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Raj Thakrar
University of Vermont

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Opiate Abuse in Brandon, VT: Empowering Support Systems

Raj Thakrar M.S.

Family Medicine
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George Fjeld M.D., Preceptor

Susan P. White, Education Resource Coordinator
What is the problem?

- Primary care physicians and emergency physicians have reported a surge in opiate abuse within the state of Vermont.
- It is being labeled as a public health epidemic and crisis, with a 2013 mortality rate of almost double what it was in 2012.
- There are several factors that play a role in why Vermont has seen such a growth in opiate abuse, from easy access to opiate dealers in major urban cities such as New York, Boston, and Philadelphia to a decrease in law enforcement coverage in rural areas of the state.
- One major element, and the focus of this project, is the lack of communication and awareness of resources for family members of abuse victims.
- Opiate abuse does not only affect the victim; it also affects their relationships, families, and friends.
- The major barrier to family members and friends seeking emotional, physical, spiritual, and mental support is the stigma that surrounds opiate abuse.
- If people don’t talk about the issue, this barrier cannot be overcome.
- There needs to be more information available to families, so they may seek out the appropriate resources and support needed to make strides towards helping their loved ones through their addiction.
- This lack of communication among families in the community also contributes to the public health problem and the stigma of substance abuse; it results in a vicious cycle.
Public Health Costs

- **Financial Costs**
  - Total US societal costs of opioid abuse in 2007 was $55.7 billion (in 2009 USD)$^3$
    - 45% of this ($25 billion) was in health care costs$^3$
  - Almost 80% of inmates in Vermont prisons are incarcerated due to drug-related charges$^1$
  - Incarceration costs the state of Vermont $1,120/week$^1$
  - Treatment at a state-financed program costs $123/week$^1$

- **Emotional Toll$^4$**
  - Family stress is immeasurable
  - Constant worry for loved one
  - Financial costs to fuel the habit are steep
  - Due to the stigma surrounding opiate abuse, families may not seek out appropriate resources
The Community’s Perspective

- Interview 1: Name Withheld, Rutland Police Force, Executive Director of Project VISION
  - He has been on the Rutland police force for over 35 years
  - As executive director of Project VISION (Viable Initiatives and Solutions Involving Neighborhoods), he facilitates information sharing among different community groups and brings together existing resources to improve the lives of substance abuse victims
  - He has noted a large increase in substance abuse within Rutland county, which he acknowledges is also occurring elsewhere in New England
  - He states that “the most commonly abused drugs in the past 10 years have been heroin and oxycodone,” which are both opioid agonists
  - “Although the major barrier to families seeking help for their loved ones is the abuse victim him/herself, the lack of awareness of family resources can contribute greatly”
  - “There is certainly a stigma that surrounds opioid abuse, and this issue causes families a great deal of stress”
  - His advice to the medical community: “When prescribing pain medication, prescribe fewer doses or pills, and if patients require more medication, have them return to the office for a follow up”
The Community’s Perspective

- **Interview 2: Name withheld, Administrator at Serenity House**
  - He has worked with substance abuse victims at Serenity House, a recovery program in Wallingford, VT, for decades
  - “Addiction and abuse certainly affect personal relationships. Addiction not only affects families, but friends, employers, and the community”
  - “About 30-40% of victims have family accompany them to recovery meetings”
  - When asked about why more families don’t accompany victims to recovery programs or why they don’t seek out support or counseling programs themselves: “There is a certain stigma that surrounds opiate abuse. Unlike alcohol abuse, opiates have a sense of ‘criminality’ about them. Victims often use a mix of illegal substances such as heroin and prescription medications that they may have obtained illegally. This makes families very uncomfortable – and forms a barrier to seeking support services. Other reasons for families not accompanying victims include burned bridges between victims and family, and, in some cases, the victims not wanting their families to be present”
  - When told about the pamphlet, he states “I think it’s a great idea! It should be made available to the general public – in doctor’s offices and churches, and other places of public gathering”
  - His advice to the medical community: “Always try to be aware of what is going on with your patients. You may not realize that your patient has a substance abuse issue, and it would help if you ask most, if not all, of your patients about drug use”
Intervention and Methodology

- **Intervention**
  - Try to reinforce the notion that opiate abuse is a medical condition and not a moral weakness, and that support is available. I hoped to accomplish this by creating a simple pamphlet that is aesthetically designed to be both inviting and reassuring. It also includes the importance of talking about opiate abuse, and provides some of the resources available specifically for family and friends of opiate abuse victims. The overall goal is to encourage family members to seek support themselves, in addition to actively support their loved ones through the recovery process.

- **Methodology**
  - I started by searching the web for significant public health issues affecting Rutland County, and specifically Brandon, VT.
  - After identifying opiate abuse as a public health concern of epidemic proportions, I approached Dr. Fjeld about this issue, and he explained that it was one he felt needed to be addressed.
  - As a family physician, he informed me of the lack of information awareness among families of opiate abuse victims, and expressed his concern for families not actively seeking out support services due to the fear of being labeled in the community.
  - I also read up on a few articles discussing the stigma surrounding opiate abuse and the importance of family support.
  - After finding several support programs in Rutland County for abuse victims, I made a list and called many of them to inquire about services offered to family members.
  - Once I identified which programs offer family support, I compiled a new list, and created a pamphlet that included these programs and their contact information.
Results

- **Family Support Groups**
  - When researching substance abuse recovery programs and support groups, I found that Vermont, and Rutland County specifically, had several options available to those seeking help.
  - I also found, unsurprisingly, a much smaller number of support groups for families of substance abuse victims.
  - In speaking with members of the community, it seemed that family support and involvement in an opiate abuse victim’s recovery is essential to a successful recovery, which is further supported in the literature.
  - The same community members also expressed concern over the small number of victims whose families would accompany them to recovery meetings.

- **Pamphlet**
  - Designed to be inviting and comforting, with positive images.
  - Stresses that the reader is not alone, and that help is available.
  - Discusses the importance of communication and seeking out support services.
  - After identifying which programs offer services for families, I added them to the pamphlet.
  - Please see the attached pamphlet.
Effectiveness and Limitations

Effectiveness

- Name withheld, D.O. “I think the idea of incorporating family support into the recovery process for substance abuse victims is a great idea! And I also think that providing support for families and friends, being able to help them help their loved ones is a novel way to approach this problem. Substance abuse is a family issue, not just one that affects only the patient. What you are doing will certainly help this community.

- I also think that it is essential to abolish this stigma that surrounds opiate abuse. It certainly is a barrier to seeking support. Your pamphlet will help with that – at least it will help facilitate the conversation. It is an effective intervention.”

Limitations

- Opiate abuse is a rapidly growing and very complex public health issue. It is difficult to adequately assess the results of an intervention within 5 weeks, let alone tackle the issue of family support and social stigma surrounding opiate abuse

- It may also take some time for families and victims in the community to fully dispel the stigma that surrounds opiate abuse accept it as a medical condition that requires both a holistic approach and medical assistance

- Due to Brandon’s small population size, it is difficult to quantitatively assess the opiate abuse problem. Several patients go to other medical facilities because they are worried about running into community members if they visit Brandon Medical Center. Furthermore, cost statistics specific to Brandon, VT are virtually non-existent because of the lack of accounting resources designated for this purpose
Future Directions

Given the limitation of 5 weeks to complete this rotation, students may consider building upon this current project in the following ways:

- Educating patients about the available family support resources as part of the encounter when seeing substance abuse victims and families of substance abuse victims
  - Possible methods of education include verbal advise, instruction, and handing out this pamphlet in the exam room
- Scheduling follow up interviews with families of abuse victims and assess whether they sought out specific resources after reviewing the pamphlet

There are more resources and programs starting up in Rutland County that address this growing issue of opiate abuse, so future students may consider improving and updating the pamphlet with information from these new resources and programs

- Students may also consider collaborating with members of other organizations in Rutland county, such as the Rutland United Way, and developing an opiate abuse campaign that incorporates the importance of receiving not only medical treatment, but also emotional and psychological support. The focus on families can be emphasized in this campaign
References


