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Repository Citation

Booth, V. M. (2020). Nevada's Secret Killer: Opioid Deaths. 1-15.
Available at: <https://digitalscholarship.unlv.edu/award/48>

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Nevada's Secret Killer: Opioid Deaths

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April 16, 2020

Abstract

Presented in this study is an analysis of the Nevada opioid crisis and how a viable solution can impact its severity. It does so in a public policy environment while synthesizing outside sources to support the presented claims. The scope of this study is to present a problem, cause, solution scenario on how to solve this policy problem. This study also takes into consideration Nevada's current economic state amid the coronavirus (COVID-19). In addition, this analysis also addresses the history behind the opioid epidemic across the United States and how it is impacting Nevada in present times. The research findings of this study indicate that if inadequate treatment centers is a critical policy problem, and poorly allocated federal funds is the cause of this problem, then the solution is for Nevada to expand federal funds to all opioid treatment centers (OTC) across the state.

Keywords: opioid deaths; substance abuse; Nevada; public policy

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Introduction

For the last decade, policymakers, leaders in the medical community, and Nevada legislators have tried to get a grasp on the severe opioid crisis ravaging intersectional communities across the state of Nevada. To provide some background information, opioids are prescription drugs used to treat or alleviate acute or chronic pain (National Institute on Drug Abuse, n.d.). They are also viewed as a class of drugs that interact with opioid receptors on nerve cells in the body and brain. They work to decrease feelings of pain and activate the reward areas of the brain.

However, among society, these compounds are widely feared due to their association with abuse, addiction, and adverse effects. The rising number of opioid users is not just an event happening in the state of Nevada, but across all of North America. Many ask though, how did this even come to be in the last decade? Originally, opioids were only used in severe cases like life or death to help treat patients. In the mid-1990's pharmaceutical companies began aggressively marketing new forms of opioids such as Oxycontin while claiming that they were less addictive and could help improve the quality of life for many Americans. This new concentration of opioids being distributed throughout society resulted in a sharp increase in the availability of these narcotics.

Despite these events, the use of these drugs resulted in psychological dependence throughout a variety of users. First starting off at legitimate use, dependent use, and finally abuse. Some claim that many users then began switching to cheaper and more powerful illicit opioids that were sold through third parties on the street. Nonetheless, many policy scholars

today look at the opioid crisis as a multilateral-intersectional problem that can take on a variety of forms when looking for a viable solution.

Purpose

The purpose of analyzing this policy problem in this study is to gauge a greater understanding of the opioid epidemic ravaging Nevada's healthcare system and families.

This study hopes to shed light on the threat the opioid crisis poses to Nevada's communities and on possible pathways to solutions that can help mitigate its severity.

Problem

After describing a brief overview of the opioid epidemic's history, what does this crisis look like on Nevada soil? According to the live Nevada Opioid Surveillance Dashboard, there were 11 opioid-involved deaths per 100k in 2018 (Nevada Department of Public and Behavioral Health, 2018). From this, we can presume that there were approximately 330 deaths in the state of Nevada during 2018. In addition, a Pew Research study also found that 46% percent of U.S. adults have a family member or close friend who suffers from opioid abuse (Pew Research Center, 2017). Seeing that opioid abuse in Nevada is something extremely common, many wonder if there is a time when it will ever come to a halt.

In addition to this, because this has been a crisis that has been going on for practically a decade, many Nevadans forget that it still exists and is worsening. Only when mainstream deaths occur do people remember the opioid crisis threat to society. One scenario that has garnered lots of public attention to the opioid crisis is the Nevada plane crash of March 2019 that killed three people. An article in the *Las Vegas Sun* stated, "A toxicology test showed the pilot had recently used three separate opioid drugs and a sedative that could have contributed to poor decisions,

including overfilling the plane's fuel tanks by 178 pounds beyond the maximum weight” (Las Vegas Sun, 2019). Not long after this, Nevada Attorney General Aaron Ford expanded Nevada's opioid lawsuit (Micher, 2019). These two scenarios however only shed brief insight on some of Nevada's recent involvement in the opioid crisis.

Knowing that many were very upset by the plane crash in 2019 and the increased amount of opioid deaths across our state, officials have tried to take further measures to get a grip on the opioid problem which has failed due to their inability to target an effective solution. When presented with a policy problem as complex as this one, it's important to look for an effective solution that is both viable and will have the least amount of resistance.

Cause

Seeing how opioid abuse is significantly common among Nevadans, it is extremely important that there are a vast amount of opioid treatment centers (OTP) to treat these patients. However, some may find it surprising that there are only 15 opioid treatment centers across the state of Nevada, leaving rural areas with no treatment centers and unaccounted for. This can be understood however because Nevada is such a large geographical region and although there are not any treatment centers in the rural areas of Nevada, the opioid use/death rate resulting from overdoses is significantly lower than compared to Las Vegas, Carson City, and Reno. Yet, the biggest problem resulting from Nevada's approach to addressing the ongoing opioid crisis is Nevada's underfunded opioid treatment centers. According to a guide published by the Nevada Division of Public and Behavioral Health, three OTP's out of the fifteen in the state of Nevada receive federal funding from SAPTA through the Federal Block Grant (Division of Public and Behavioral Health, 2019, p. 21). This makes treatment centers extremely ineffective,

inaccessible, and unaffordable. In addition, the majority of these facilities have programs that are covered by public funds like medically assisted treatment (MAT), which combines behavioral therapy and medications to treat substance abuse. Leaving these treatment centers to be publicly funded instead of federally funded has resulted in many of them choosing to not prescribe and host at capacity.

According to a survey from the Nevada Division of Public and Behavioral Health, the main reasons OTP centers across the state of Nevada are not at prescribing capacity is because “reimbursement rates are insufficient” (Division of Public and Behavioral Health, 2019, p. 25). If opioid treatment centers choose to prescribe at full capacity, that means they can provide MAT programs, narcotics, counseling services, career-building opportunities, and other services to their patients. These services, if given to every patient seeking treatment, will likely increase their chance to recover from their current opioid addictions. As claimed by the Brookings Institute, “Broader access to substance abuse treatment may help individuals manage their addiction and reduce the negative consequences of opioid use” (Brookings Institute, 2018). However, that is not the case in Nevada when treatment centers are poorly funded and under supported. A survey conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA) found that as many as 90 percent of people who most need drug rehab or opioid treatment do not receive it (Substance Abuse and Mental Health Services Administration, 2020). Seeing how many people who don't receive opioid treatment on a general spectrum, it's clear that treatment will successfully minimize the number of opioid deaths resulting from overdoses.

While Nevada was awarded \$1.68 million in federal grants to support the opioid crisis in 2019, there is a frequent trend of miss-allocating federal funds to opioid treatment centers (Carson Now, 2019). In order to comprehensively address the epidemic, Nevada must have adequately funded and supported treatment centers to prevent future overdoses. And although opioid deaths have started a slow decline in the last two years, there are already predictions of higher opioid use due to the coronavirus. According to a U.S. Department of Health and Human Services study, “poverty and unemployment are highly correlated with opioid use disorder” (U.S. Department of Health and Human Services, 2018, p.2). Seeing that Nevada will soon see a sharp increase in opioid cases/overdoses, it's imperative that our treatment system and federal funding allocations be readdressed before the opioid crisis worsens.

Solution

While the Nevada opioid crisis is a multilateral problem with many different factors, the timely and viable solution to solve this epidemic is to ensure that all OTP centers in the state of Nevada are federally funded rather than publicly funded. It's clear that after the coronavirus passes, Nevada's economic infrastructure may not be up to the task of relying on public funds for these office locations. And while this solution alone may not completely solve all of Nevada's legislative loopholes in addressing this problem, it will definitely make a lasting impact on intervening in the opioid addiction process by providing affordable and accessible treatment for patients of all backgrounds. This solution will also prevent future damage to the opioid crisis as it will soon see a peek from the coronavirus and open doors for policymakers. It's imperative that members of our state legislature and representatives in Congress act quickly to establish this

allocation of funds as seen by the data I presented earlier which predicts a significant increase in opioid-related deaths due to the coronavirus.

Breakdown of Problem/Cause/Solution

If inadequate treatment centers is a critical policy problem, and poorly allocated federal funds is the cause of this problem, then the solution is for Nevada to expand federal funds to all OTP centers across the state.

Conclusion/Discussion

The Nevada opioid crisis is a multilateral, complex, and intersectional problem. However, because of its complexities, it deserves to be studied and analyzed in order for policymakers to improve the lives of people affected by this epidemic whether it be their loved ones, themselves, or colleagues. The opioid crisis is not immune to anyone and can cause severe damage to Nevada's healthcare system, families, and even communities. Seeing that the first step in saving people from drug overdoses is providing treatment, Nevada must establish proper and adequate federal funding to support all of its opioid treatment centers. Policy scholars should also examine the possibility of investing in some rural OTP centers to ensure patients there receive accessible treatment.

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