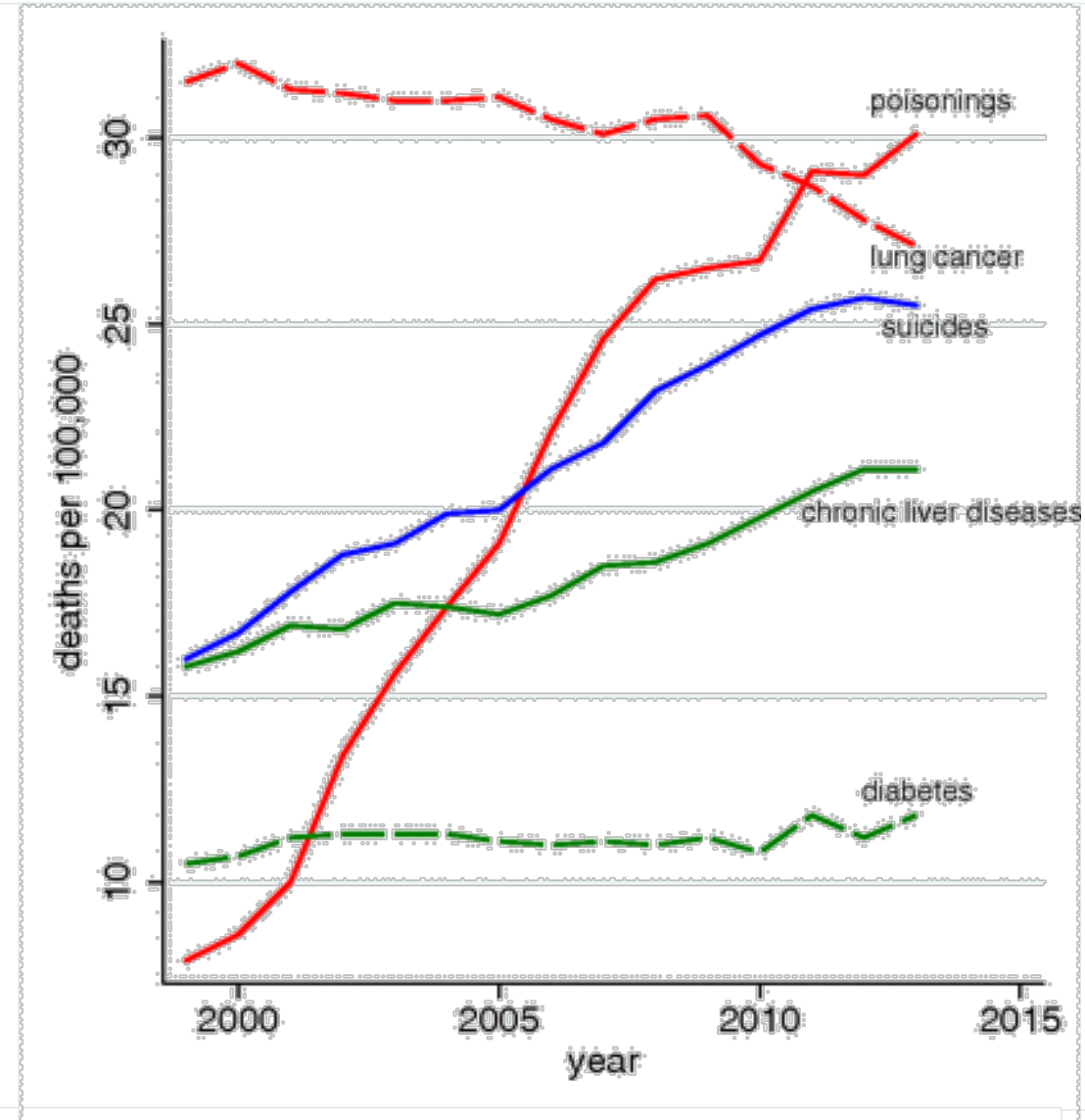
Three causes of death are driving the decreased life expectancy:

1. Drug overdose
2. Suicide
3. Liver disease due to alcohol

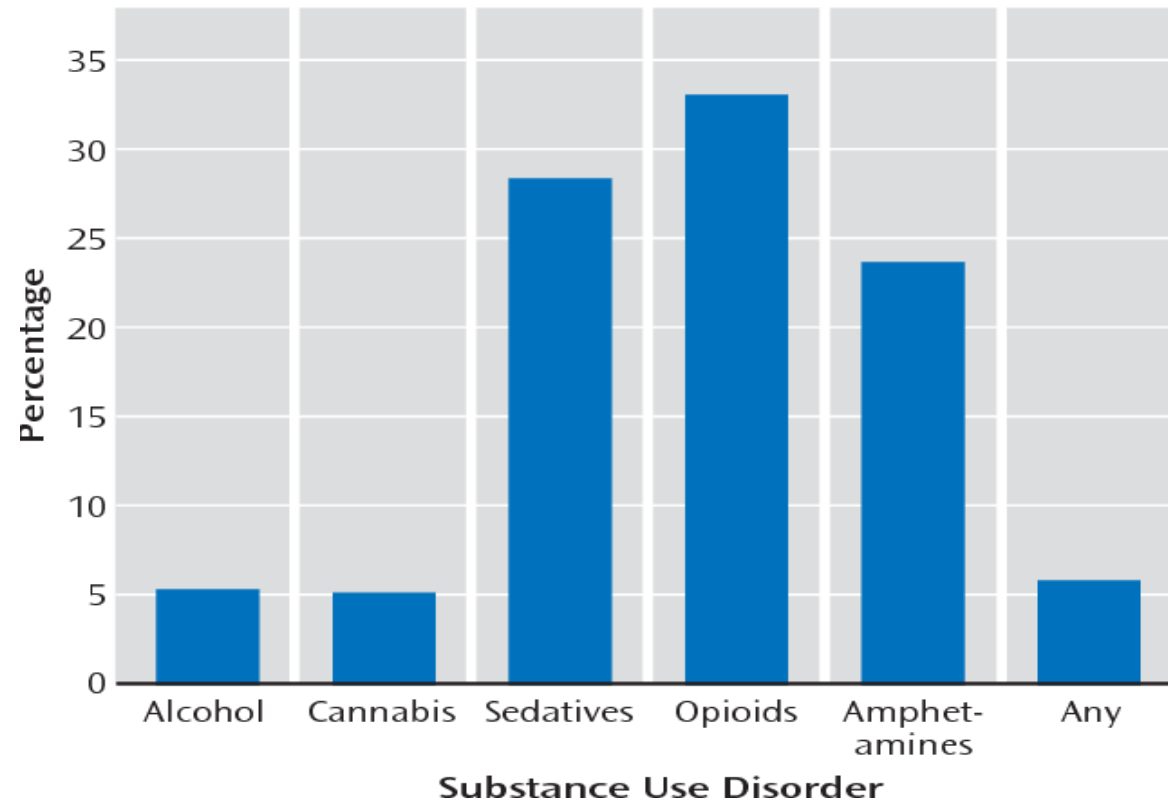
Upward trends in these areas are large enough to drive up all-cause midlife mortality.

Who is being impacted?

- Geographically diverse
- Primarily middle-aged
- Rates of death for the three causes are higher for men than women. But, mortality trends are identical for men and women with a high school degree or less.



# PTSD & Substance Abuse Disorder



Trauma, PTSD, and substance use disorders: findings from the Australian National Survey of Mental Health and Well-Being. *American Journal of Psychiatry*, 2006.

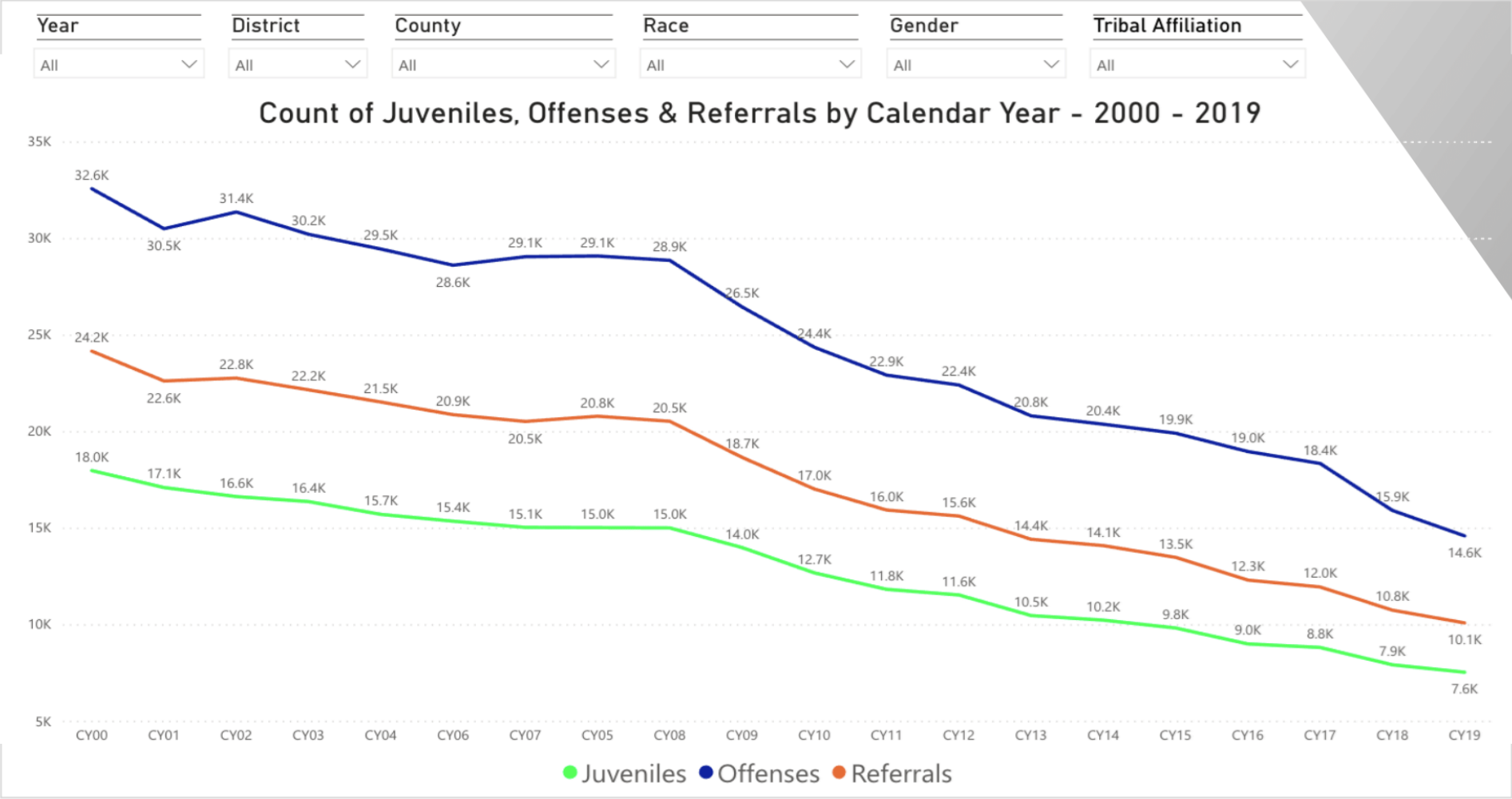
# Parenting, Opioids & Mental Illness

- ▶ Almost two-thirds (62 percent) of parents with opioid use disorder have a mental illness.
- ▶ More than one in five parents with opioid use disorder had suicidal thoughts and behaviors in the past 12 months.
- ▶ Twenty-five percent of parents with opioid use disorder had a major depressive episode in the past 12 months.
- ▶ Twenty-three percent of parents with opioid use disorder had a serious mental illness (e.g., schizophrenia, severe bipolar disorder, severe major depression) in the past 12 months.

# Opioids & Juvenile Justice

- ▶ Not a significant presenting “drug of choice” for young people involved in the juvenile justice system.
- ▶ Anecdotally, there is some demographic differences where it is drug of choice.
- ▶ A large number of juveniles identify that their parents are actively or have been previously in treatment for addictive disorders.

# New Technology Driven Data Real-time Data To Spotlight Changing Trends

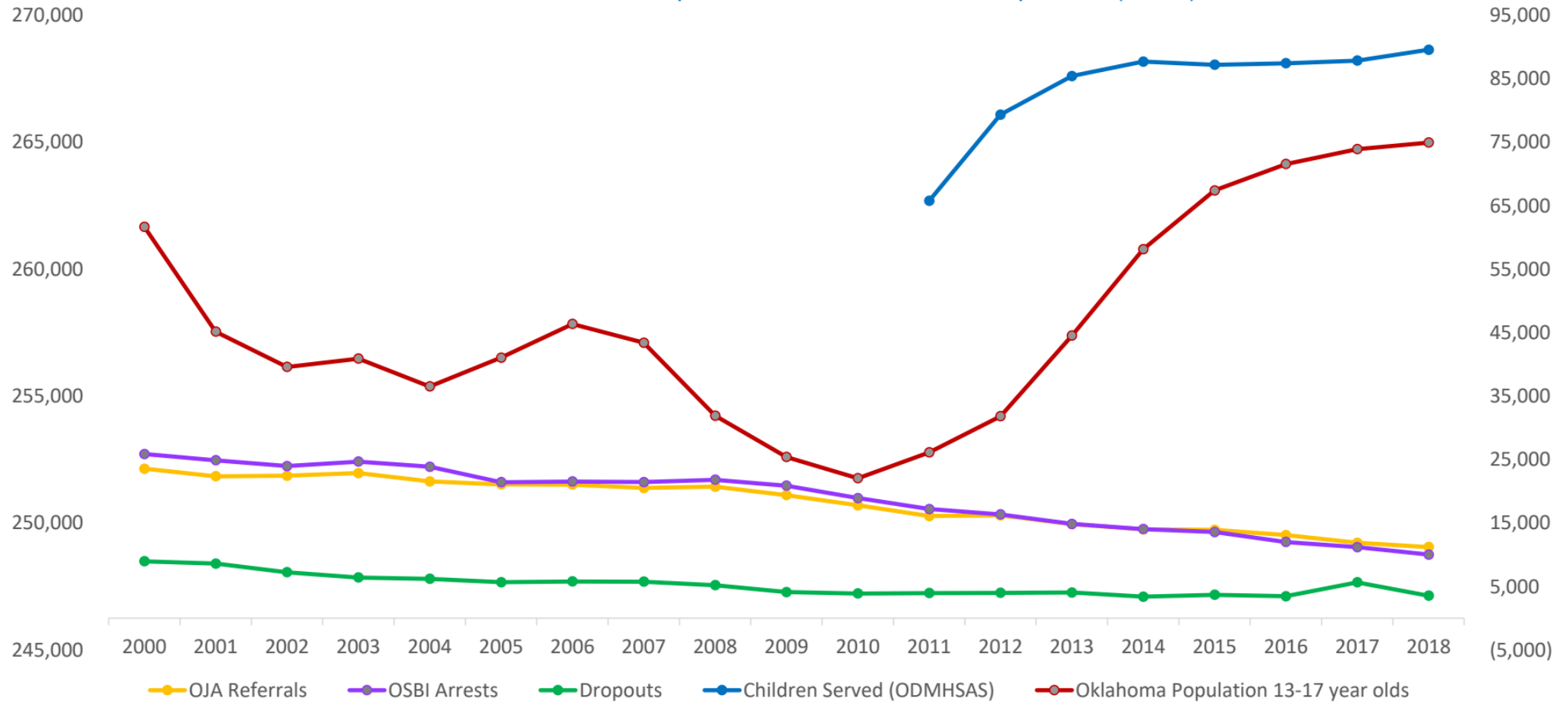


*Source: Juvenile On-Line Tracking System (JOLTS) through Microsoft BI Solutions*



# Adjusting To A Changing Environment

Total OJA Referrals – Total OSBI Arrests – Dropouts - Oklahoma Juvenile Population (13-17)



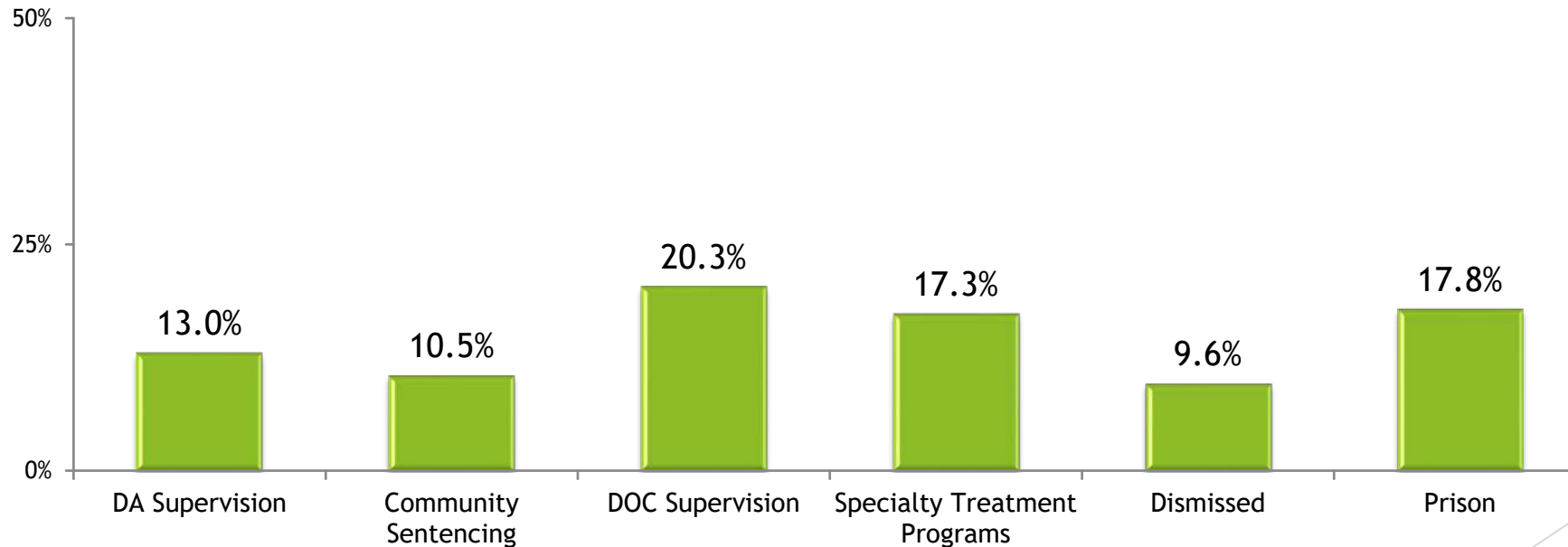
\*\*OJA Referrals – Population: 14 to 19 years of age. - OSBI Total Arrests – Population: Under 10 to 17 years of age.

Source: OSBI FY2000-FY2018 Annual Reports - Juvenile On-Line Tracking System (JOLTS) – National Center for Juvenile Justice/US Census

# Innovative Approaches (Criminal Justice)

- By serving as central screening hubs, county jail-based screenings save diversion program resources and avoid duplicative assessment processes!
- 26,329 felony defendants screened in 37 counties!
- 22,768 final dispositions have been recorded.

**Final Disposition**

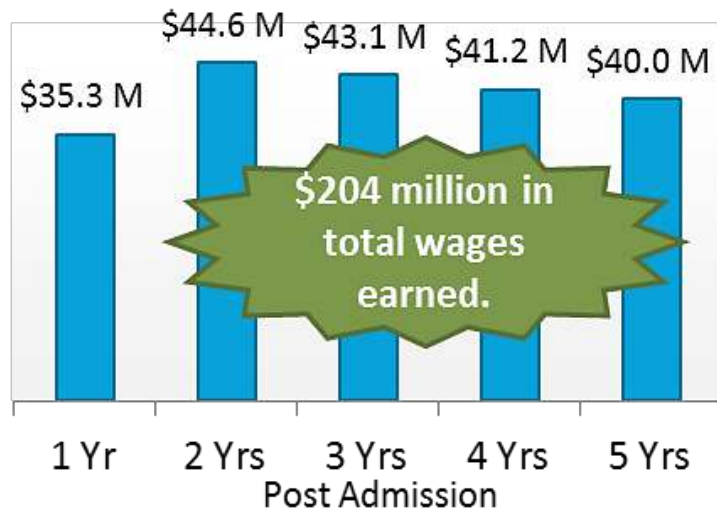


# Innovative Approaches (Criminal Justice)

Another measure of success is the success drug courts have in helping individuals to again be contributing members of society.

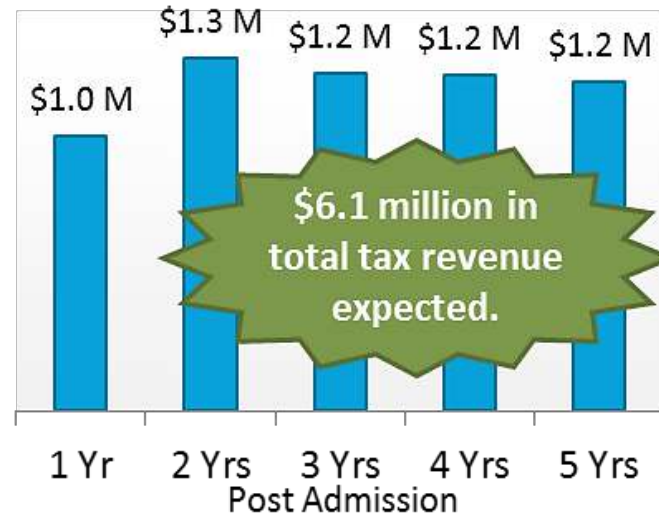
## Annual Wages Earned

by 4,076 Graduates from FY'10 – FY'12



## Annual Taxes Expected to be Paid

by 4,076 Graduates from FY'10 – FY'12



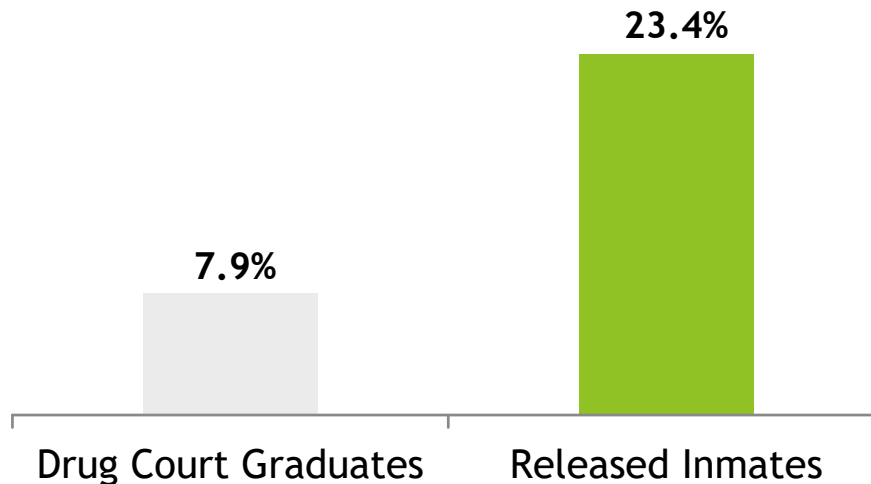
If these 4,076 graduates had gone to prison, the state would have expended \$193,610,000 to incarcerate them for an average of 3 years each.

# Innovative Approaches (Criminal Justice)

The annual cost of drug court is \$5,000 compared to \$19,000 for incarceration. That alone is significant. But, what really tells the story are the outcomes:

- **95.4% drop** in unemployment.
- **119.3% jump** in monthly income.
- **116.7% increase** in participants with private health insurance.
- **81.1% increase** in participants who are able to again live with their children.

## Lower Incarceration Rates for Graduates

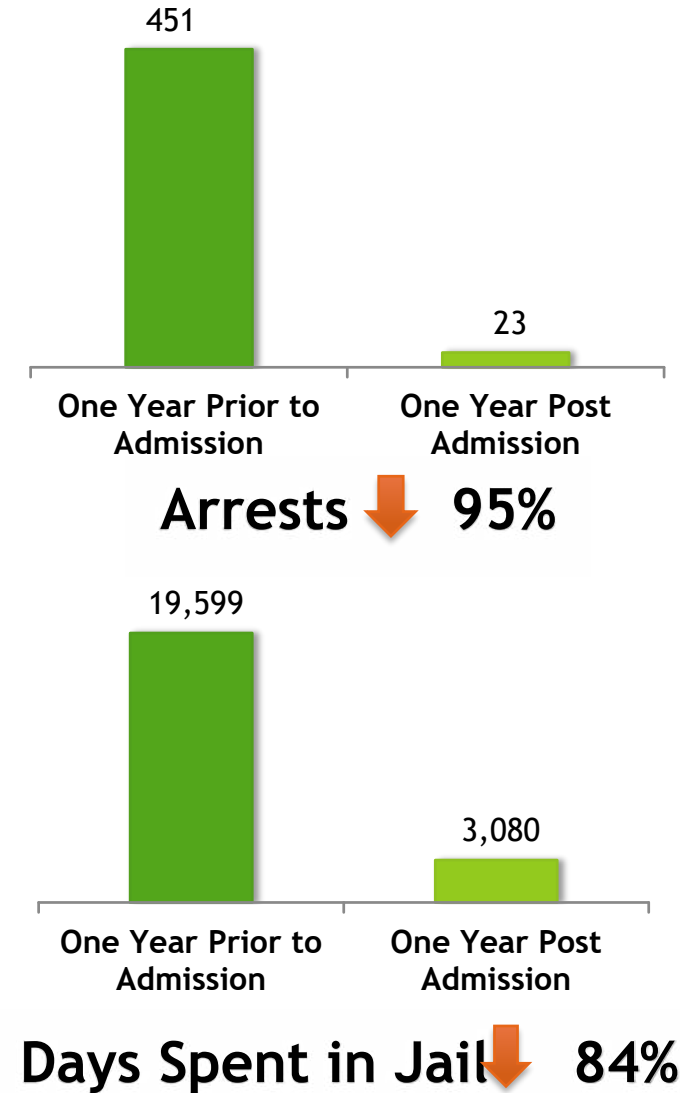
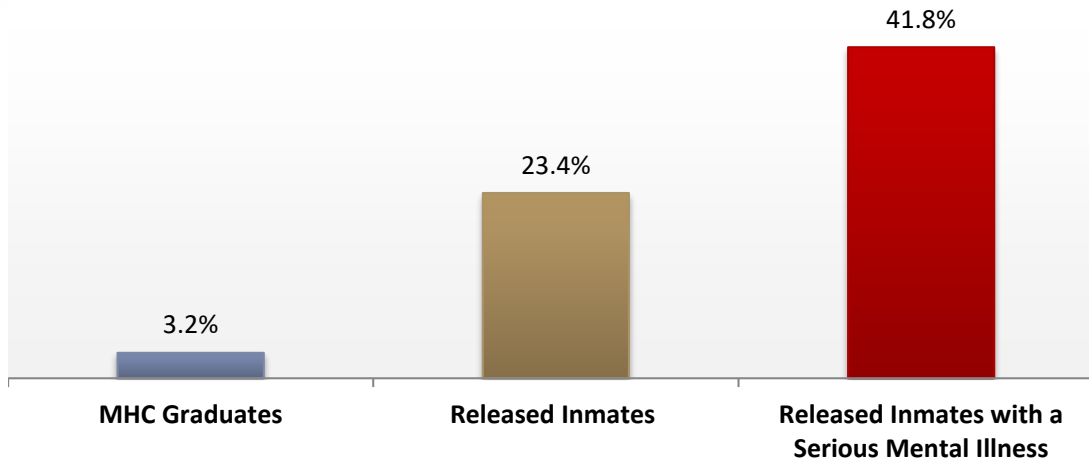


# Innovative Approaches (Criminal Justice)

## Mental Health Courts

Lower rates of incarceration and better outcomes.

**Low Incarceration Rate  
Among 434 Graduates Out an Average of 3 Years**




**A RIVER CUTS  
THROUGH A ROCK  
NOT BECAUSE OF  
ITS POWER, BUT  
ITS PERSISTENCE.**

THETHINGSWE SAY

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# Thank you!

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