



Becoming a Recovery Friendly Region

STIGMA of substance addiction DECEMBER 2021

Olympic 
COMMUNITY *of* **HEALTH**

IN PARTNERSHIP WITH COLLABORATIVE CONSULTING

CLALLAM | JEFFERSON | KITSAP

Land Acknowledgement

Together, we acknowledge, with humility, the indigenous peoples whose presence permeates the waterways, shorelines, valleys, and mountains of the Olympic region. The land where we are is the territory of the Coast Salish Peoples, in particular the Chimacum, Hoh, Makah, S'Klallam, Suquamish, and Quileute tribes on whose sacred land we live, work, and play.



HEALTHY PEOPLE, THRIVING COMMUNITIES



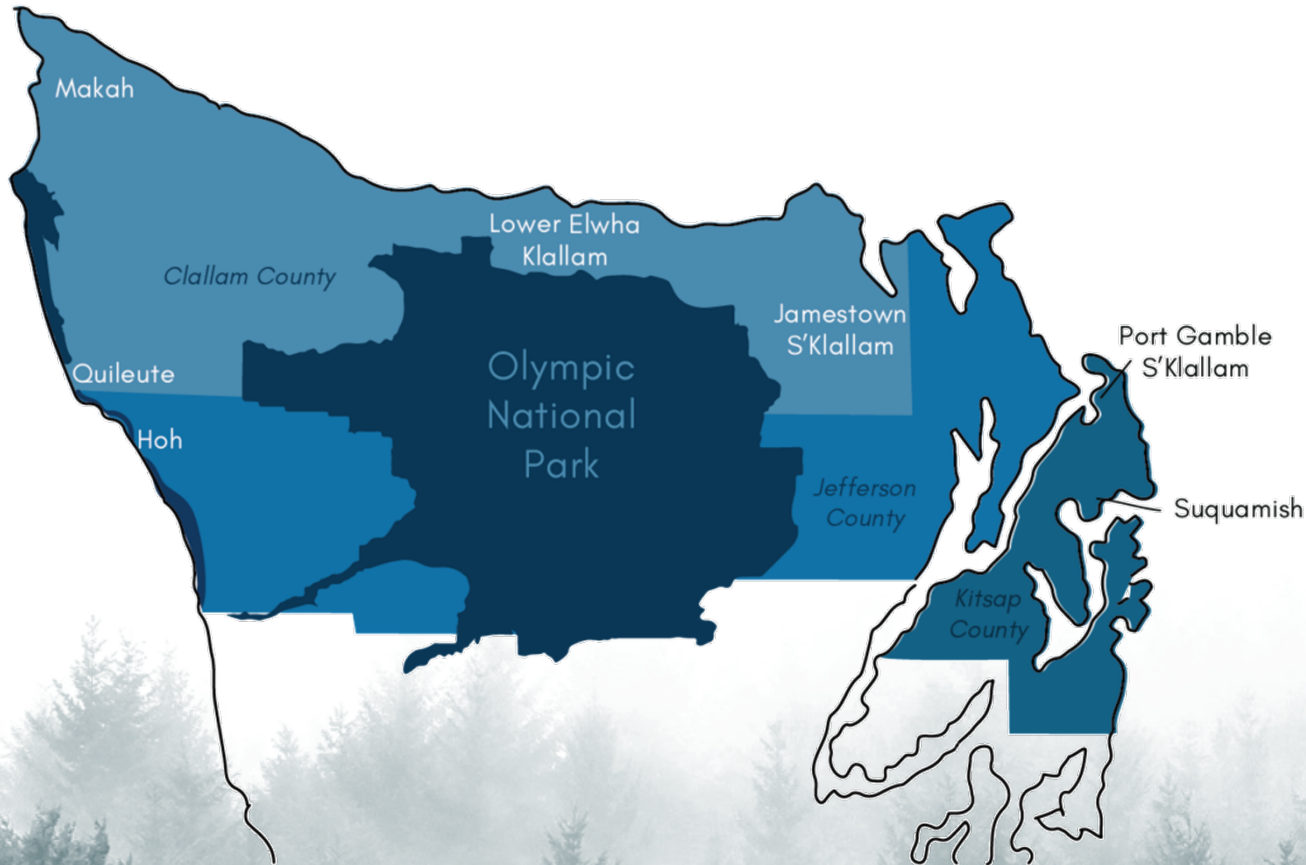
PURPOSE

Tackling health issues that no single sector or Tribe can tackle alone

MISSION

To solve health problems through collaborative action

The Olympic Region



The Olympic region includes Clallam, Jefferson, and Kitsap Counties. We are in the territorial lands of the Sovereign Nations of:

- Hoh
- Jamestown S'Klallam
- Lower Elwha Klallam
- Makah
- Port Gamble S'Klallam
- Quileute
- Suquamish



GOAL

Improve individual and population health
and advance **equity** by addressing the
determinants of health



Reduced substance
misuse & abuse



Access to full
spectrum of care



Individual needs are
met timely, easily, and
compassionately



Long-term,
affordable, quality
housing

STRATEGIES



Convening, learning, & maximizing



Funding coordination



Advocacy & engagement



Data sharing & transparency



Communication



Place-based approaches

Today's agenda



- Acknowledgements
- Stigma overview
- How OCH is responding
- Current state
- Path forward
- How YOU can help
- Resources

Acknowledgements



Cambia Health Solutions
for the funding to address this
important topic



Collaborative Consulting for
their role in compiling and
supporting the research



Regional partners who
contributed time and energy to
informing this presentation

What is STIGMA?

“An attribute that is deeply discrediting from a whole and usual person to a tainted, discounted one.”

– Erving Goffman, 1963

STIGMATIZATION



Labeling



Negative stereotyping



Separating “us” from “them”

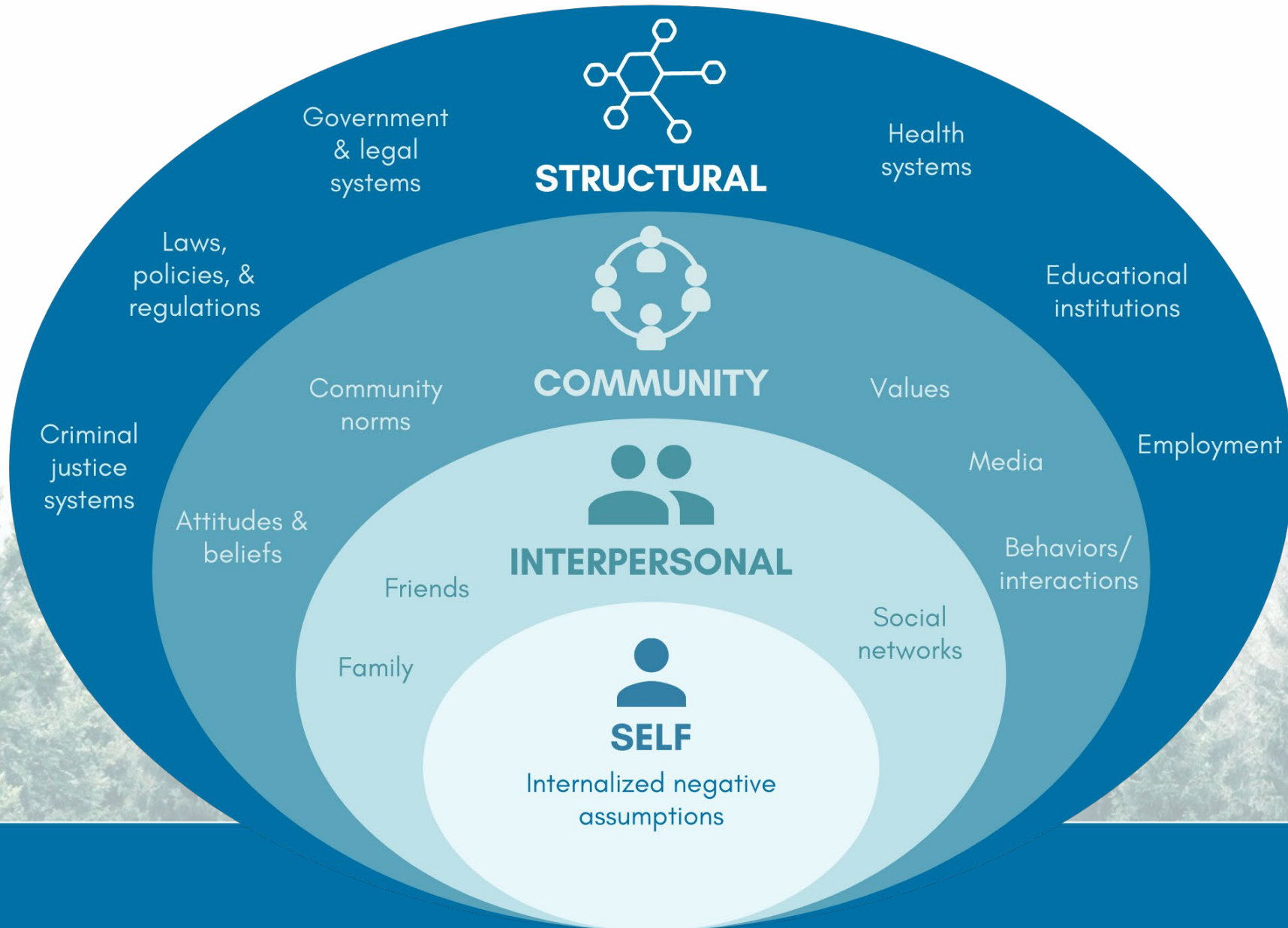


Status loss and discrimination



Power and stigma

Stigma is multi-dimensional



What contributes to and perpetuates stigma?

DRIVING FORCES

- lack of knowledge
- lack of experience
- media portrayal
- barriers to treatment
- criminalization of drug use
- racism

STIGMATIZATION



- labeling
- stereotypes
- separation "us vs them"
- status loss/ discrimination
- power

TYPES OF STIGMA



IMPACTS

- social and health disparities
- barriers to effective treatment
- intersecting stigmas increase the likelihood of negative consequences

Contributing factors in **rural** communities

Fragmented
healthcare
systems



Limited
transportation
and longer travel
distances



Limited
recreational
infrastructure



Fewer
resources



Limited
employment
opportunities



Higher
proportion of
physically
demanding jobs



Social norms
and social
networks



How does stigma **impact** communities?

*“Their value as human beings are diminished and their talents and role in the community is often overlooked because their **substance abuse** issues are in the forefront.”*



Addiction seen as a choice



Assumed character flaws



Social rejection



Lost humanity



Resistance to treatment services



Self-stigma

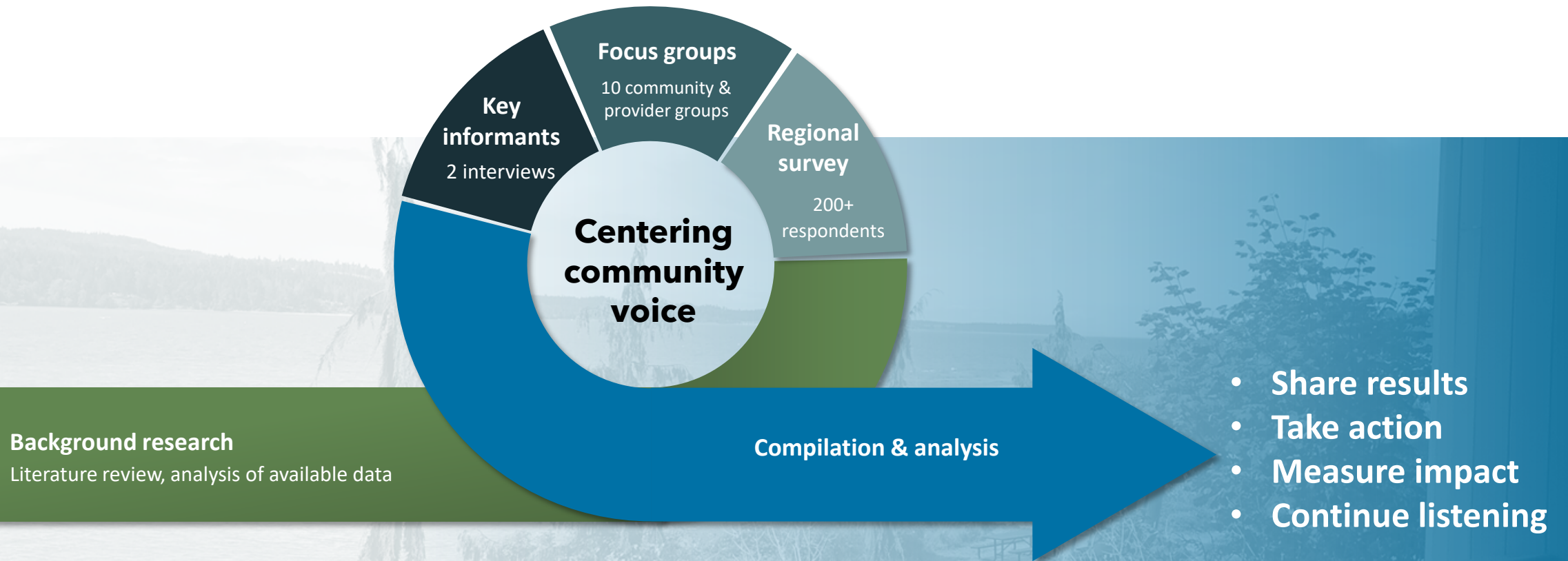
How does stigma **impact** **your** community?



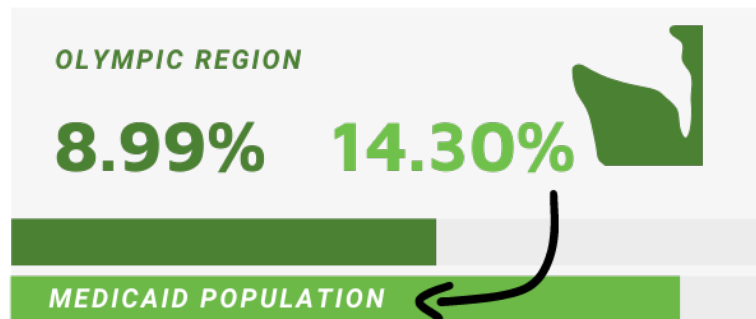
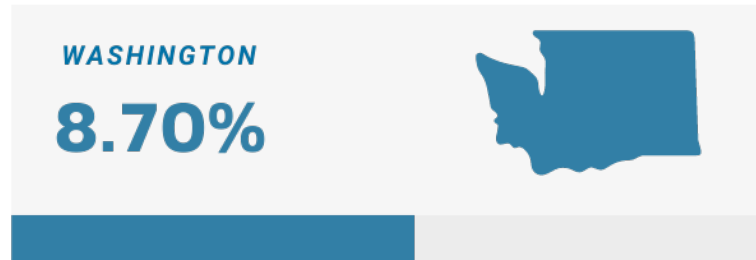
Discussion:

Who is impacted?
How are they impacted?
How is the larger
community impacted?

How is OCH responding?

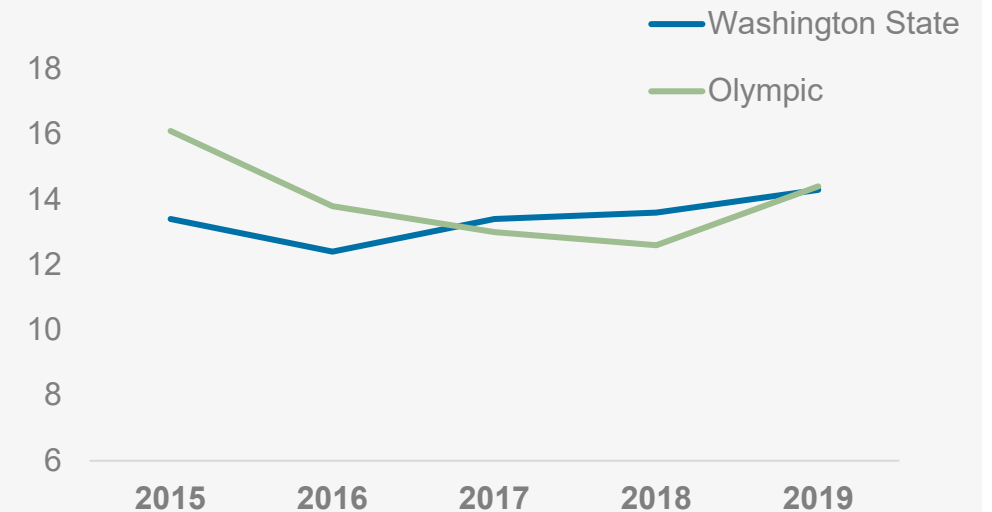


% of population with identified substance
use disorder (SUD) in the past year (2016-2018)



Prevalence of **adult** substance use

Alcohol-
induced deaths
per 100,000
residents



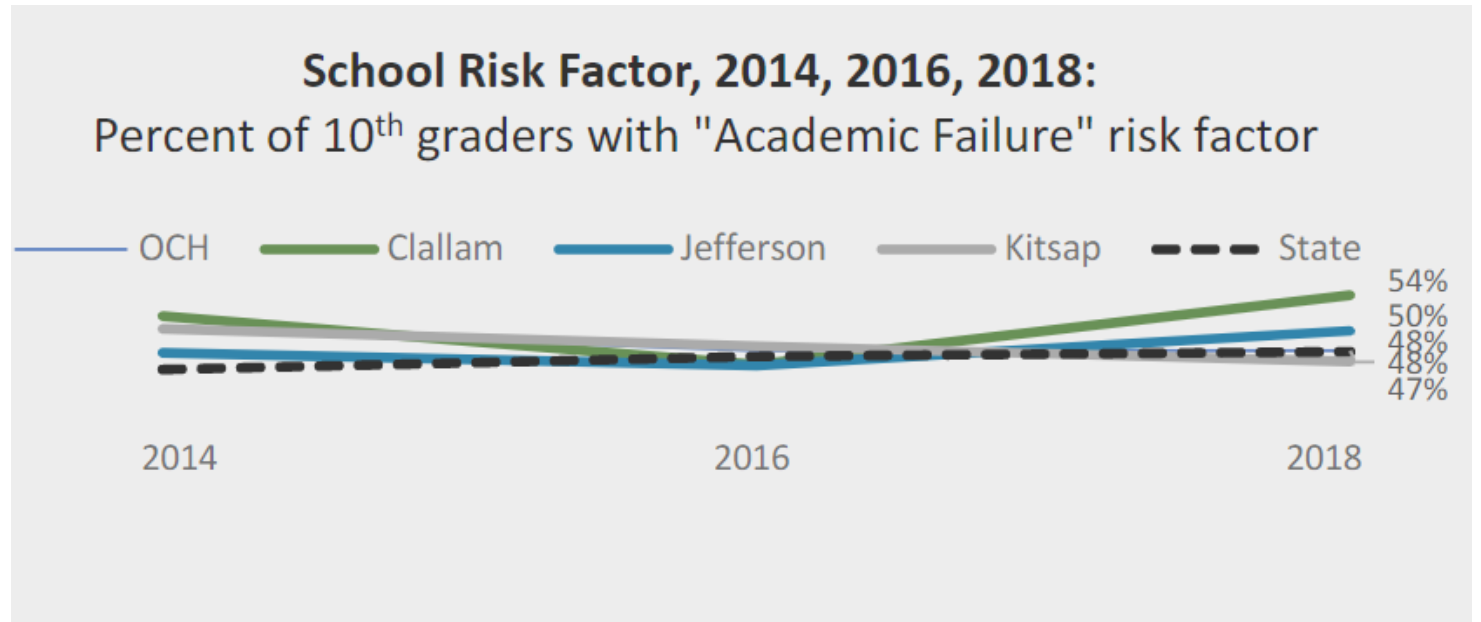
Sources:

1. Substance Abuse and Mental Health Services Administration
2. Washington State Department of Health

10th graders across the Olympic region reported using the following in the past 30 days (2018):

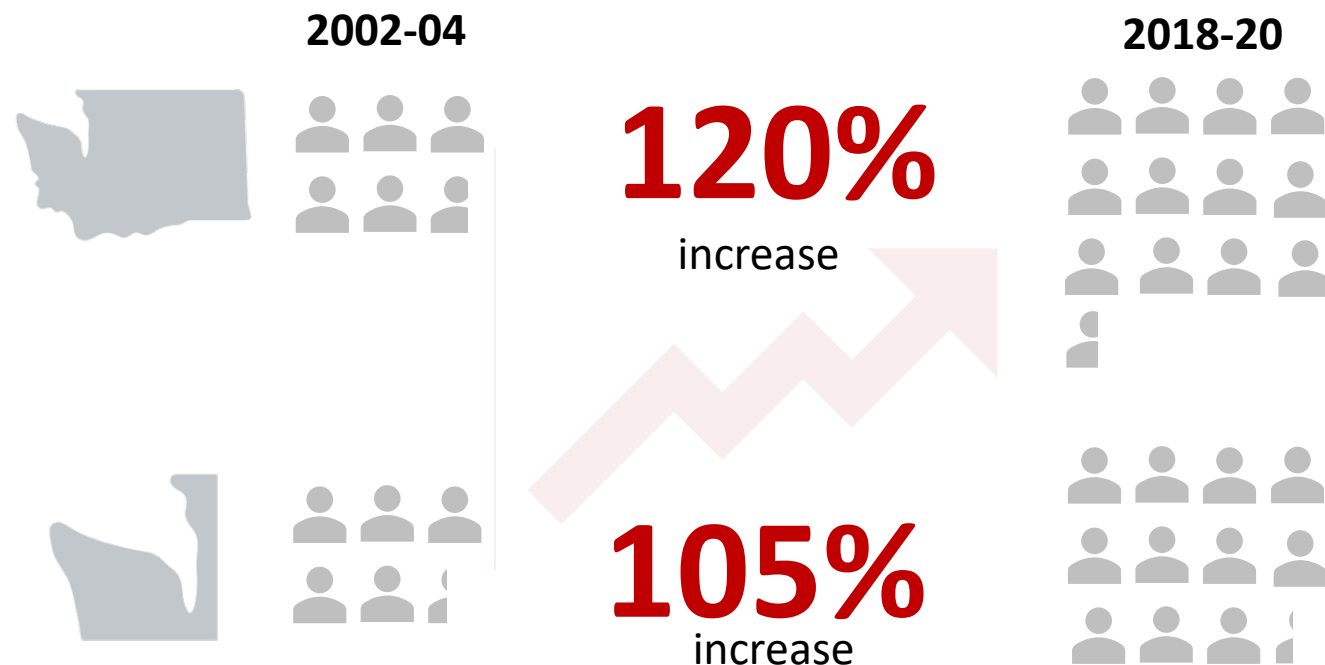


Prevalence of youth substance use



Opioid-involved deaths per 100,000 residents

Death and crime data indicate increasing problematic use of opioids and stimulants like methamphetamine.



3rd

The Olympic region had the **3rd highest methamphetamine death rate** in WA (2019-20).

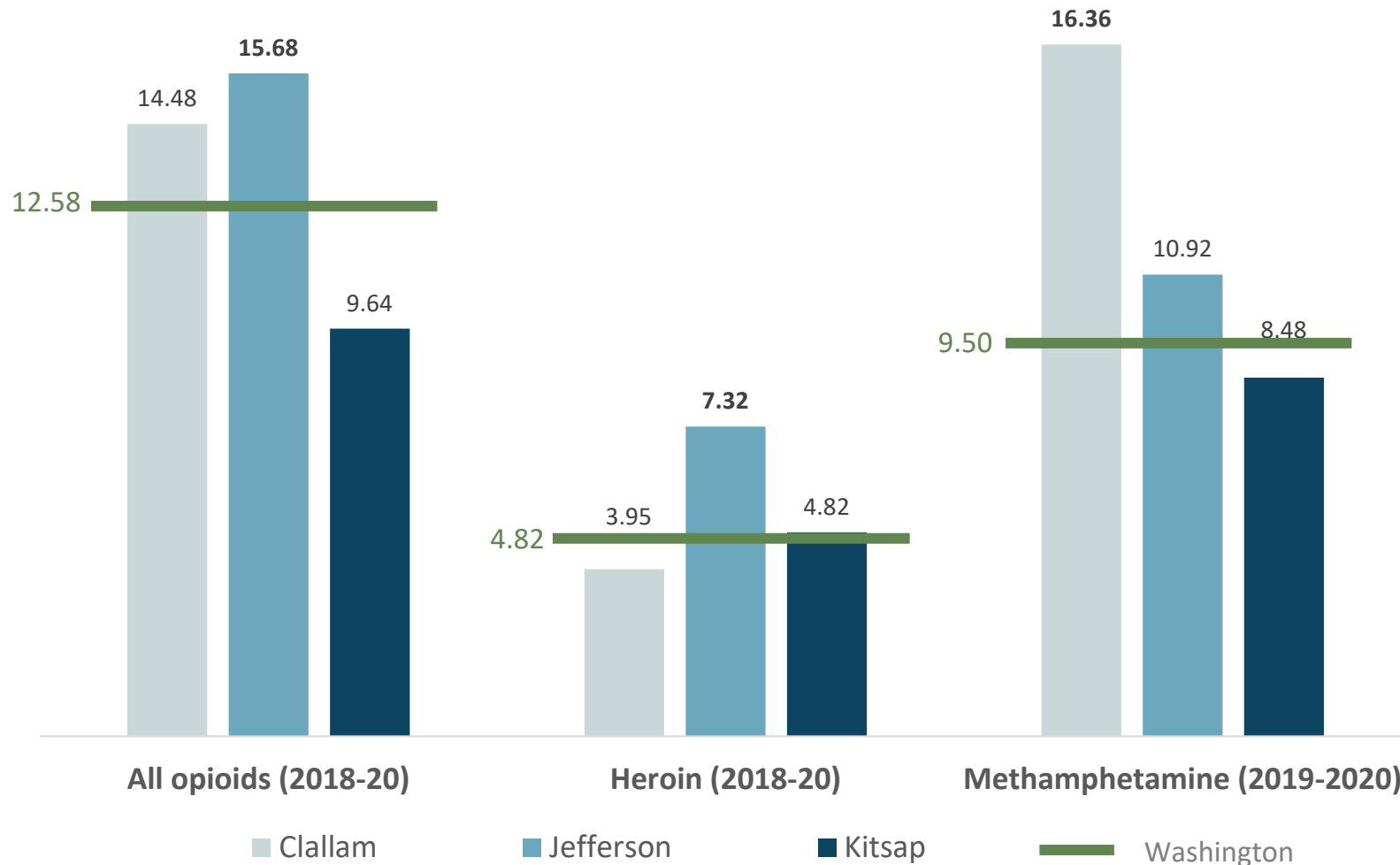
Sources:

4. Source: Addictions, Drug & Alcohol Institute

5. Source: Addictions, Drug & Alcohol Institute

Deaths per 100,000 residents:

Looking at **drugs** involved and rates across the **Olympic region**



Statewide leading causes of opioid deaths (2020):

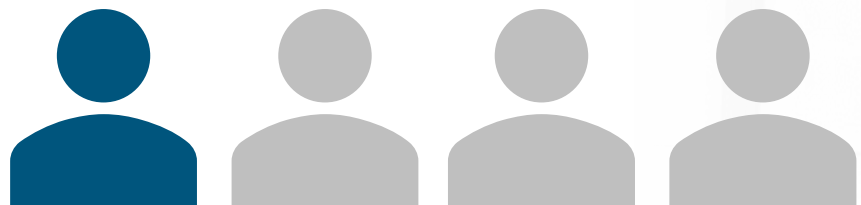
1. Cocaine & opioids & methamphetamine
2. Cocaine & opioids
3. Methamphetamine & opioids
4. Opioids & alcohol or benzos or barbiturates (*no methamphetamine or cocaine*)
5. Opioids (*no methamphetamine, cocaine, alcohol, benzos, or barbiturates*)

Sources

4. Source: Addictions, Drug & Alcohol Institute

5. Source: Addictions, Drug & Alcohol Institute

American Indian and Alaska Native (AI/AN) experience of stigma



1 in 4 AI/AN adults have
identified SUD treatment need
in the Olympic region

Compared with other populations across WA state,

AI/ANs experience

- Higher rates of overdose deaths
- Slower receipt of SUD treatment
- Mortality rates increase at a faster rate

Sources:

6.. Olympic Community of Health

7. Washington State Department of Health

8. Acevedo, A., Panas, L., Garnick, D., Acevedo-Garcia, D., Miles, J., Ritter, G., & Campbell, K.

COVID-19

COVID-19 has greatly exacerbated mental health needs.

Limited broadband access continues to be a barrier to treatment and resources, especially during the pandemic.

A few examples of challenges partners are faced



Constantly changing information and recommendations



Closing of some Tribal borders



Implementing telehealth in rural parts of the region



Supporting the health and wellness of staff



Extreme shortage in personal protective equipment



Increasing demand for behavioral health services

Access to treatment

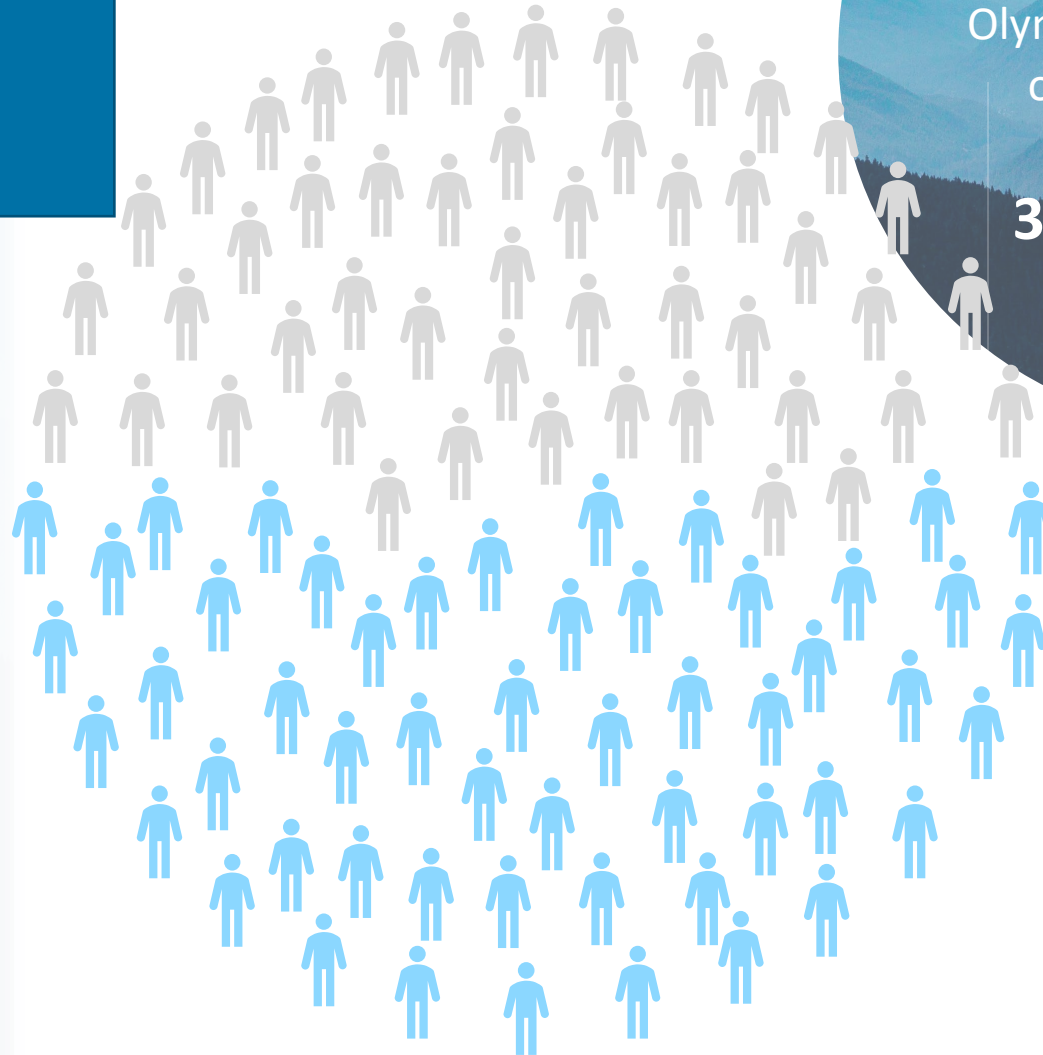
In the Olympic region, approximately

1 in 2 adults

2 in 5 youth

on Medicaid received the SUD treatment they needed

From 2017-2019, the Olympic region **improved** opioid use disorder treatment from **34.8% to 52.7%**



What are **your** takeaways?



Discussion:

What is something new you learned?

What is something you're curious about?

Other reflections?




of respondents believe
stigma is a problem in
the Olympic region



of respondents believe
**there should be a focus on
addressing stigma of addiction**

Shifting perspectives

Common themes from those who **do not think stigma is a problem** and/or should not be focused on:



A focus on **stigma** **enables** individuals with substance addiction

The problem is not stigma but **addiction** and its impacts on the community

Visible addiction and socially **undesirable activities ruin the community**

Stigma is justified and people should be judged based on actions

Would rather focus on getting people into **treatment**

Would rather focus on **more prevalent issues** (mental health, housing, substance treatment and prevention)

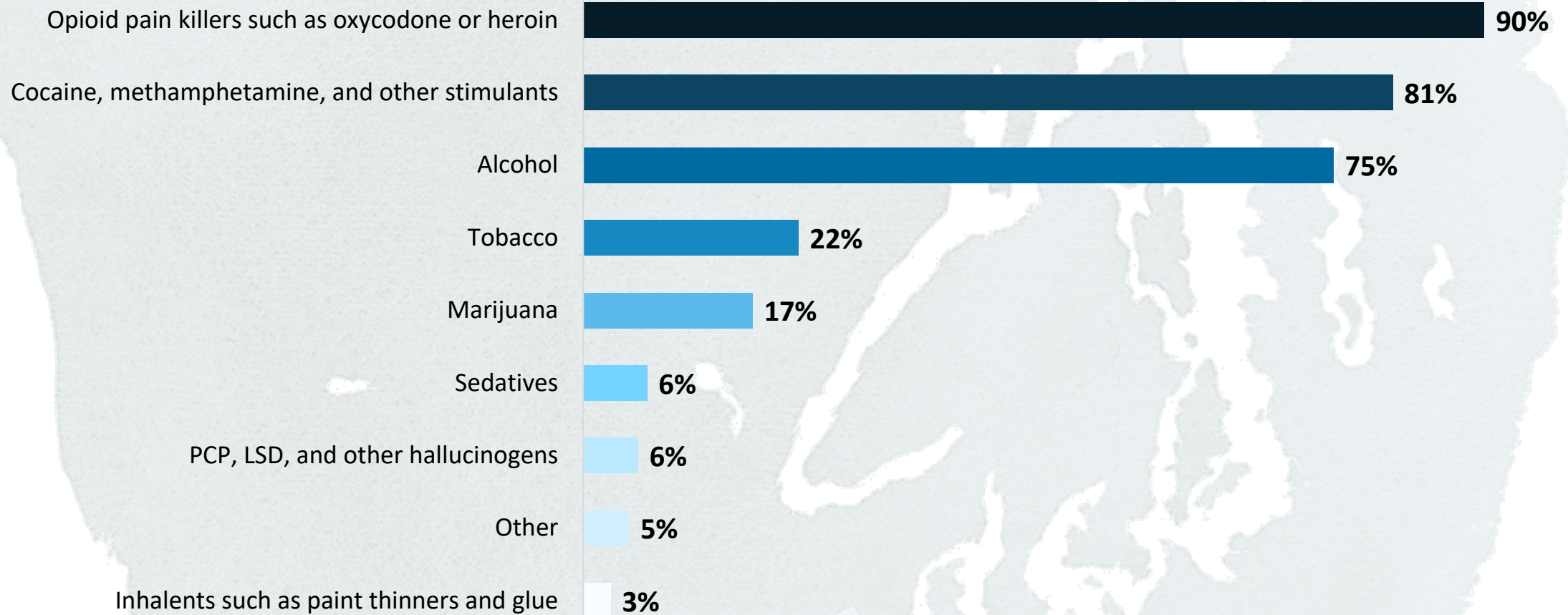
Perceived stigma of substance addiction

Survey respondents believe...



Which substances are the **most significant** concern in the Olympic region?

% of respondents selecting substance as a concern



Provider stigma

Ways provider stigma manifests in the health and social care delivery fields



Lower empathy and engagement towards people with addiction



People with addiction treated with **suspicion and judgement**



Provider **reluctance** and reduced competency to manage addiction



Denial of care and barriers accessing care

Rejection

Patients come in with a lot of guilt, a lot of remorse ...And often what you'll hear is they've been rejected so often by the health care system, by other providers, by their family, by their friends, by their employers, that just to come through the door and ask for help is huge.



De-humanized

Their value as human beings are diminished and their talents and role in the community is often overlooked because their substance abuse issues are in the forefront.



Judgement

A client shared with me that a provider told them "yes, I could do this surgery for you, but then you would just keep using so what would be the point."





Vulnerability

The stigma comes when people cannot hide addiction anymore. Then there is a judgement towards what is visible. There is less judgement for someone who can cover it up and still function.



Weakness

Up to a certain point alcohol is glorified as this great thing. For someone to admit they are addicted to alcohol is to admit weakness.



Expectations

Assumption is that everyone has methods of escape, and everyone is expected to handle it.



What's going well?

REdisCOVERY

A Program of Olympic Peninsula Community Clinic



REdisCOVERY

819 E. Georgiana St, Port Angeles WA 98362

P: (360)-457-4431 F: (360)-457-7755

Rediscovery360@gmail.com

Social worker

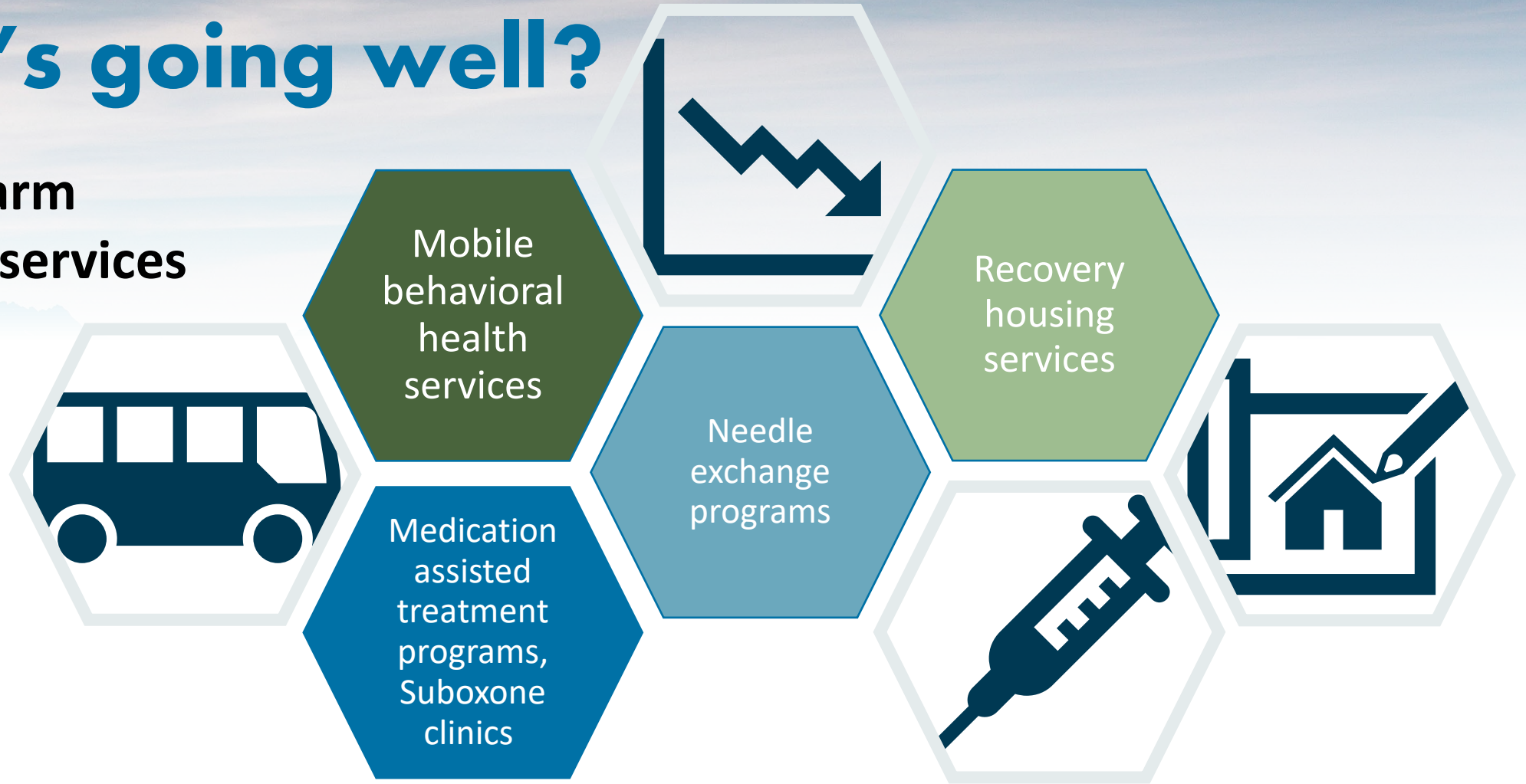
Law
enforcement

Navigators

Case
managers

What's going well?

Existing harm reduction services



What's going well?

Tribal re-entry programs



Port Gamble S'Klallam
re-entry program



THE SUQUAMISH TRIBE

Suquamish Tribe re-entry-
restorative justice and
listening circles

What's going well?

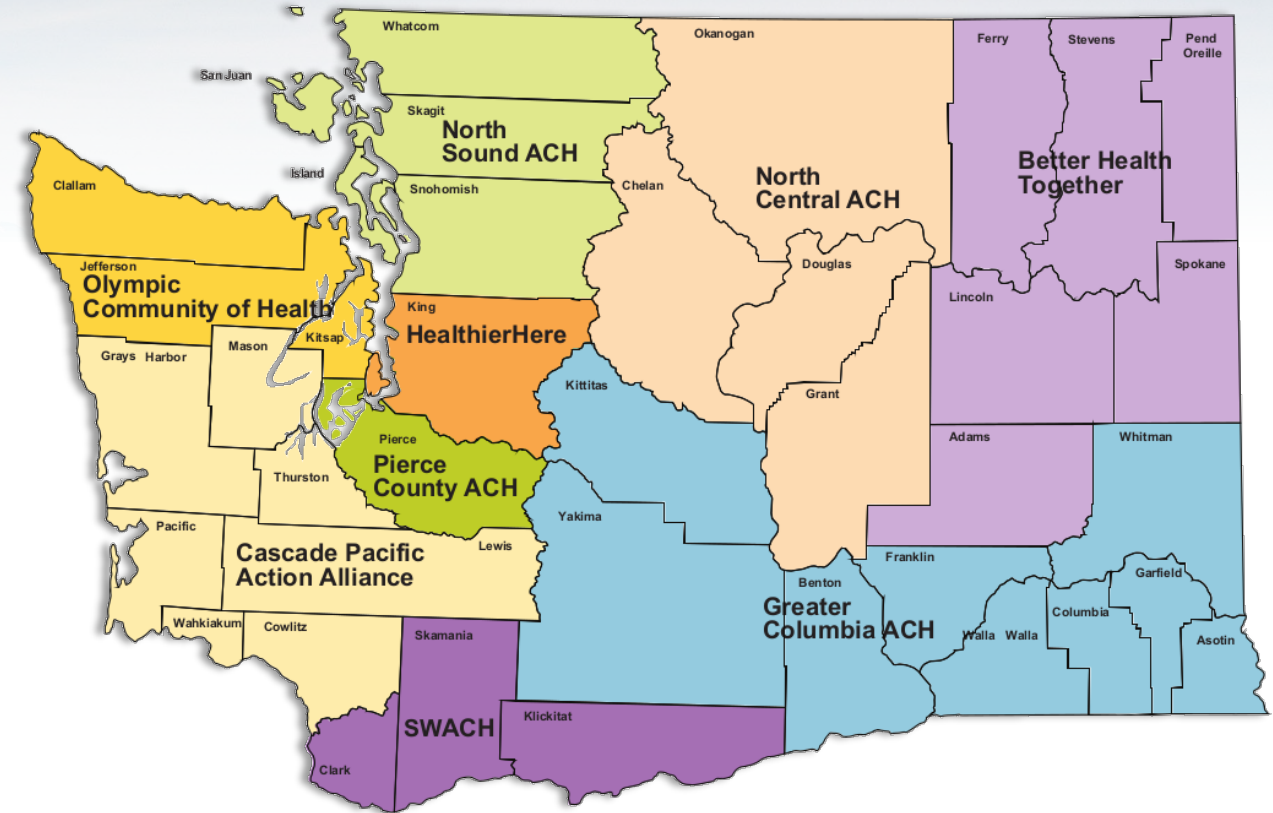
Trainings



What's going well?

Policies

- **Hargrove bill:** 1/10 of 1% sales tax for mental health, substance abuse treatment, and to support court treatment programs
- **1115 waiver:** Experimental projects to improve the Medicaid program
- **Various state and federal policies**



**What are other
examples of
programs,
policies, or
services that
aim to reduce
stigma?**

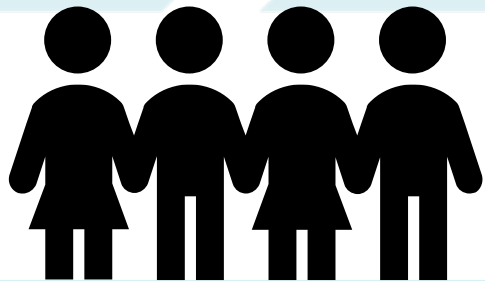


Discussion:

What are additional
policies, programs, and
services that aim to
reduce stigma?

Where do we go from here?

FOSTER A RECOVERY FRIENDLY REGION



Where do we go from here?

ADDRESSING DETERMINANTS OF HEALTH



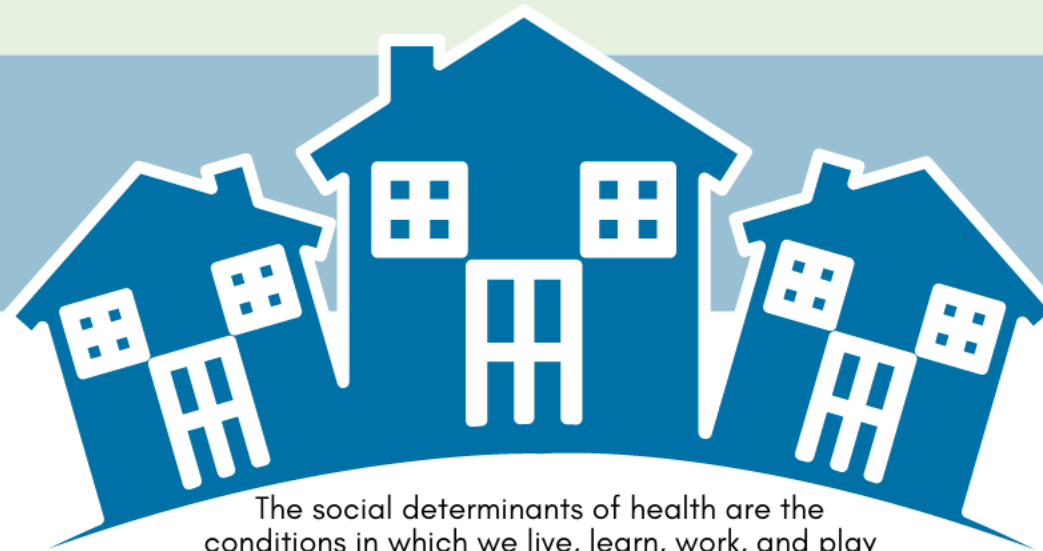
Prioritize
innovative
solutions



Strengthen
partnerships



Sustainable
funding



The social determinants of health are the
conditions in which we live, learn, work, and play

Housing | Transportation | Education | Environment | Employment

Where do we go from here?

Address the need for additional **withdrawal management and stabilization services** in the Olympic region and across the state.

WITHDRAWAL MANAGEMENT

Residential withdrawal management facilities currently operating in the Olympic region

Kitsap County	Kitsap Recovery Center	6 male & 3 female beds
Kitsap County	Olalla Recovery Centers	2 male & 1 female beds
Jefferson County	N/A	0 beds
Clallam County	N/A - Specialty Services closed their withdrawal management unit in March 2020	0 beds



Where do we go from here?

“RECOVERY HERO” CAMPAIGN



Where do we go from here?

POLICIES



Where do we go from here?

Training for health, social service, and law enforcement providers

TRAININGS



trauma-
informed
care



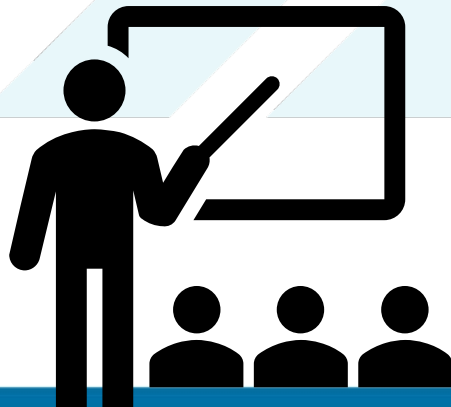
harm
reduction



bias

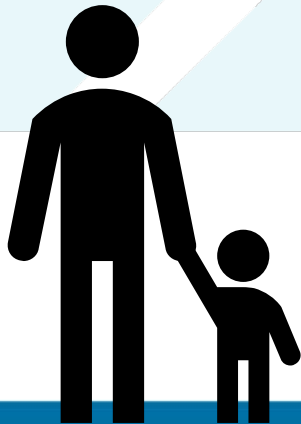


history and
context of the
community



Where do we go from here?

POSITIVE YOUTH DEVELOPMENT



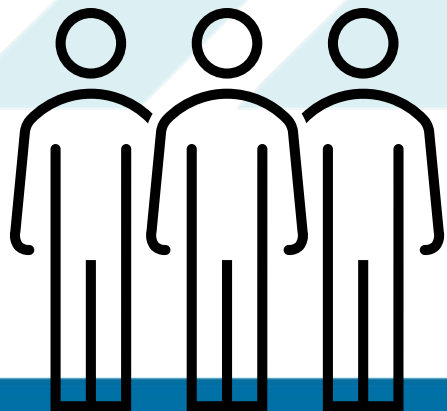
upstream solutions

An upstream solution creatively addresses a problem at its source.

Young people are assets to be cultivated, not problems to be fixed

Where do we go from here?

PEER SERVICES AND SUPPORTS



How can **you** help?



use person-first language, remove stigmatizing language



be kind and be aware of your own bias



learn more about addiction and trauma-informed approaches



support recovery models throughout the region



support the positive development of youth and young people



get involved in an OCH workgroup

The path forward.



Fostering a RECOVERY FRIENDLY Olympic region

Name

Email

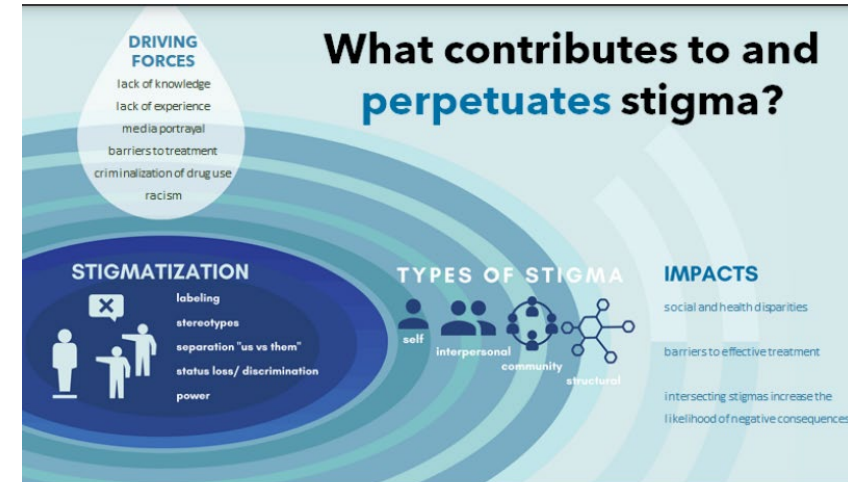
Stay connected

- ☐ Add me to your weekly newsletter distribution list
- ☐ I'd like to learn more about participating on a workgroup in 2022 to support next steps
- ☐ I'd like someone from the OCH team to make a presentation about stigma of substance use disorder at my group or workplace (if yes, someone from OCH will contact you to discuss next steps)

My commitments

Please describe 1-2 actions you'll commit to taking to support a recovery friendly Olympic region

Submit



How can you help?



Share how you are contributing to a

Recovery Friendly Olympic Region

- Post on social media with [#RecoveryFriendly](#)
- Email OCH@olympicch.org
- Go to olympicch.org/stigma

Olympic
COMMUNITY of HEALTH
Clallam | Jefferson | Kitsap | olympicch.org



Stay connected

#RecoveryFriendly

Talk about
addiction
with your
kids



Practice
person-first
language



Host a training
for your
staff/team



Make a new
community
partnership



Host a
discussion



**Let us know how
you are tackling
stigma!**

- Post on social media with **#RecoveryFriendly**
- Email OCH@olympicch.org
- Go to olympicch.org/stigma



Thank you

Questions?

Resources

Resource	Link
Olympic Region Behavioral Health Report	shorturl.at/novE6
Determinants of Health Report	olympicch.org/sdoh-report
Determinants of Health Inventory	olympicch.org/localdeterminantsofhealth
OCH and Collaborative Consulting Stigma Reports	olympicch.org/partner-resources (under category “stigma of substance addiction”) <ul style="list-style-type: none">• Models research• Current state desk research• Context from the background research• Perceived stigma scale results• Stigma background research• Strengths and ideas to reduce stigma
Department of Health Behavioral Health Impact Situation Reports	shorturl.at/dgyC0

Citations

1. Substance Abuse and Mental Health Services Administration. (2020). *2016-2018 National Survey on Drug Use and Health Substate Age Group Tables*. <https://www.samhsa.gov/data/report/2016-2018-substate-estimates-substance-use-and-mental-illness>
2. Washington State Department of Health, Center for Health Statistics. (January 2021). *Injury Deaths – ACH and State Dashboards: Drug and Alcohol-Induced Deaths by Gender and ACH*. Retrieved June 2021 from <https://www.doh.wa.gov/DataandStatisticalReports/HealthDataVisualization/MortalityDashboards/ACHInjuryDeathsDashboards>
3. Washington State Department of Health (2018). *Healthy Youth Survey: 10th Graders*
4. Addictions, Drug & Alcohol Institute. (2021, July 28). *Opioid trends across Washington state*. Retrieved August 2021 from <https://adai.uw.edu/wadata/deaths.htm>
5. Addictions, Drug & Alcohol Institute. (2021, August 4). *Methamphetamine trends across Washington state*. Retrieved August 2021 from <https://adai.uw.edu/wadata/methamphetamine.htm>
6. Olympic Community of Health. (2021). *The Olympic Region Behavioral Health Report*. https://ea40b83f-bff5-4a61-aa55-a97621e13e64.usrfiles.com/ugd/ea40b8_4348718198b743b88c9804f199a78c91.pdf
7. Washington State Department of Health, Center for Health Statistics. (January 2021). *Injury Deaths – ACH and State Dashboards: Drug and Alcohol-Induced Deaths by Race and ACH*. Retrieved June 2021 from <https://www.doh.wa.gov/DataandStatisticalReports/HealthDataVisualization/MortalityDashboards/ACHInjuryDeathsDashboards>
8. Acevedo, A., Panas, L., Garnick, D., Acevedo-Garcia, D., Miles, J., Ritter, G., & Campbell, K. (2018). Disparities in the Treatment of Substance Use Disorders: Does Where You Live Matter?. *The journal of behavioral health services & research*, 45(4), 533–549.
9. Olympic Community of health. (2020, March 23). *Challenges Faced Amidst a Pandemic*. <https://www.olympicch.org/post/challenges-faced-amidst-a-pandemic>