

# Community based interventions Opioid misuse: Overcoming challenges for families

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# The overdose crisis is national, but the impact is personal.





# Overdose Prevention Strategy

## Primary Prevention

Preventing substance use disorder is the first step towards addressing overdoses. Learn about effective prevention programs and safe prescribing practices.

## Harm Reduction

Harm reduction is critical to keeping people who use drugs alive and as healthy as possible. Read the research and reduce stigma.

## Evidence-Based Treatment


When a person is ready, high-quality treatment must be available without delay. Help improve access to treatment.

## Recovery Support

Recovery support services can lead to better long-term outcomes, especially when available in communities where they are needed. Explore different types of recovery services.



## Opioid knowledge and perceptions among Hispanic/Latino residents in Los Angeles

Jennifer B. Unger, PhD , Gregory B. Molina, BA, and Melvin F. Baron, MPA, PharmD  
Keck School of Medicine and School of Pharmacy, University of Southern California, Los Angeles, CA, USA

- Hispanic communities need **more information about the process by which prescription opioid use can lead to OUD**, emphasizing the importance of not sharing opioids and recognizing when a loved one is beginning to develop OUD.
- important for Hispanic family and friends of opioid users to understand **how to obtain and use naloxone** for overdose reversal
- **Culturally centered health education programs**, disseminated effectively to community members, are needed



ELSEVIER



Short communication

## The opioid epidemic among the Latino population in California

Avelardo Valdez <sup>a,\*</sup>, Alice Cepeda <sup>a</sup>, Jessica Frankeberger <sup>b</sup>, Kathryn M. Nowotny <sup>c</sup>

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- Particular attention should be given to identifying and addressing **barriers (such as stigma) that prevent Latinos from seeking medical, social, and drug treatment services** at state and county levels, particularly among vulnerable populations such as immigrants and agricultural workers
- Policymakers should consider **cultural factors in providing harm reduction services** to mitigate the consequences of opioid use among this population.
- Research is needed to **understand how distinct contexts, including healthcare and treatment access**, impact the Latino population



**1. Implement a comprehensive, holistic approach—*“Need for more holistic approaches...so many issues in their communities, housing, employment.”***

**2. Create culturally tailored public awareness campaigns in native languages—*“Don't see commercials talking about addiction in Spanish, none directed to Latino communities.”***

**3. Form diverse partnerships—*“Successful practitioners tap into partnerships with CBOs.”***

**4. Utilize schools—*“Family liaison, in schools with large Latino populations, is an employee that is Latino, serves as an interpreter, organizes the services, becomes ‘everything’ for the families.”***

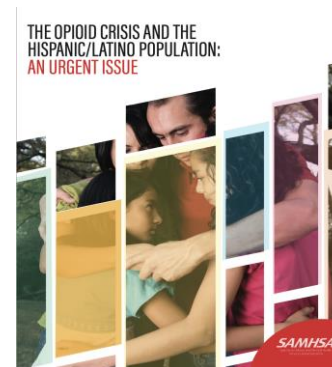
**5. Leverage faith-based organizations—*“Church is the last institution standing to provide supports [and has a] historically important role in dire circumstances.”***

**6. Build a bilingual, culturally aware and respectful workforce—*“Being culturally aware...takes more than didactic.”***

**7. Develop culturally and linguistically appropriate prevention and treatment—*“We need to have the treatment available for Latinos and tailored for Latinos.”***

**8. Link to primary care—*“Getting them back to primary care physician services to address other chronic medical conditions impacted by OUD.”***

**COMMUNITY-INFORMED STRATEGIES TO ADDRESS  
OPIOID MISUSE AND OUD IN HISPANIC/LATINO  
COMMUNITIES**



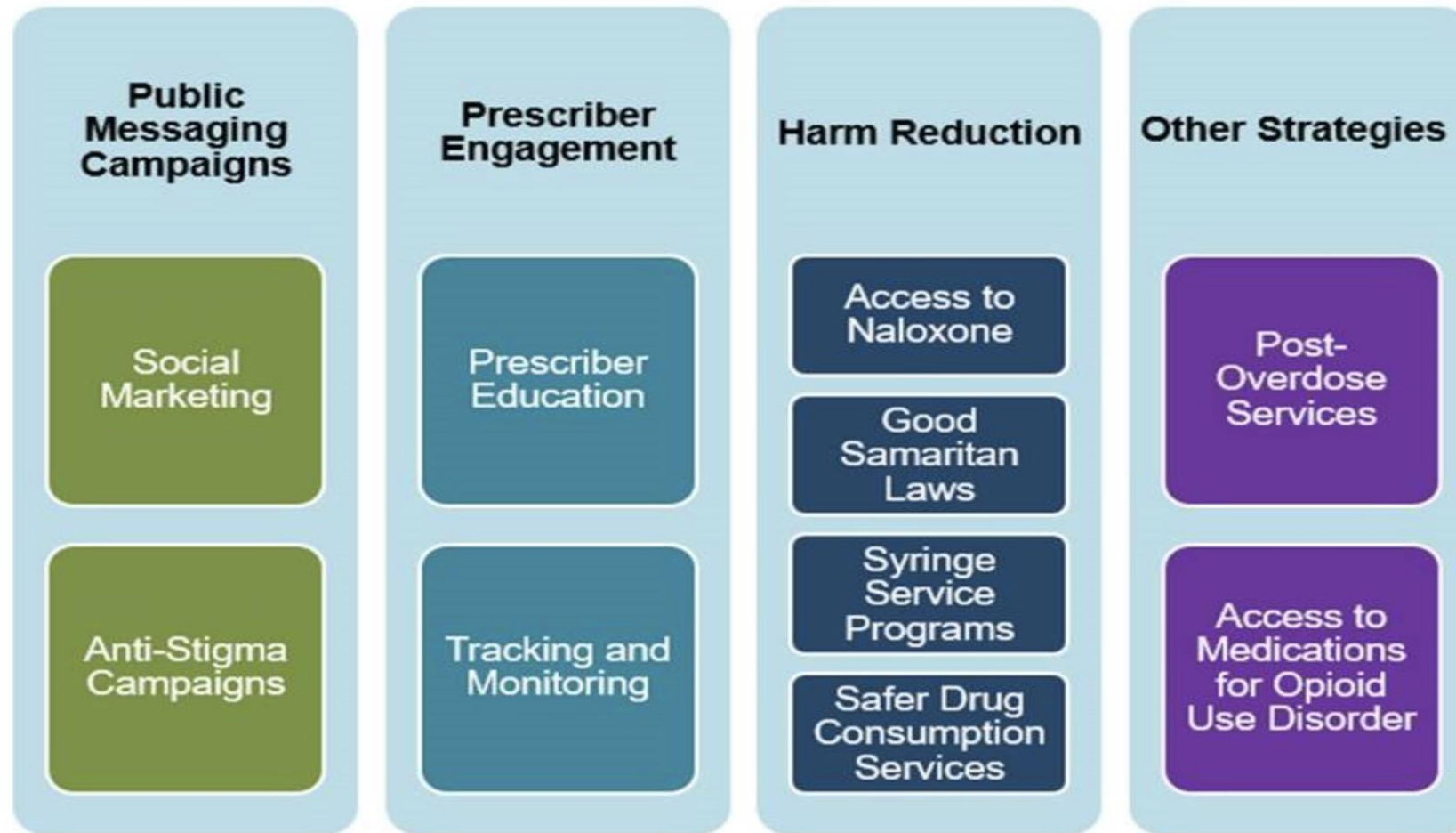
# A Community of Partners Against Addiction

- Individuals
- Families
- Schools/ Colleges
- Workplace
- Faith-based organizations
- Governments (local, state, federal)
- Law Enforcement & Judiciary
- Community Based Organizations
- Patient and Family groups
- Other Non-governmental Organizations (NGOs)



(Adobe Stock, n.d.)

## Opioid Prevention Strategies at a Glance



<https://opioid-toolkit.mhoa.com/evidence-based-opioid-prevention-examples/>

# PREVENCIÓN



## Adolescentes y opioides



Professionals Events

ADDICTION A-Z

HELP & EDUCATION

OUR WORK

- Training & Courses
- Professionals
- Recovery App

### Spanish | Español

La Campaña de Prevención de Opioides  
(Opioid Prevention Resources in Spanish)

<https://www.addictionpolicy.org/post/kit-de-herramientas-de-la-campa%C3%B1a-de-prevenci%C3%B3n-de-opioides>

## Prevention Resources by Language

The project was supported by the AmerisourceBergen Foundation, the Ethnic Communities Opioids Response Network – Missouri (ECORN-MO), the Opioid Response Network (ORN) and the Mid-America Addiction Technology Transfer Center (ATTC) to provide open-source, science-backed prevention materials for communities and families with limited English proficiency.



AmerisourceBergen



Doce cosas que los padres pueden hacer para prevenir la adicción

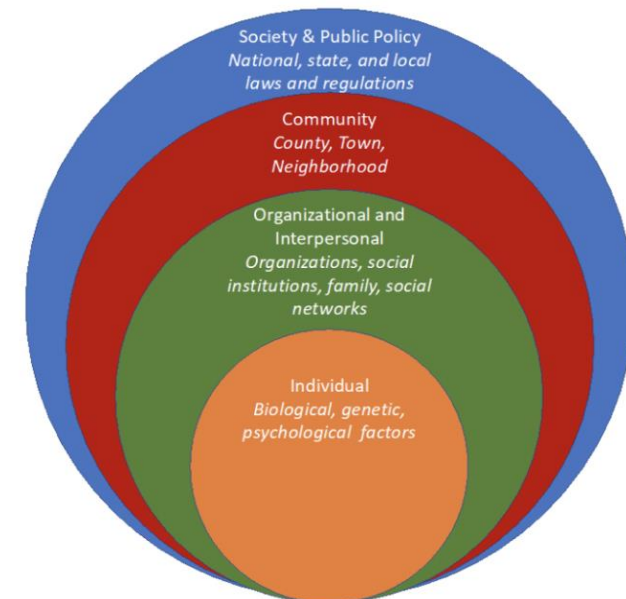
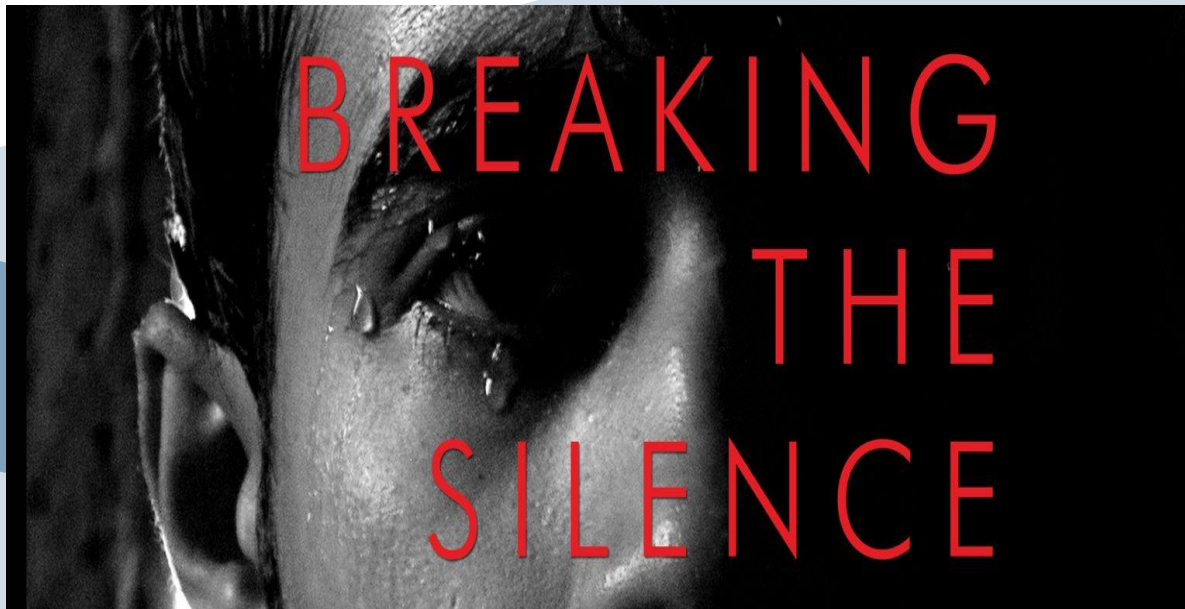




# The Silent Killer

- Takes over the individual and families
- Leads to isolation
- Leads to suffering alone
- Leads to death

# Stigma



# SHATTERPROOF

## Breaking the Stigma of Addiction in Hispanic Communities

by Cristina Rabadán-Diehl October 16, 2020



What I like most about us Hispanics is our diversity and culture richness. Although we come from different countries and cultural backgrounds, the majority of us speak Spanish and share similar values when it comes to family and social norms. We are proud of who we are and where we come from. When we meet for the first time, we gravitate towards each other, speaking in Spanish, and a sense of solidarity and camaraderie is quickly established.

So many things unite us, including our perception of drug addiction and substance use disorders (SUD). Those are topics we don't talk much about. Our lack of understanding very often makes us be judgmental and ashamed. The majority of us don't know that it is a disease and when a loved one has an addiction problem, we tend to either minimize it or we give up, because we believe that recovery is impossible.

<https://www.shatterproof.org/blog/breaking-stigma-addiction-hispanic-communities>



# Words Matter

## Terms to Use and Avoid When Talking About Addiction

Instead of...	Use...	Because...
<ul style="list-style-type: none"> <li>Addict</li> <li>User</li> <li>Substance or drug abuser</li> <li>Junkie</li> <li>Alcoholic</li> <li>Drunk</li> <li>Former addict</li> <li>Reformed addict</li> </ul>	<ul style="list-style-type: none"> <li>Person with substance use disorder<sup>8</sup></li> <li>Person with opioid use disorder (OUD) or person with opioid addiction [when substance in use is opioids]</li> <li>Patient</li> <li>Person with alcohol use disorder</li> <li>Person who misuses alcohol/engages in unhealthy/hazardous alcohol use</li> <li>Person in recovery or long-term recovery</li> <li>Person who previously used drugs</li> </ul>	<ul style="list-style-type: none"> <li>Person-first language.</li> <li>The change shows that a person “has” a problem, rather than “is” the problem.<sup>7</sup></li> <li>The terms avoid eliciting negative associations, punitive attitudes, and individual blame.<sup>7</sup></li> </ul>
<ul style="list-style-type: none"> <li>Habit</li> </ul>	<ul style="list-style-type: none"> <li>Substance use disorder</li> <li>Drug addiction</li> </ul>	<ul style="list-style-type: none"> <li>Inaccurately implies that a person is choosing to use substances or can choose to stop.<sup>6</sup></li> <li>“Habit” may undermine the seriousness of the disease.</li> </ul>
<ul style="list-style-type: none"> <li>Abuse</li> </ul>	<p><b>For illicit drugs:</b></p> <ul style="list-style-type: none"> <li>Use</li> </ul> <p><b>For prescription medications:</b></p> <ul style="list-style-type: none"> <li>Misuse</li> <li>Used other than prescribed</li> </ul>	<ul style="list-style-type: none"> <li>The term “abuse” was found to have a high association with negative judgments and punishment.<sup>9</sup></li> <li>Legitimate use of prescription medications is limited to their use as prescribed by the person to whom they are prescribed. Consumption outside these parameters is misuse.</li> </ul>
<ul style="list-style-type: none"> <li>Opioid substitution replacement therapy</li> <li>Medication-assisted Treatment (MAT)</li> </ul>	<ul style="list-style-type: none"> <li>Opioid agonist therapy</li> <li>Medication treatment for OUD</li> <li>Pharmacotherapy</li> <li>Medication for a substance use disorder</li> <li>Medication for opioid use disorder (MOUD)</li> </ul>	<ul style="list-style-type: none"> <li>It is a misconception that medications merely “substitute” one drug or “one addiction” for another.<sup>6</sup></li> <li>The term MAT implies that medication should have a supplemental or temporary role in treatment. Using “MOUD” aligns with the way other psychiatric medications are understood (e.g., antidepressants, antipsychotics), as critical tools that are central to a patient’s treatment plan.</li> </ul>

Instead of...	Use...	Because...
<ul style="list-style-type: none"> <li>Clean</li> </ul>	<p><b>For toxicology screen results:</b></p> <ul style="list-style-type: none"> <li>Testing negative</li> </ul> <p><b>For non-toxicology purposes:</b></p> <ul style="list-style-type: none"> <li>Being in remission or recovery</li> <li>Abstinent from drugs</li> <li>Not drinking or taking drugs</li> <li>Not currently or actively using drugs</li> </ul>	<ul style="list-style-type: none"> <li>Use clinically accurate, non-stigmatizing terminology the same way it would be used for other medical conditions.<sup>10</sup></li> <li>Set an example with your own language when treating patients who might use stigmatizing slang.</li> <li>Use of such terms may evoke negative and punitive implicit cognitions.<sup>7</sup></li> </ul>
<ul style="list-style-type: none"> <li>Dirty</li> </ul>	<p><b>For toxicology screen results:</b></p> <ul style="list-style-type: none"> <li>Testing positive</li> </ul> <p><b>For non-toxicology purposes:</b></p> <ul style="list-style-type: none"> <li>Person who uses drugs</li> </ul>	<ul style="list-style-type: none"> <li>Use clinically accurate, non-stigmatizing terminology the same way it would be used for other medical conditions.<sup>10</sup></li> <li>May decrease patients’ sense of hope and self-efficacy for change.<sup>7</sup></li> </ul>
<ul style="list-style-type: none"> <li>Addicted baby</li> </ul>	<ul style="list-style-type: none"> <li>Baby born to mother who used drugs while pregnant</li> <li>Baby with signs of withdrawal from prenatal drug exposure</li> <li>Baby with neonatal opioid withdrawal/neonatal abstinence syndrome</li> <li>Newborn exposed to substances</li> </ul>	<ul style="list-style-type: none"> <li>Babies cannot be born with addiction because addiction is a behavioral disorder—they are simply born manifesting a withdrawal syndrome.</li> <li>Use clinically accurate, non-stigmatizing terminology the same way it would be used for other medical conditions.<sup>10</sup></li> <li>Using person-first language can reduce stigma.</li> </ul>



## The Helping to End Addiction Long-term® Initiative

Supporting science-based solutions to the opioid crisis

## HEALing Communities Study

The HEALing Communities Study will test the integration of prevention, overdose treatment, and medication-based treatment in select communities hard hit by the opioid crisis. This comprehensive treatment model will be tested in a coordinated array of settings, including primary care, emergency departments, and other community settings. Findings will establish best practices for integrating prevention and treatment strategies that can be replicated by communities nationwide.

NIH  
**HEAL**  
INITIATIVE

HEALing  
Communities  
Study

<https://heal.nih.gov/research/research-to-practice/healing-communities>



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