



Oregon  
**Health**  
Authority

The Impact of COVID-19 on Overdose and  
Coordinated Services for PHAB 2-18-21

# Presenter and Contributors

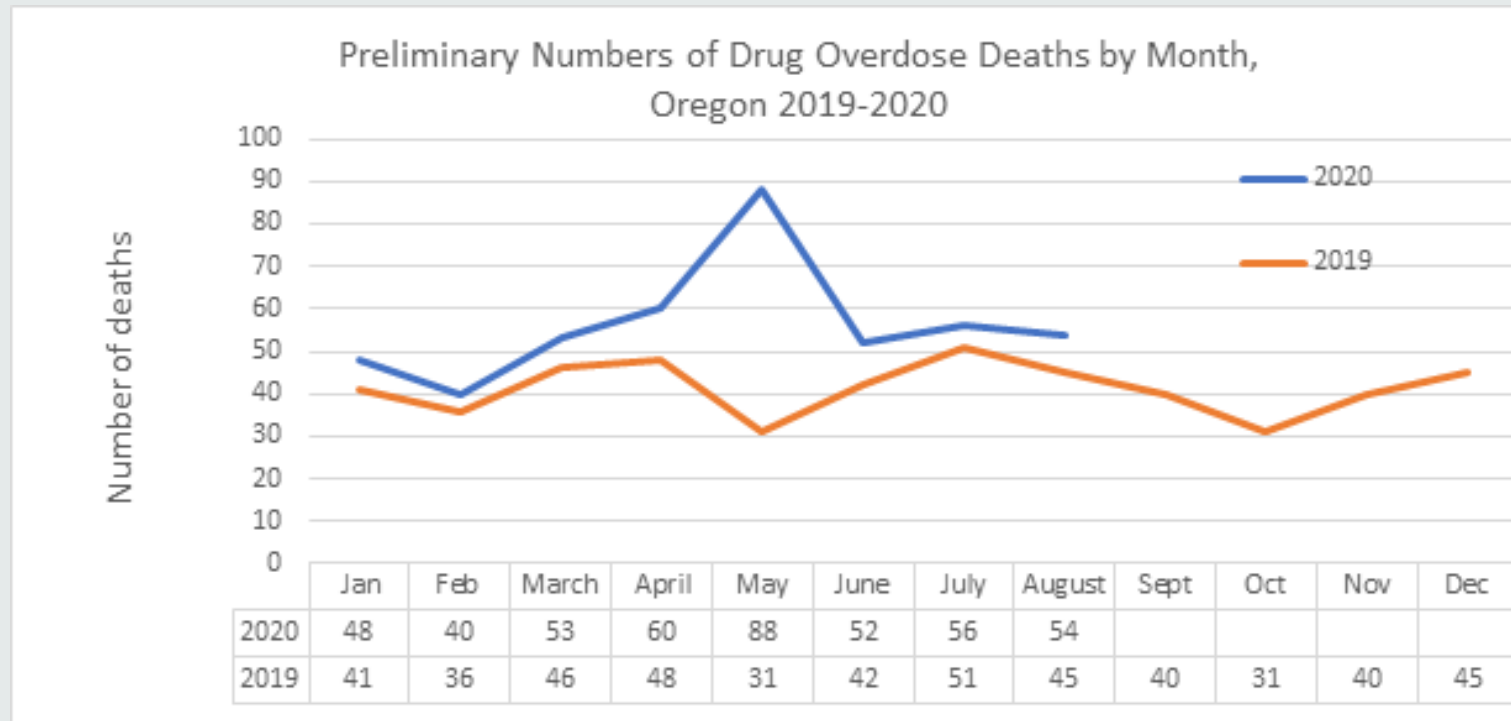
Dagan Wright, PhD, MSPH – Lead presenter with multiple contributors – more than can be listed

- Dr. Richardson, OHA Alcohol and Drug Policy Commission
- Nicole Corbin, OHA Adult Mental Health and Addiction Services
- Lisa Shields, OHA Public Health, Injury and Violence Prevention
- Mary Borges, OHA Public Health, Injury and Violence Prevention
- Xun Shen, OHA Public Health, Injury and Violence Prevention
- Robyn Ellis, OHA Public Health, Injury and Violence Prevention

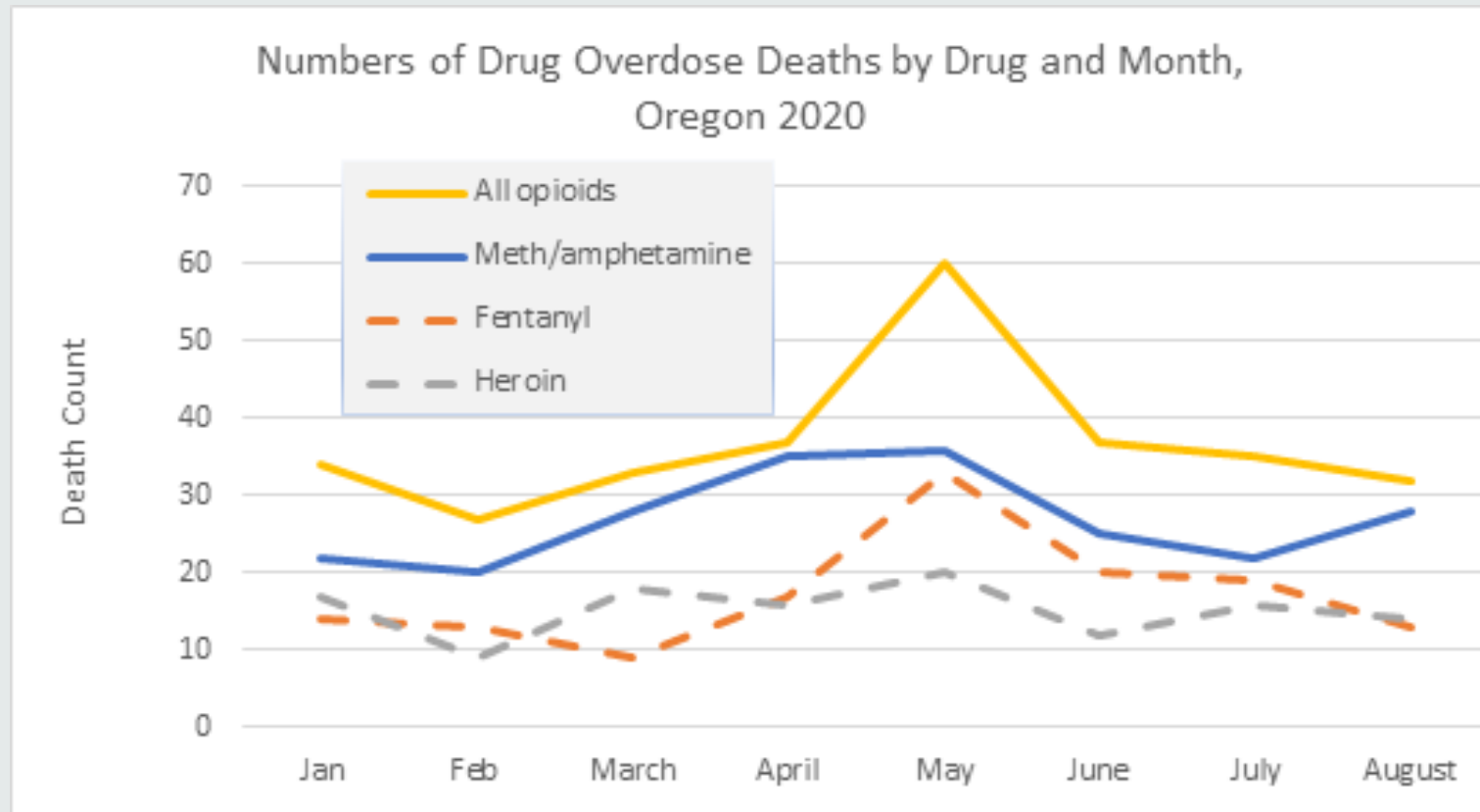
# Learning objectives

- Understand Oregon's overdose data in the COVID-19 landscape
- Share prevention, treatment and recovery strategies in collaboration with peer-delivered services to reduce the community burden of opioids and other drugs

# Drug overdose deaths in Oregon, 2020-2019



# Drug category overdose deaths by month in Oregon, 2020 - 2019

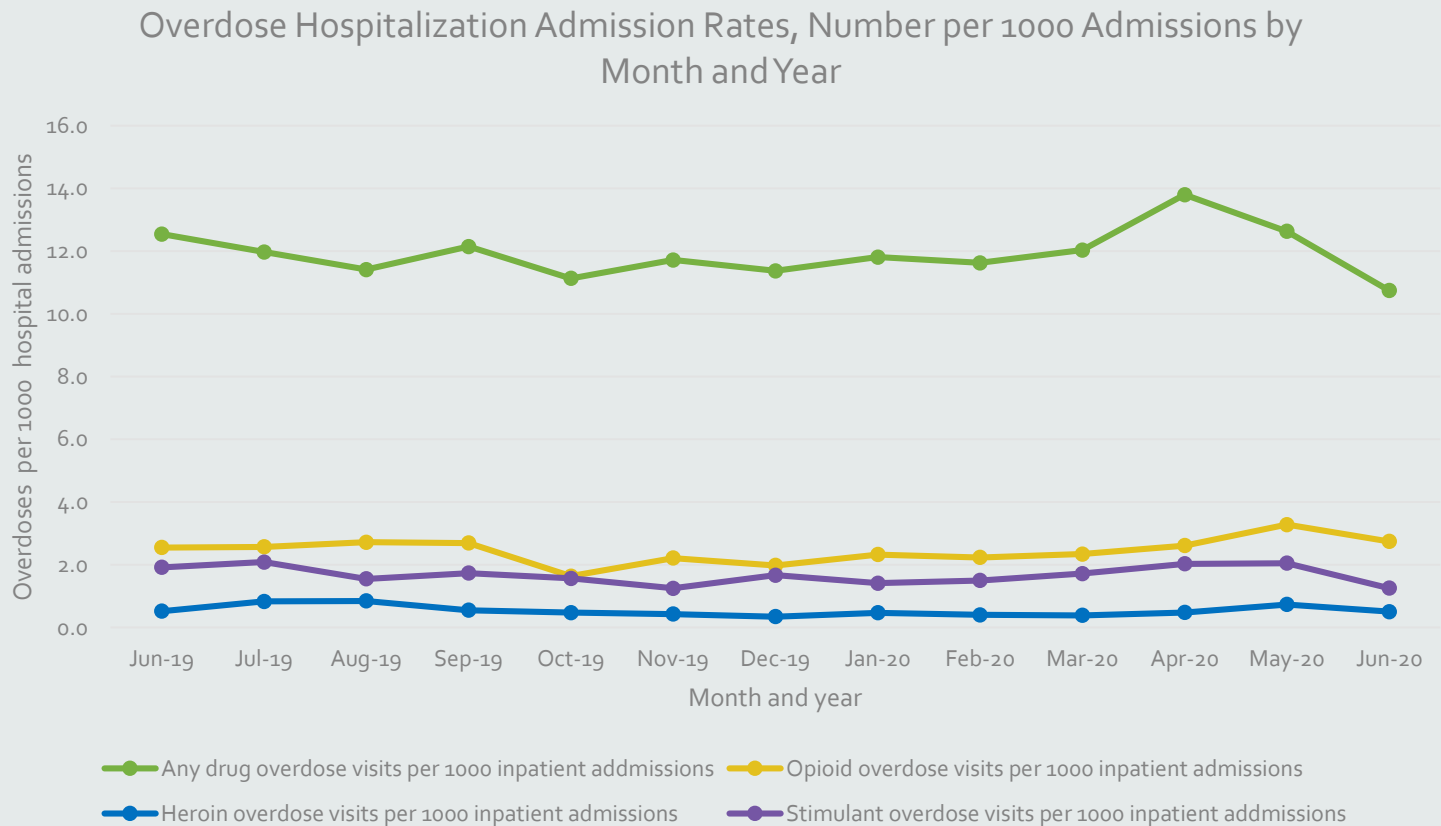


# Overdose Deaths Health Equity and Demographic Information – January to June 2020

	Percent of 2019 Oregon Population	Percent of Drug Overdose Deaths	Prevalence Compared to Population	
Non-Hispanic White	86.7	83.2	1.0	Similar
Non-Hispanic African American	2.2	5.3	2.4	Greater
Non-Hispanic Am. Indian/Native Alaskan	1.8	2.9	1.6	Greater
Non-Hispanic Asian/Pacific Islander	4.9	2.5	0.5	Less than
Hispanic	13.4	7.3	0.5	Less than
Male	44.6	72	1.6	Greater

- 64 Overdose deaths or 16% were homeless
- 54 Overdose deaths or 9.2% were veterans
- Over 97% were unintentional deaths

# Inpatient Hospitalizations by Month and Year (rates by drug category) – June 2019 to June 2020

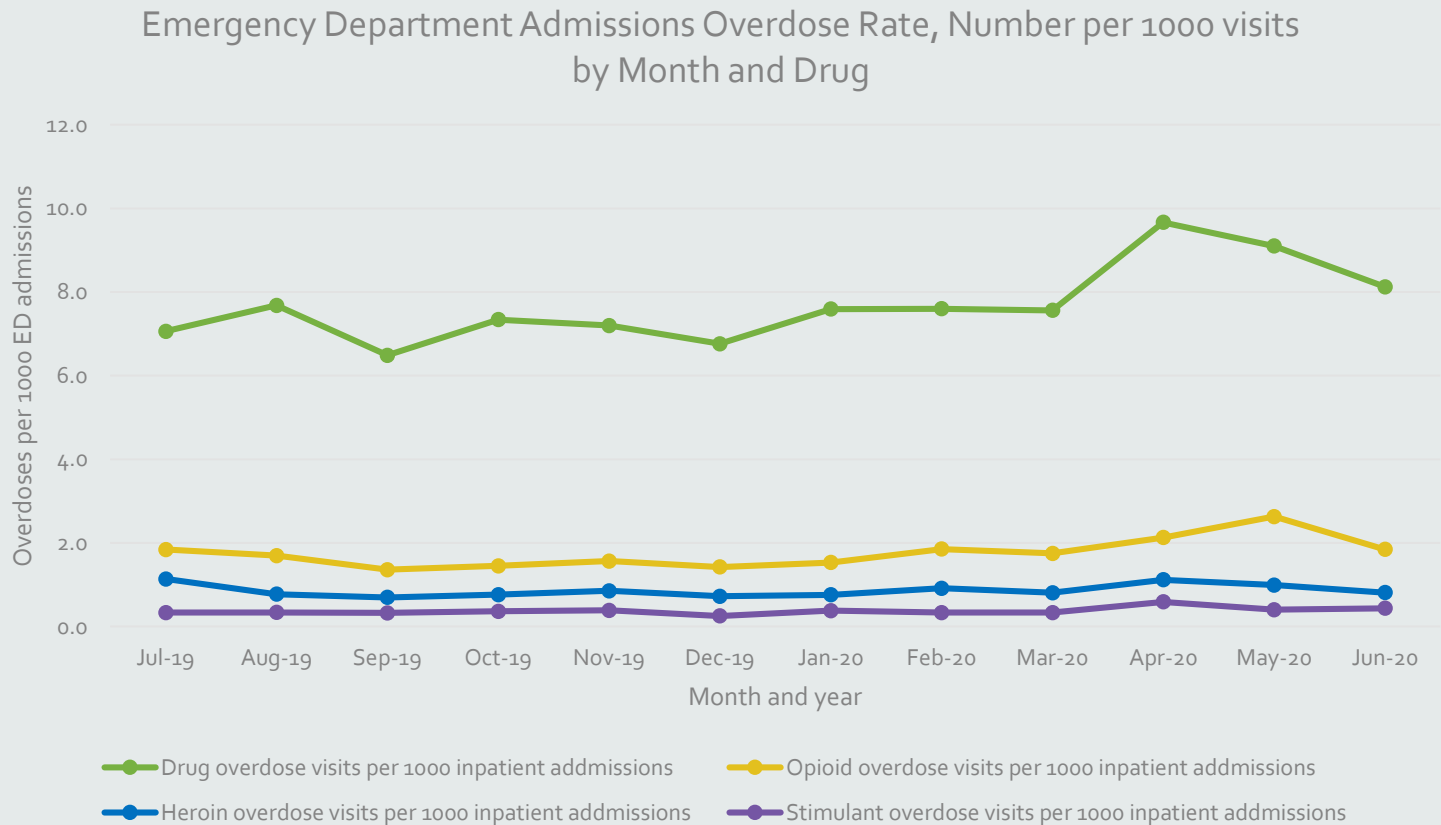


# Hospitalization Health Equity and Demographics— Oregon June 2019 to June 2020

	Percent of 2019 Oregon Population	Percent of Drug Overdose Hospitalizations	Overdose Prevalence Compared to Oregon Population	
American Indian or Alaska Native	1.8	1.9	1.0	Similar
Asian	4.9	1.1	0.2	Lower
Black or African American	2.2	4.0	1.8	Greater
Native Hawaiian or Pacific Islander	0.5	0.5	1.0	Similar
White	86.7	81.5	0.9	Slightly lower
Female	50.4	55.2	1.1	Slightly greater
Hispanic or Latino	13.4	7.5	0.6	Lower

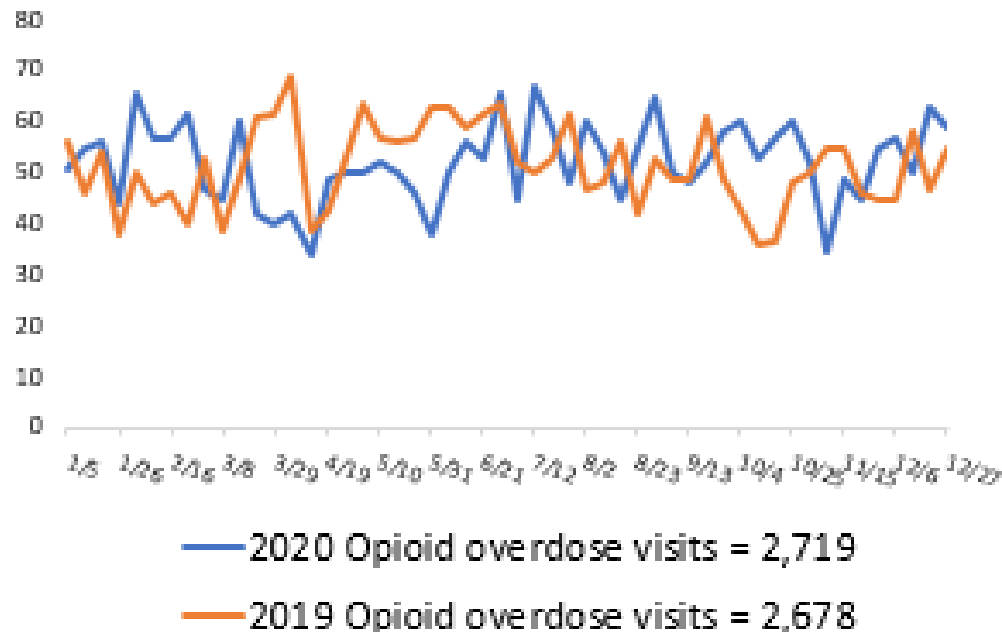


# Emergency Department Admissions by Month and Year (rates by drug category) – July 2019 to June 2020



# Syndromic Surveillance Reporting for Emergency Departments and Urgent Care (ESSENCE) Weekly Counts 2020-2019 ESSENCE

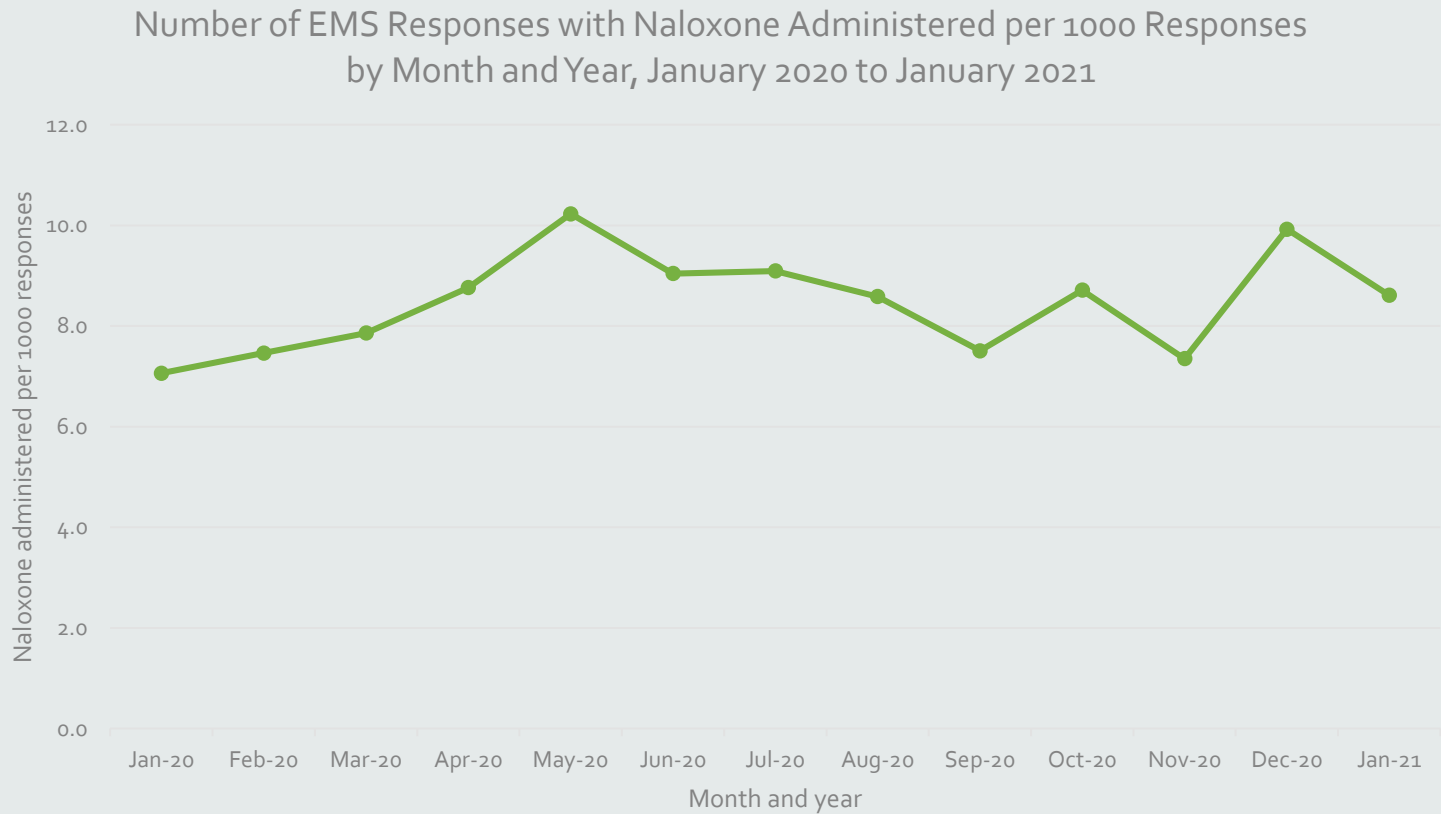
## Opioid overdose-related Visits to EDs & UCCs Weekly Jan-Dec 2019 & 2020



# ED Health Equity and Demographics– Oregon July 2019 to June 2020

	Percent of 2019 Oregon Population	Percent of Drug Overdose ED Admissions	Difference: Overdose compared to Population Percent	
American Indian or Alaska Native	1.8	1.8	1.0	Similar
Asian	4.9	1.4	0.3	Less than
Black or African American	2.2	3.9	1.8	Greater
Native Hawaiian or Pacific Islander	0.5	0.6	1.1	Slightly greater
White	86.7	80.1	0.9	Slightly less than
Hispanic	13.4	9.4	0.7	Less than
Female	50.4	55.0	1.1	Slightly greater

# EMS Responses by Month and Year (rates by drug category) – January 2020 to January 2021



# The Oregon Opioid Initiative

**Aim: Reduce deaths, non-fatal overdoses, and harms to Oregonians from prescription opioids, while expanding use of non-opioid pain care**

**1**  
**REDUCE RISKS TO PATIENTS BY MAKING PAIN TREATMENT SAFER AND MORE EFFECTIVE, emphasizing non-opioid and non-pharmacological treatment**

**2**  
**REDUCE HARMS FOR PEOPLE TAKING OPIOIDS AND SUPPORT RECOVERY FROM SUBSTANCE USE DISORDERS by making naloxone rescue and medication-assisted treatment (MAT) more accessible and affordable**

**3**  
**Protect the community by REDUCING THE NUMBER OF PILLS IN CIRCULATION through implementation of safe prescribing, storage, and disposal practices**

**4**  
**OPTIMIZE OUTCOMES BY MAKING STATE AND LOCAL DATA AVAILABLE for monitoring, evaluating, and informing policies and targeted interventions**

# Oregon Opioid Initiative: Strategies

## Pain treatment

- Non-opioid therapies for chronic pain
- Best practices for acute, cancer, end of life pain

## Reduce harms

- Ensure availability of treatment for opioid use disorder
- Increase access to naloxone and MAT

## Reduce pills

- Decrease the amount of opioids prescribed

## Data

- Use data to target and evaluate interventions

# ReverseOverdose.org

- Oregon campaign to empower employers and bystanders to respond to overdose in the workplace
- Naloxone administration, training, purchasing, Oregon law, and other topics

**Reverse**  
**Overdose**  
**Oregon**

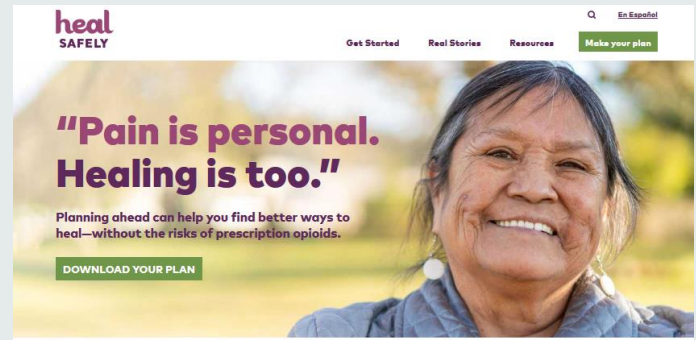
[What is Naloxone?](#) [Get Started](#) [Resources](#) [Media](#) [Español](#)

**Training Tools**

## Help save a life with naloxone.

An overdose can happen to anyone who takes opioids—with or without a prescription. It could happen to a co-worker or even a customer. Learn to administer naloxone and reverse overdose.

# Oregon's *Heal Safely* Campaign



- Photos, videos and first-person narrative from diverse Oregonians.
- Focus is positive, on safe healing rather than the negative threat of opioids.
- Target audience: American Indian/Alaska Native; African American; Latino/a; People living in rural communities
- Funded by CDC and SAMHSA grants
- *Heal Safely* Research findings
  - Lived experiences is key to effective messaging strategies that drive behavior change
  - Lived experience influences how people understand pain.
  - People need to see and hear from others like themselves to connect emotionally and for the message to have genuine impact.

Source: *Heal Safely* Opioid Prevention Community Toolkit



### PAIN EDUCATION TOOLKIT

This toolkit provides education for patients on how they can improve their health and manage their pain better through physical activity, sleep, nutrition, mood, and tapering. Patients decide what area or “domain” to focus on and what techniques they can employ to improve their overall health and help with their pain.

The toolkit consists of six educational cards:

- HOW PAIN WORKS:** Explains the science of pain and provides tips for understanding pain, including a section on 'ADD TENSITIVITY'.
- MOOD:** Focuses on 'MOOD AND MINDSET' and 'TIPS FOR INCREASING POSITIVE THOUGHTS AND FEELINGS WHEN EXPERIENCING PAIN', featuring a circular diagram of positive thoughts and feelings.
- MOVEMENT:** Addresses 'TIPS FOR GETTING BACK TO PHYSICAL ACTIVITY' with a path illustration.
- FOOD:** Covers 'TIPS FOR IMPROVING YOUR NUTRITION' with icons for various food groups.
- SLEEP:** Provides 'TIPS FOR INCREASING RESTFUL SLEEP' with a night sky illustration.
- MEDICATION:** Offers 'TIPS FOR DECREASING YOUR MEDICATION' and 'TAPERING/DECREASING PAIN MEDICATION' with a pill icon.

- Pain toolkit and resources
- Real patient stories
- <https://www.oregonpainguidance.org>

#### Patient Education Videos



**Why does activity help with pain?**  
You may be worried that physical activity will make your pain worse, but movement can lessen your pain. Physical activity helps ease muscle stiffness and improves your mobility. It can also help control your weight, lift your mood, and help you sleep better.



**How do mood and thoughts affect pain?**  
Positivity is incredibly important in managing your pain. Positive thinking can help reduce negative feelings, pain, stress, and increase your motivation to make healthy choices.



**How can food affect your pain?**  
Eating healthy and nutritious food is important for many reasons. A big benefit is that food can increase your energy levels. If you have more energy, you can make changes in other areas like sleep, physical activity, and your mood and mindset.



**Why does sleep affect pain?**  
Getting restful sleep can make you feel energized, more active, more social, and reduce your cravings for unhealthy foods. Any of those improvements can help reduce your pain.

## Peer education module on pain and opioids



- Collaboration with Mental Health and Addiction Association of Oregon (MHA/O)
- Online educational module to support people with chronic pain, people tapering from high dose opioids
- People with lived experience developing the content
- Available later this year

# Thank you for your time and feedback

- Questions?
- Listen, Learn, Act, Evaluate





Bend, OR photo by [Mike Putnam Photography](#)

Contacts: [dagan.a.wright@dhsosha.state.or.us](mailto:dagan.a.wright@dhsosha.state.or.us) (Epidemiology and Data)  
[Lisa.m.shields@state.or.us](mailto:Lisa.m.shields@state.or.us) (Program, Community Outreach)