



Identifying and Addressing Emerging Trends in the South Southwest Region

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Funded by Substance Abuse and Mental Health Services Administration

Acknowledgement

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At the time of this publication, Miriam E. Delphin-Rittmon, Ph.D., served as Assistant Secretary for Mental Health and Substance Use in the U.S. Department of Health and Human Services and the Administrator of the Substance Abuse and Mental Health Services Administration.

The opinions expressed herein are the view of PTTC Network and do not reflect the official position of the Department of Health and Human Services (DHHS), SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this document is intended or should be inferred.

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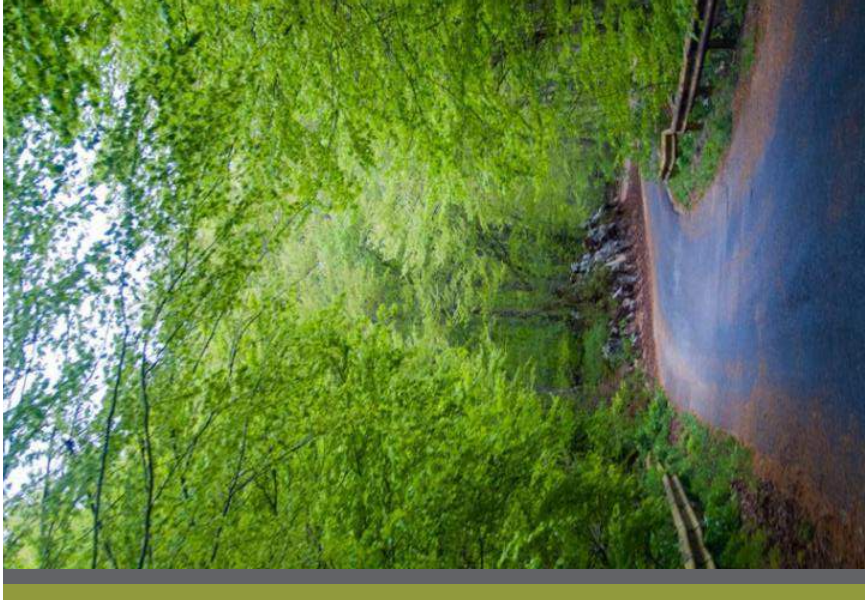
Our Roadmap Today

- Learn about emerging substance use trends
- Discuss the factors influencing these trends
- Review opportunities and strategies for addressing these trends
- Evaluation



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Learning Objectives

- Explain the importance of incorporating emerging trend needs into ongoing strategic planning.
- Describe the scope and impacts of key emerging substance use trends.
- Recognize the influence of the social determinants of health and other risk and protective factors on emerging trends.
- Identify opportunities for addressing emerging trends as part of a comprehensive prevention approach.



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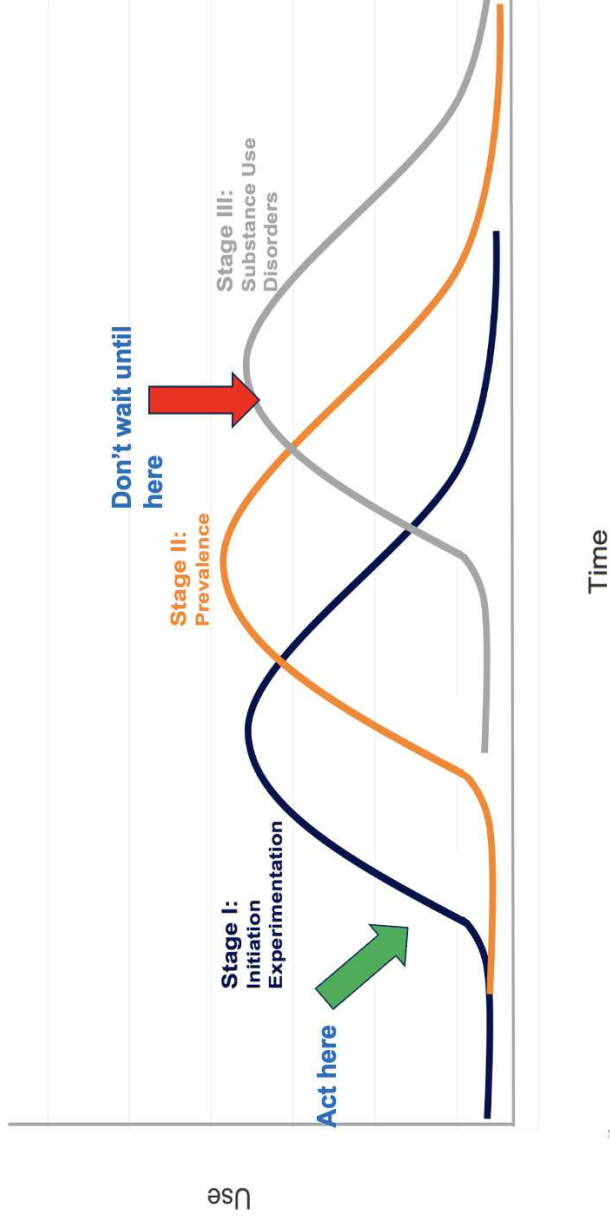
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The Importance of Addressing Emerging Trends

- Why is this issue important?
- What can we learn about this issue?
- How does this issue impact our existing work?
- How do we address this issue?



Why Its Important



9

Time



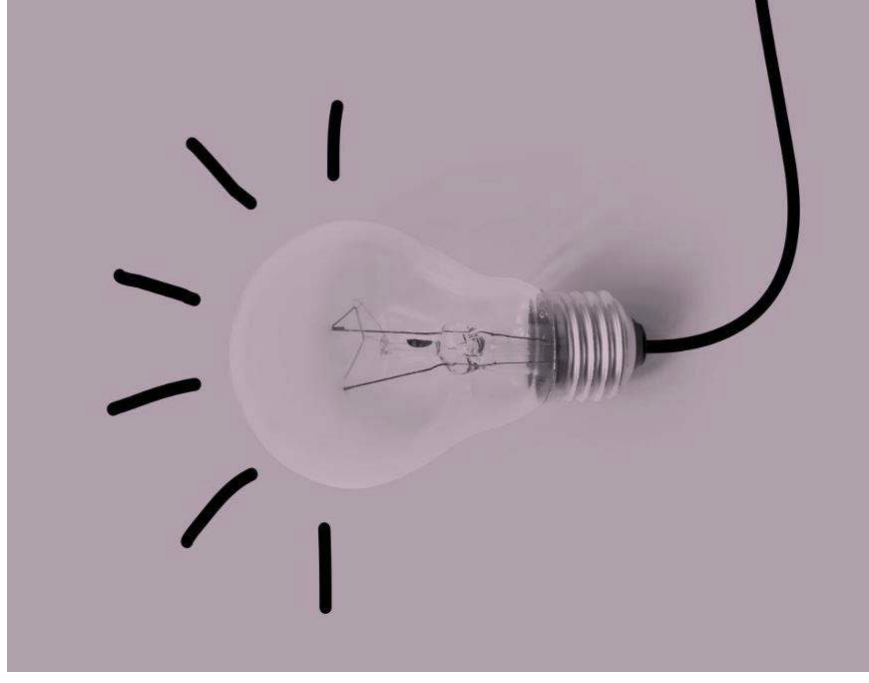
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7

What We Can Learn

- Prevalences and consequences
- Root causes of use
- Populations impacted
- Environmental context
- Other relevant risk and protective factors



How Our Existing Work Is Impacted

New information requires that we review our priorities and balance:

- Emergent trends
- Ongoing issues
- Underlying needs

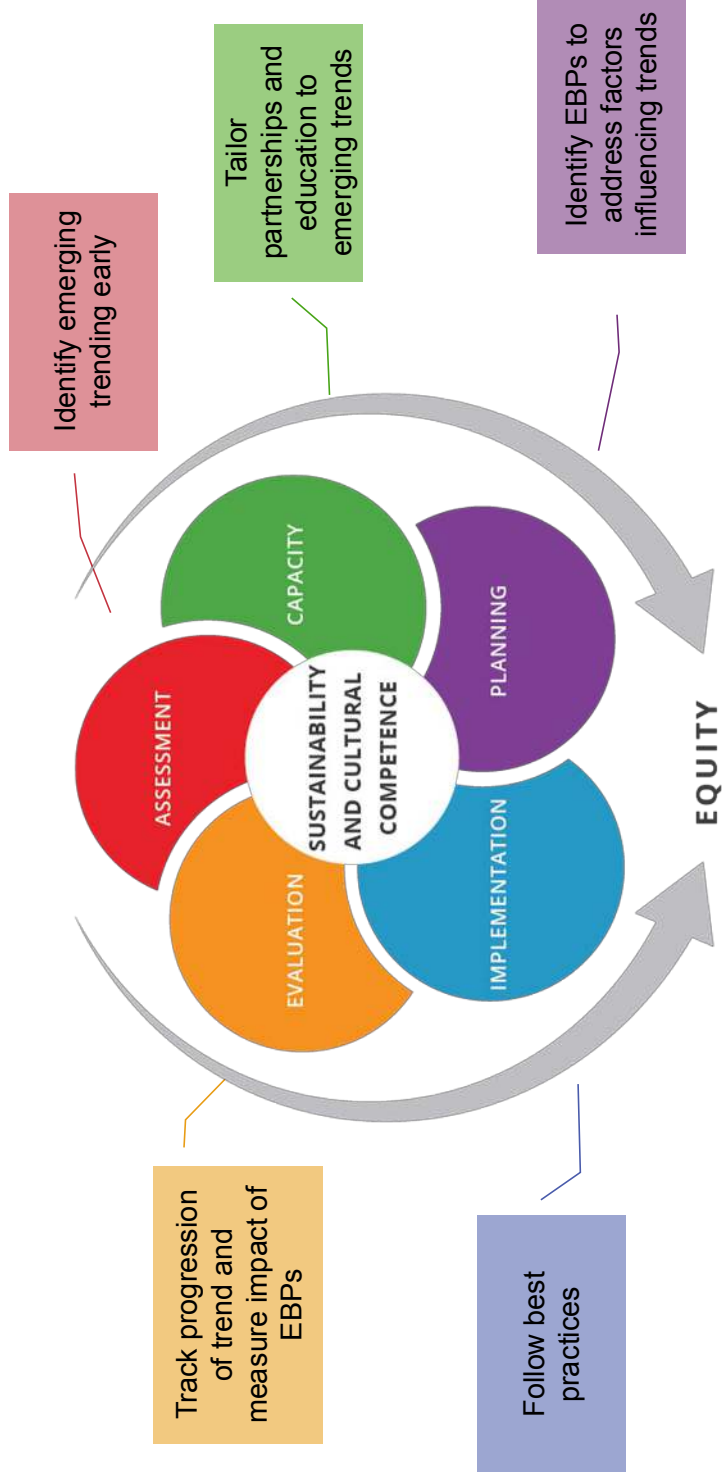


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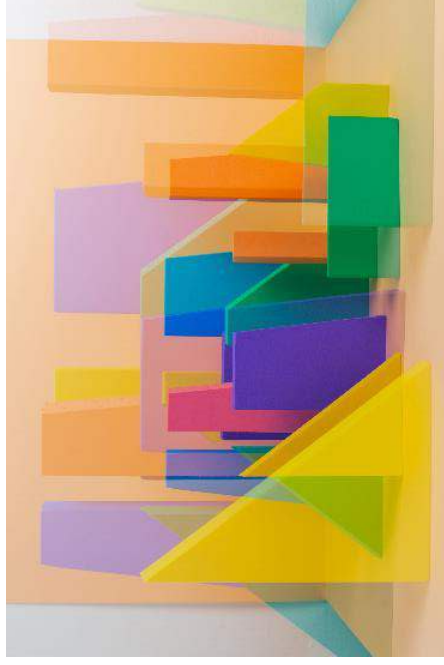
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How We Address the Issue



The Scope and Impacts of Key Emerging Substance Use Trends and Related Risk and Protective Factors



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New and Novel Substances



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Xylazine

- FDA non-classified veterinary anesthesia drug for animals
- Non-opioid sedative
- Muscle relaxant
- Analgesic



- Not a controlled substance
- Sold in vials or preloaded syringes



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Xylazine's Scope of Consequences

- Over 3,468 fatal overdoses in 2021
- January 2019-June 2022 saw 4,859 fatal fentanyl overdoses involving xylazine (9%)
- In a study from 2011, 40% of people developed necrotizing wounds



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Nitazenes

- Synthetic opioid analgesic created in the 1950s
- Misuse in the U.S. was first identified in the Midwest in 2019
- At least 12 different types identified
- Most common including isonitazine (“ISOs”), metonitazene, and protonitazine
- Commonly mixed into heroin or fentanyl, or falsely marketed a dilaudid or oxycodone
- Activates the μ -opioid receptor in the brain to produce feelings of euphoria and sedation



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Nitazenes' Scope of Consequences

- More than 2,400 reports to the National Forensic Laboratory System since 2019
- High potential for overdose
 - Some nitazenes estimated to be up to 43x more potent than fentanyl
- Can result in respiratory depression, vomiting, and low blood pressure/heart rate
- Tennessee study identified 41 fatal overdoses in the state in 2021



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Hallucinogens

- Can be found in certain plants or fungi, or produced synthetically
- Induces sensory distortions and psychic effects which change how the user perceives reality
- High potential for injury and safety issues due to impaired thought processes and perceptions
- Prevalence is rising rapidly, especially among adults 19-30 and 35-50



Tianeptine

- AKA "Gas station heroin"
- Prescribed as an antidepressant in other countries but not approved for any medical use by the FDA
- Effects mimic heroin in high doses
- Banned in 10 states so far
- Between 2013-2017, over 200 cases of poisoning were reported



Bromazepam

- Was first synthesized in 1976 but never approved for therapeutic use
- Acts predominantly as a sedative
- Mostly detected alongside fentanyl or other opioids
- Can be life-threatening, even in the absence of other drugs
- Law enforcement seizures that involved bromazepam increased from 3 per year during 2016-2018 to 104 in 2022 and 913 in 2023



Synthetic Cannabinoids

- Lab-made powdered chemicals mixed with solvents and sprayed onto herbs designed to mimic the effects of cannabis
- First developed as research compounds
- Studies have shown they are up to 100x stronger than THC
- Data on use/prevalence is very limited

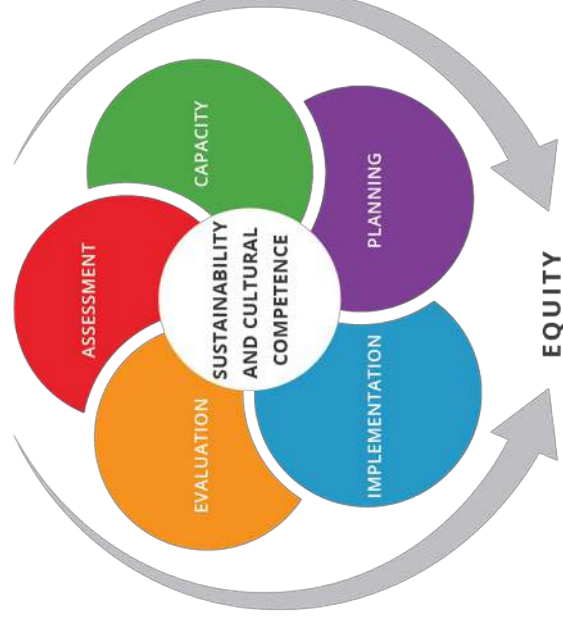


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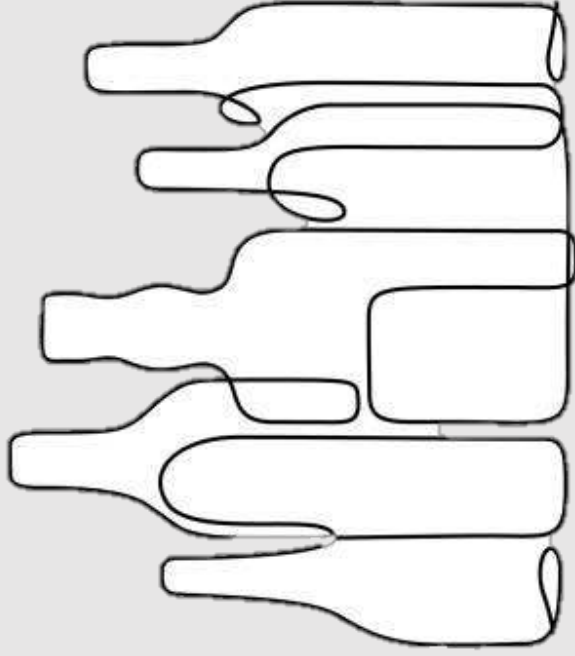
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Group Discussion

- Do these data match what you are seeing?
- How might this change your current SPF work?
- What other information do you need?



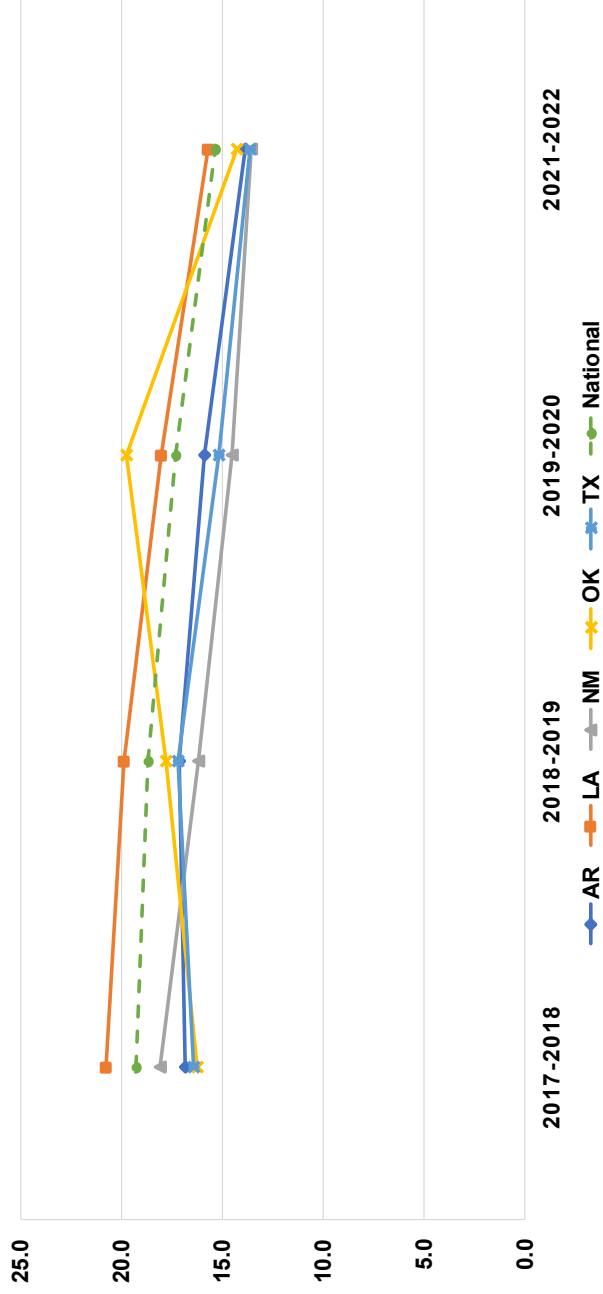
Alcohol



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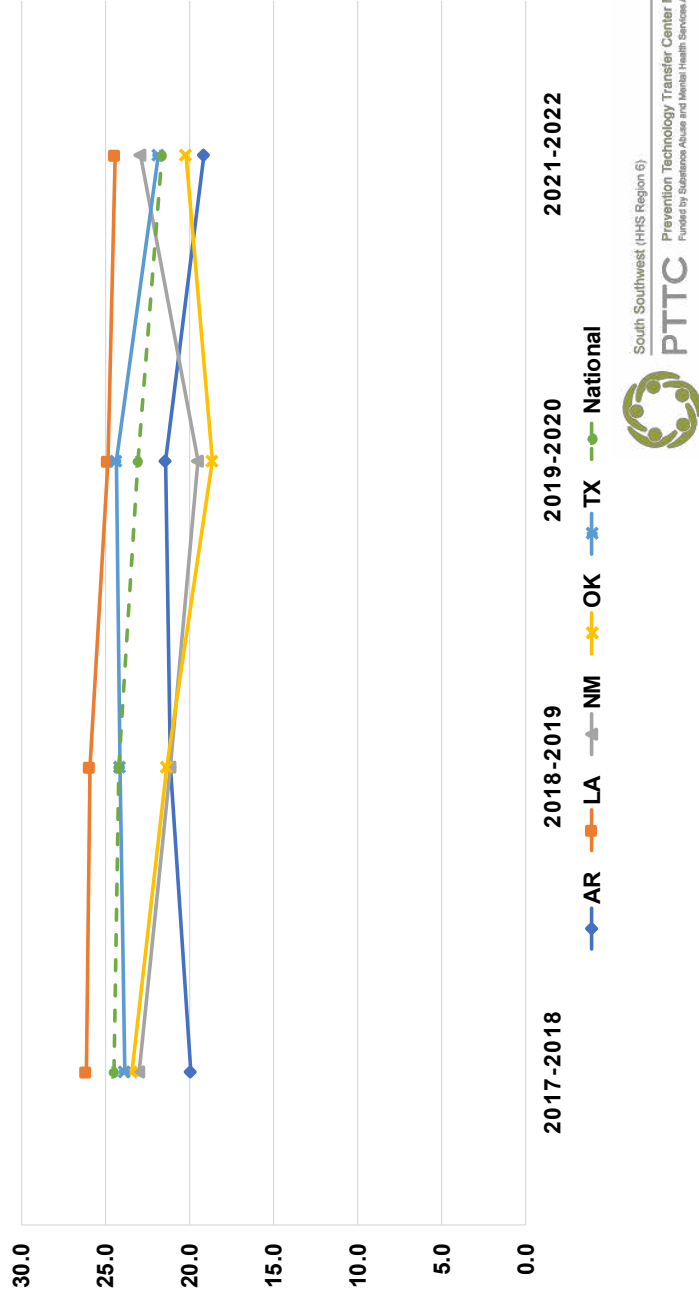
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Past-Month Underage Alcohol Use, 2017-2022



Source: National Survey on Drug Use and Health, 2017-2022

Past-Month Binge Alcohol Use, 2017-2022



Source: National Survey on Drug Use and Health, 2017-2022

Deaths with Alcohol-induced Causes from 2018 to 2022 (per 100,000 people)

	2018	2022
Arkansas	10.9	12.7
Louisiana	7.5	10.7
New Mexico	33.9	43.8
Oklahoma	15.4	20.8
Texas	8.1	10.9
National	11.4	15.4



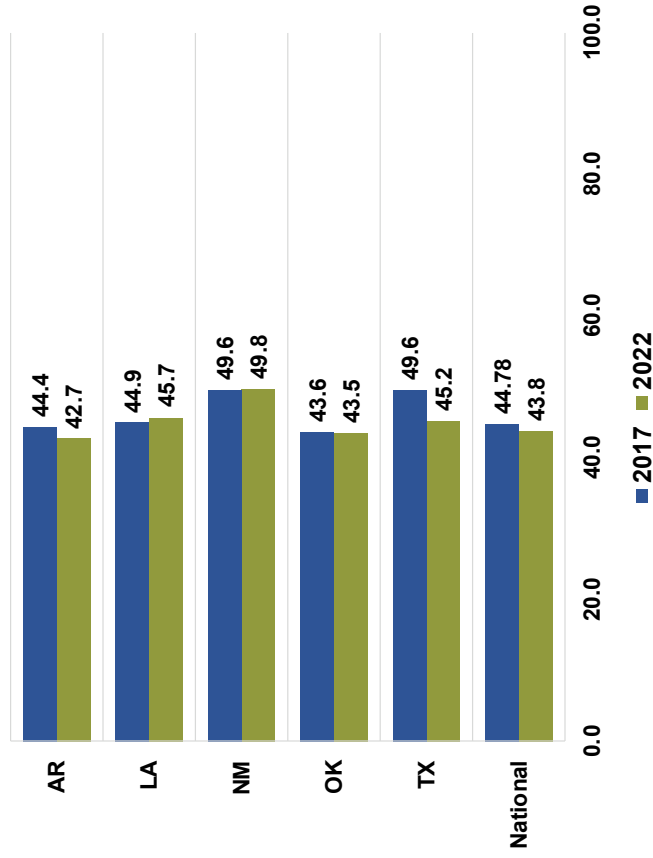
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Source: CDC WONDER

Perception of Great Risk of Harm: Alcohol



Source: National Survey on Drug Use and Health, 2017-2022



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Additional Risk Factors: Alcohol

- Early age of alcohol initiation
- Lack of school engagement
- Lack of peer/parental disapproval
- Easy accessibility
- Risk from positive perceptions
- Reduced access to prevention services



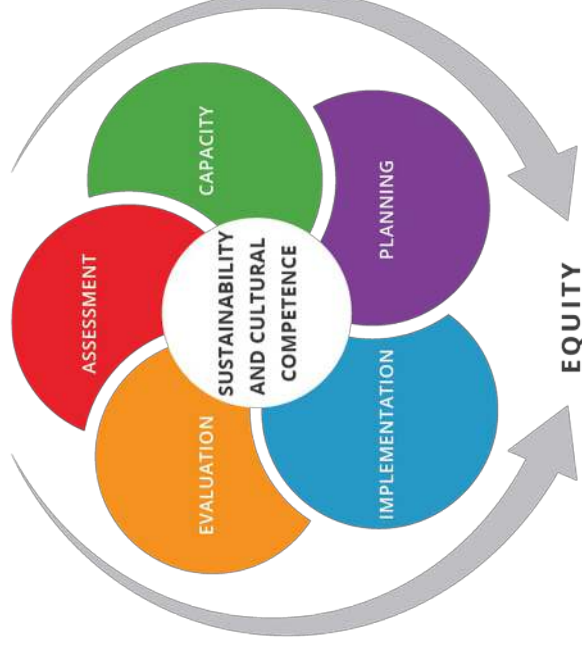
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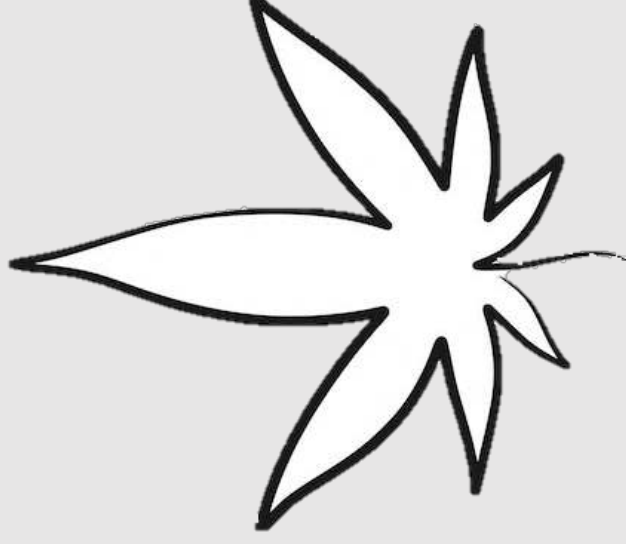
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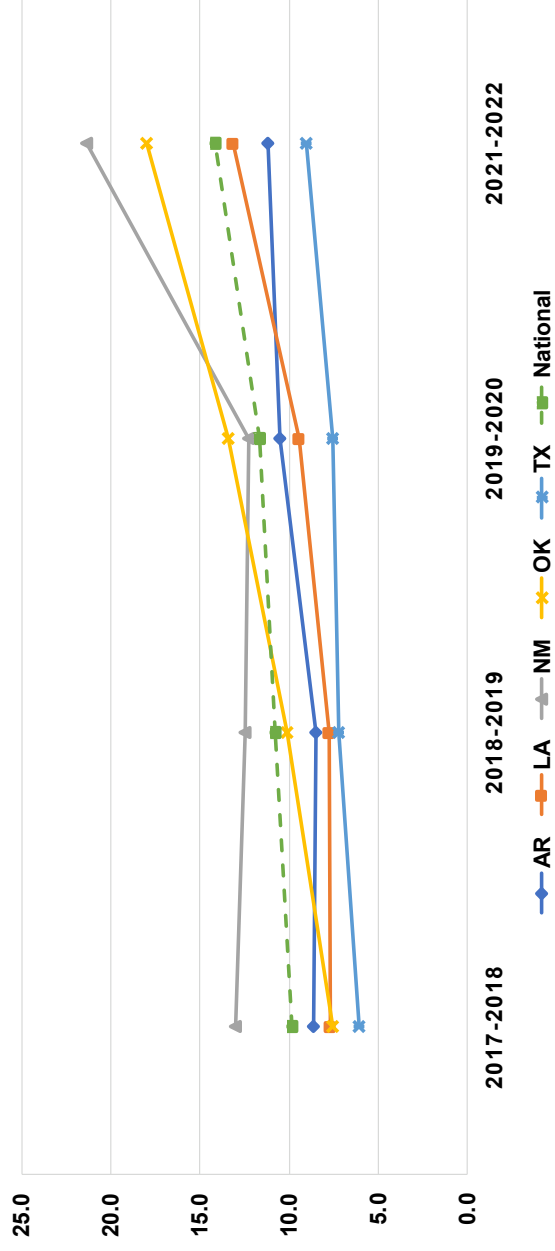
Cannabis



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Cannabis Use in the Past Month, 2017-2022



Handout

Source: National Survey on Drug Use and Health, 2017-2022



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Past-Month Cannabis Use by Age, 2022

	12-17	18-25	26+
Arkansas	6.2%	20.5%	10.3%
Louisiana	6.6%	23.5%	12.3%
New Mexico	12.4%	33.6%	20.5%
Oklahoma	9.2%	27.3%	17.5%
Texas	4.5%	18.7%	8.0%
National	6.3%	25.3%	13.3%



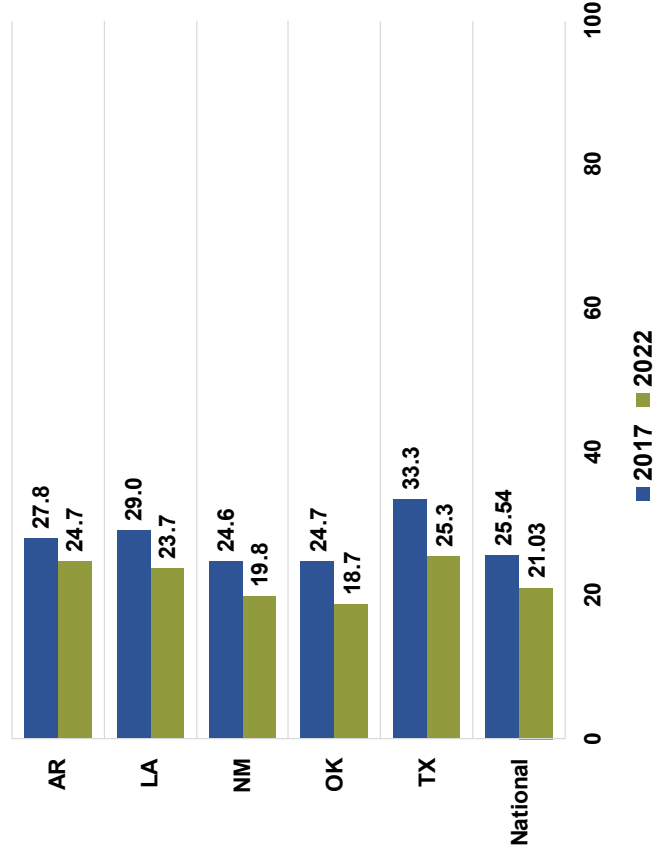
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Source: National Survey on Drug Use and Health, 2022

Perception of Great Risk of Harm: Cannabis



Source: National Survey on Drug Use and Health, 2017-2022



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Additional Risk Factors: Cannabis

- Engaging in antisocial behaviors
- High perceived peer cannabis use
- Parental acceptance of cannabis use
- High rates of family conflict
- Low policy enforcement rates
- Non-medical legalization-related factors

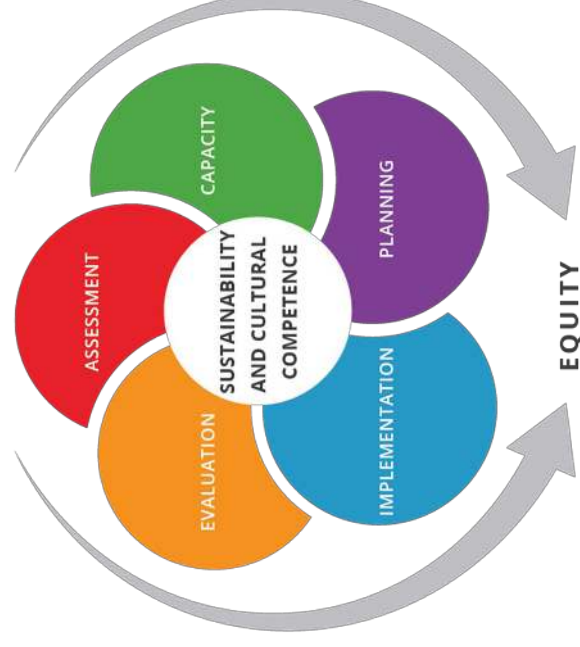


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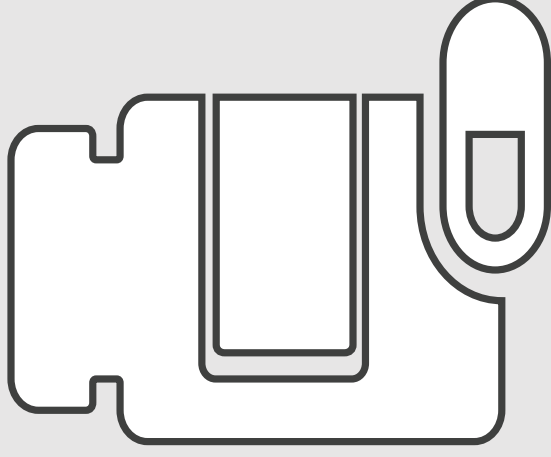
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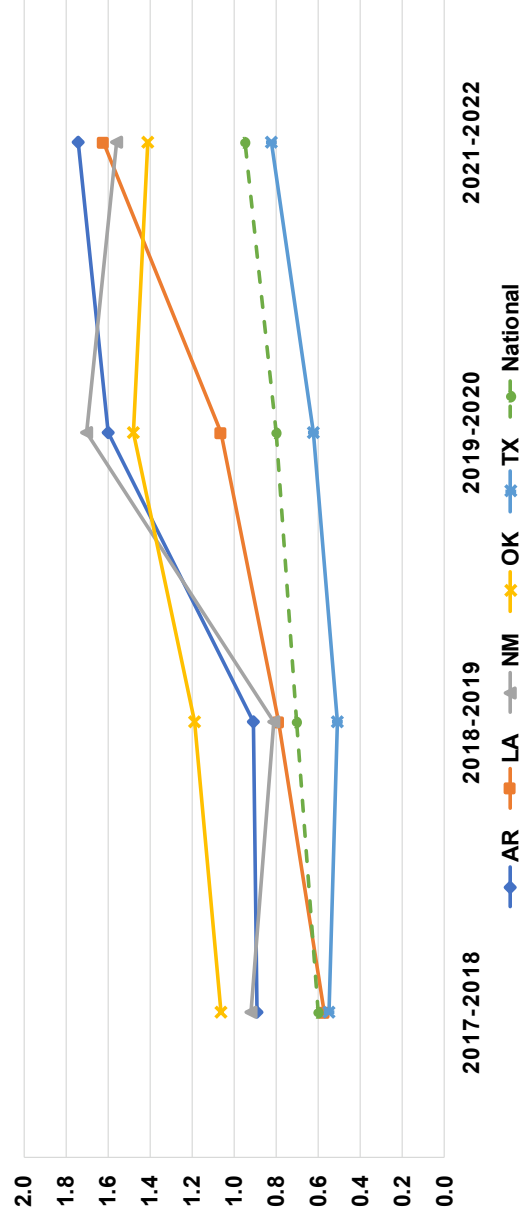
Stimulants



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Methamphetamine Use in the Past Year 2017-2022



Past-Year Methamphetamine Use by Age, 2022

	12-17	18-25	26+
Arkansas	0.13%	0.95%	2.07%
Louisiana	0.15%	0.49%	1.98%
New Mexico	0.11%	0.56%	1.90%
Oklahoma	0.09%	0.71%	1.71%
Texas	0.12%	0.29%	1.00%
National	0.10%	0.50%	1.12%



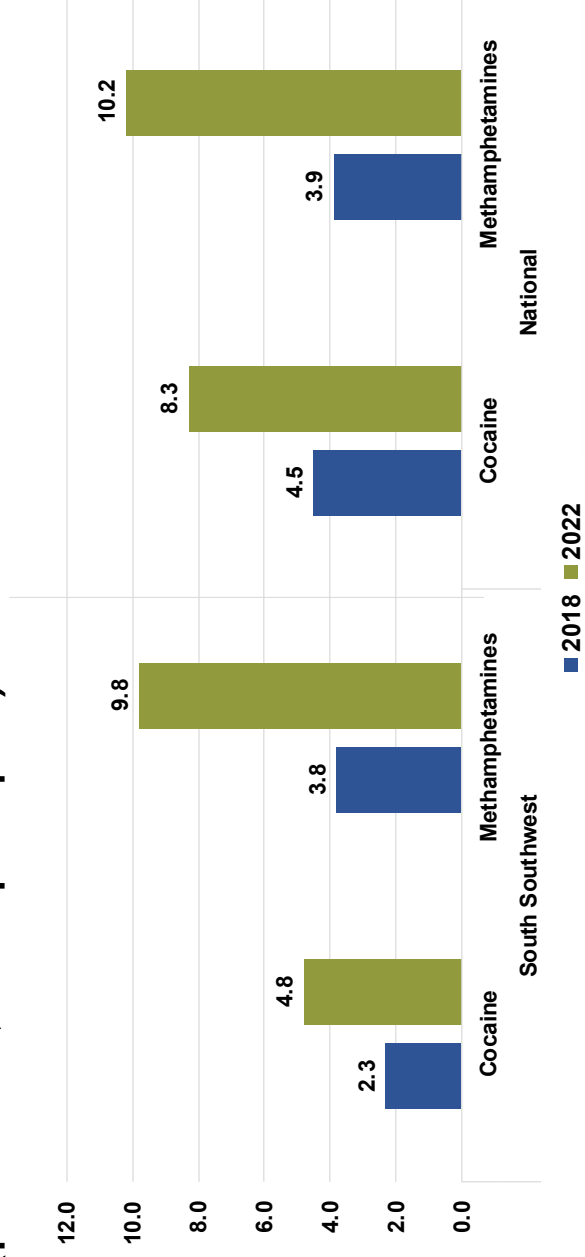
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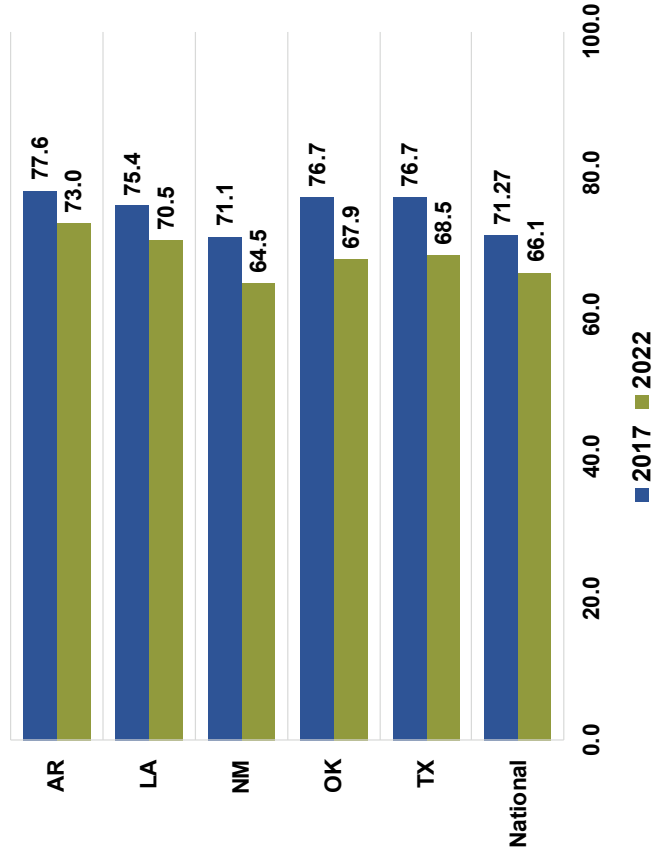
Source: National Survey on Drug Use and Health, 2022

Stimulant-Involved Overdoses, 2018-2022 (per 100,000 people)



Source: CDC WONDER

Perception of Great Risk of Harm: Cocaine



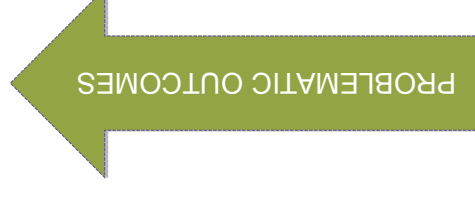
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Source: National Survey on Drug Use and Health, 2017-2022

Additional Risk Factors: Methamphetamine

- Engaging in current heroin use
- Having past substance use
- Family history of substance use, alcohol use disorder, or criminal behavior
- History of criminal justice involvement
- Lower educational attainment
- Lower annual income
- Increased availability



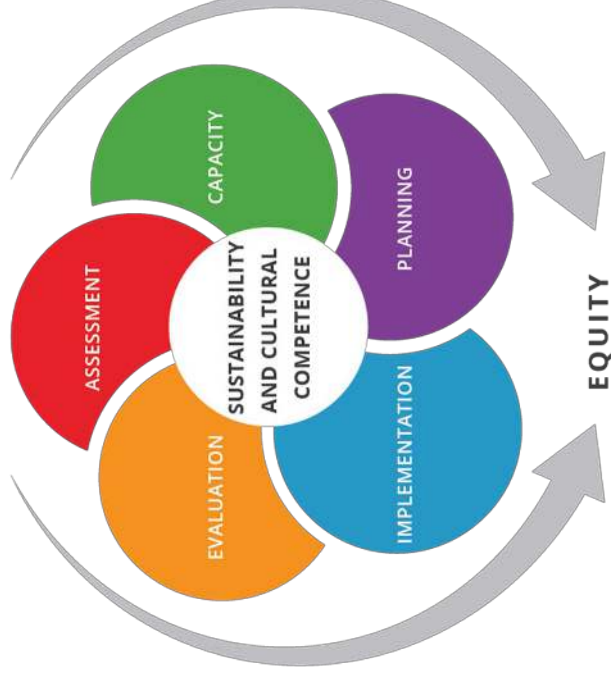
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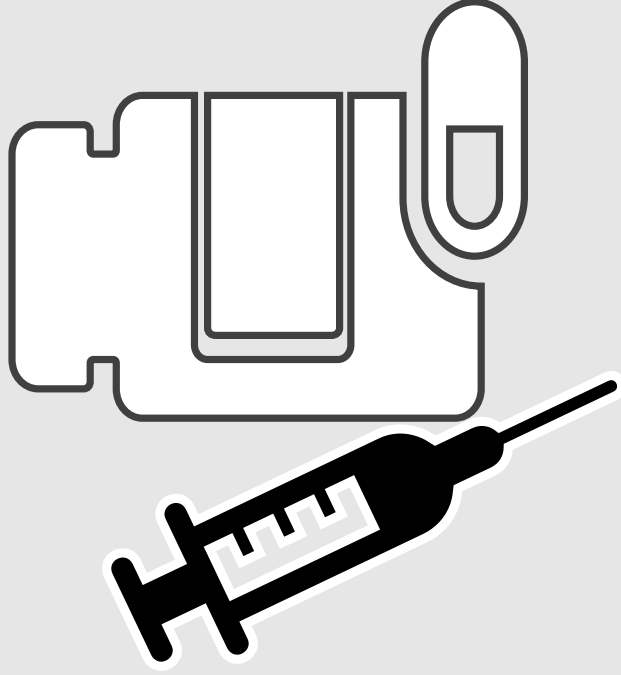
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- What other information do you need?



Opioids



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Past-Year Opioid Misuse Use by Age, 2022

	12-17	18-25	26+
Arkansas	1.8%	3.2%	4.2%
Louisiana	1.9%	3.8%	4.7%
New Mexico	2.1%	4.3%	4.0%
Oklahoma	1.8%	3.5%	4.2%
Texas	1.9%	3.1%	3.5%
National	1.9%	3.2%	3.4%



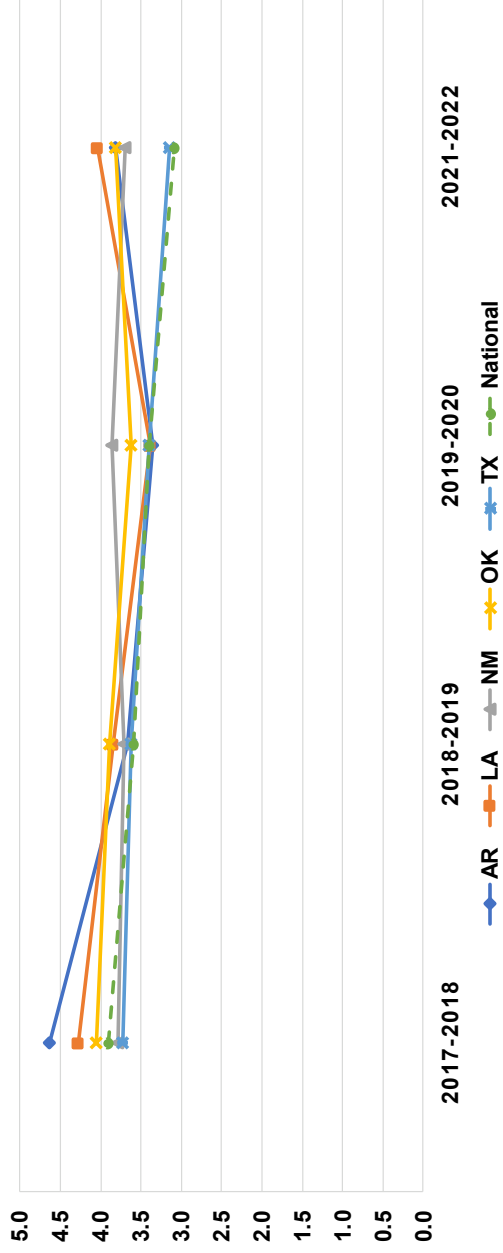
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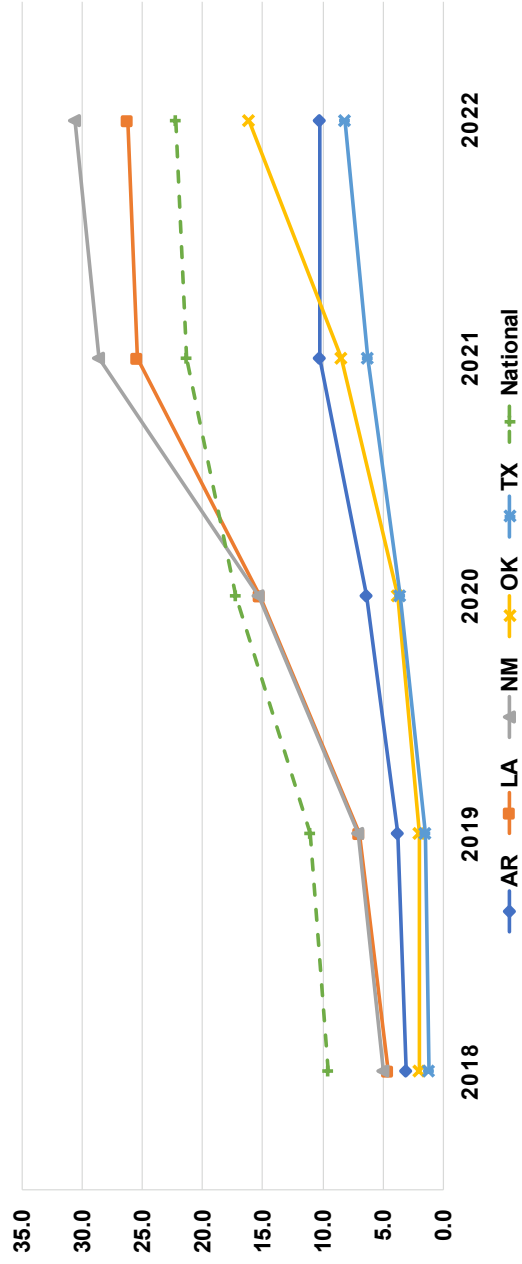
Source: National Survey on Drug Use and Health, 2022

Past-Year Prescription Pain Reliever Misuse, 2017-2022

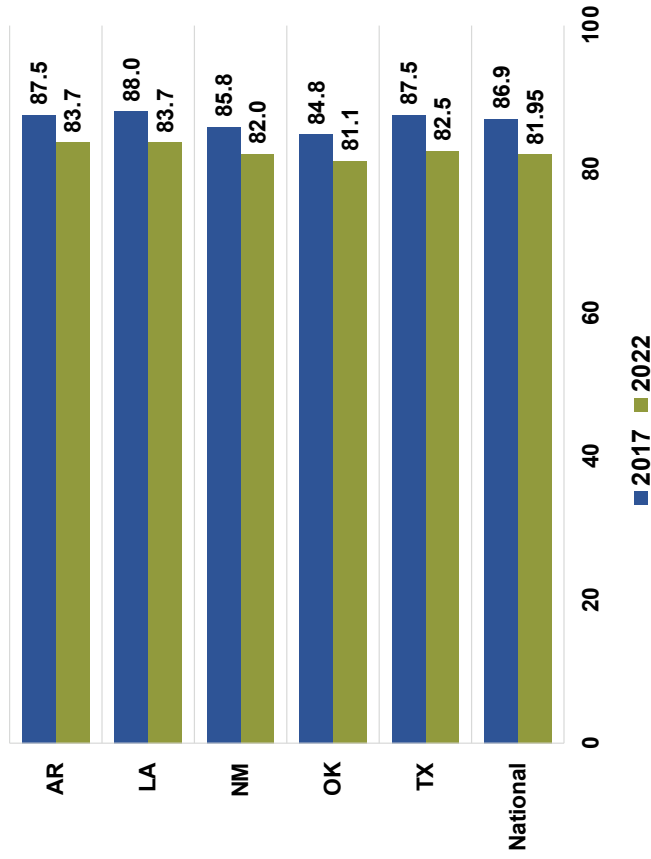


Source: National Survey on Drug Use and Health, 2017-2022

Fentanyl-Involved Overdoses, 2018-2022 (per 100,000)



Source: CDC WONDER



Perception of
Great Risk of
Harm:
Heroin



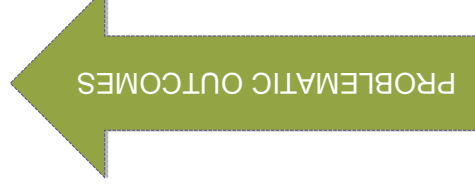
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Source: National Survey on Drug Use and Health, 2017-2022

Additional Risk Factors: Opioids

- Past and current substance use
- Mental health disorder
- High level of pain or chronic pain
- Experiencing discrimination
- Having a prescription for high dose, prolonged duration, extended-release opioids



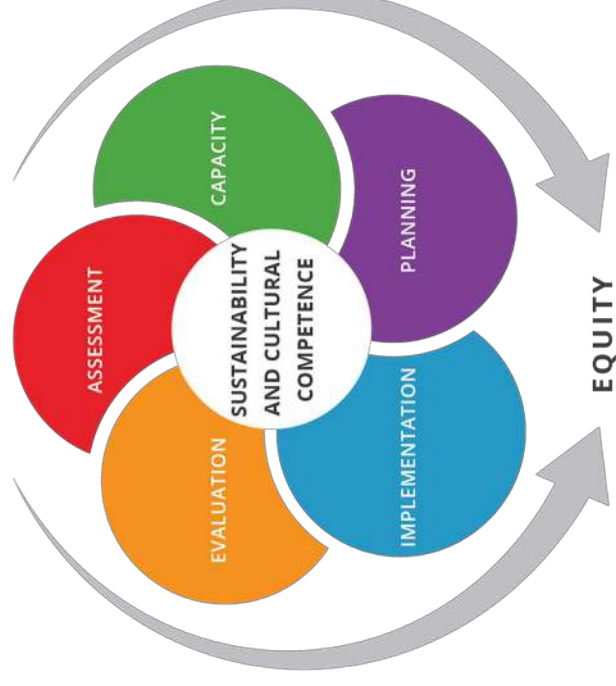
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Group Discussion

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Opportunities for Addressing Emerging Trends as Part of a Comprehensive Approach to Prevention



What Can We Do?

1. Implement a public health approach
2. Engage in advocacy
3. Promote education and awareness
4. Collaborate with harm reduction providers

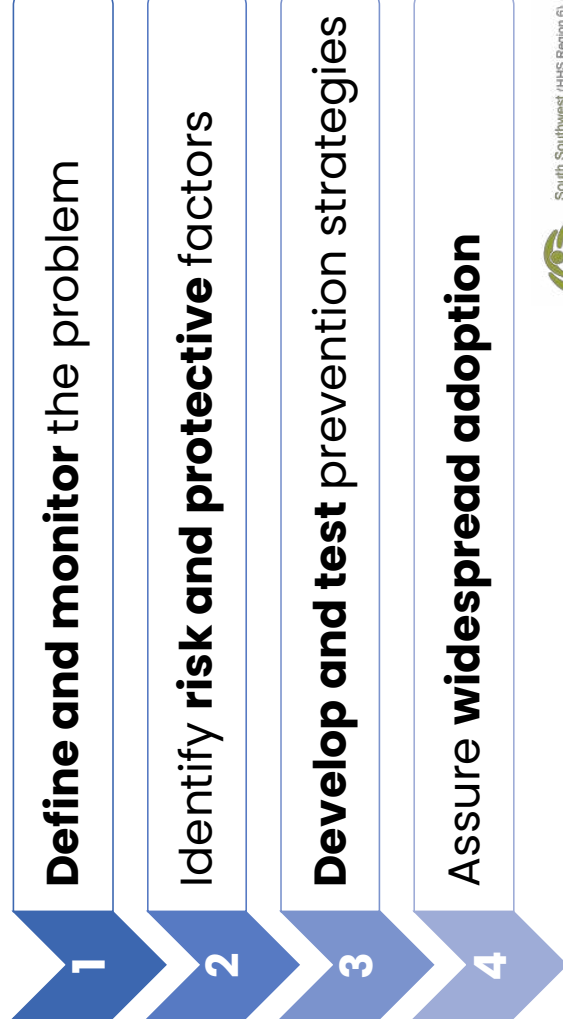


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The Public Health Approach (PHA)



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Best Practices for Using a PHA to Address Emerging Trends

Implementing true epidemiological surveillance

Connecting priority issues to their underlying cause

Connecting program planning to underlying causes

Supporting pilot programs and expanding the evidence base

Sharing best practices and lessons learned with others

Advocacy

- Social and/or organizational change
- Raises awareness and support
- Evidence-based approach
- Implemented at all levels -- individual, organizational, community, structural
- Supports other environmental strategies



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Education and Awareness

- Changes or reinforces community norms
- Increases public awareness



Screen4Success
Substance Use
Prevention



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Harm Reduction

- Reduce stigma and promote safety
 - Safe injection sites
 - Safer supply initiatives
 - Syringe exchange services
 - Test strips
- Reduce barriers to receiving care
 - Wound care
 - Public health vending machines
 - Mobile health clinics
 - Referrals to services



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Conclusions


- Cannabis use and fentanyl-involved overdoses are the most rapidly increasing issues
- Understanding the causes behind these trends is essential, especially the potential role of declining perceptions of harm
- Consider how this shift impacts your work in your community
- Remember: You may already be implementing the best strategy to address emerging trends



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What's the first thing you
will do based on what
you learned today?

Resource

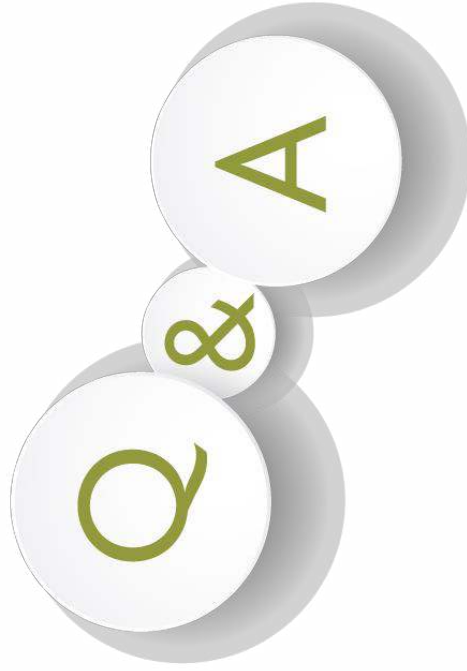
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