



Developing a Public Education Campaign on Prescription Opiates

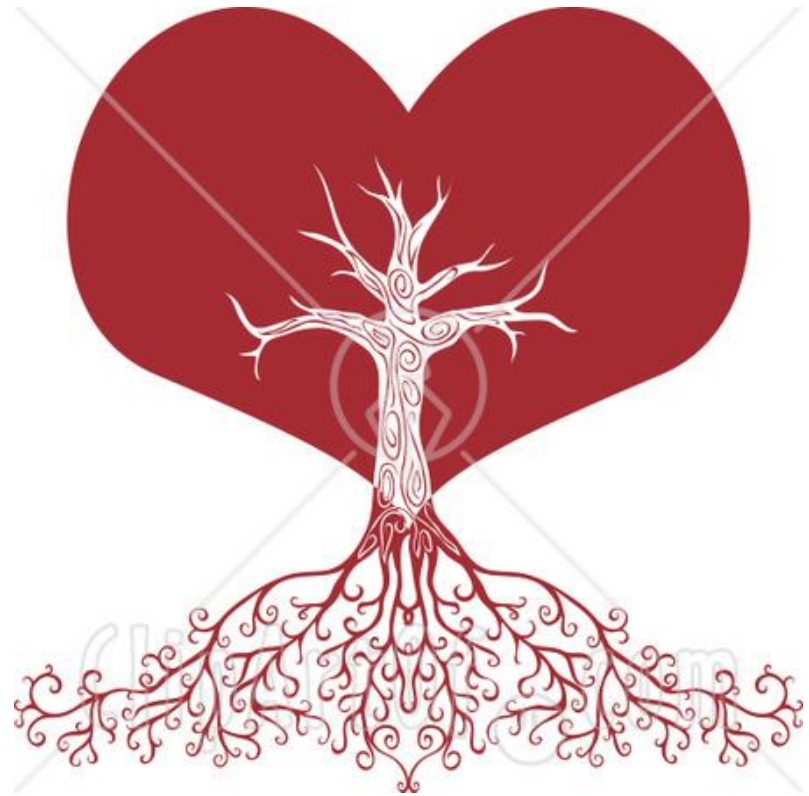
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Desired Outcomes// What I hope you will get out of this

- Understand the process and outcomes to-date of the development of a public education campaign on prescription opiate use in the Portland Metro region.
- Identify what is relevant or meaningful for your local region around messaging to the public on prescription opiate use.



Has a public education campaign ever made you think or feel something? Why did it have this impact?



Overview// Metro region planning process

- Local public health participation: Multnomah, Washington, Clackamas, & Clark Counties
- Community partner participation: Lines for Life, PREVENT Coalition, Urban League, Outside In, members of Healthy Columbia Willamette Opioid Use and Pain Education Work Group



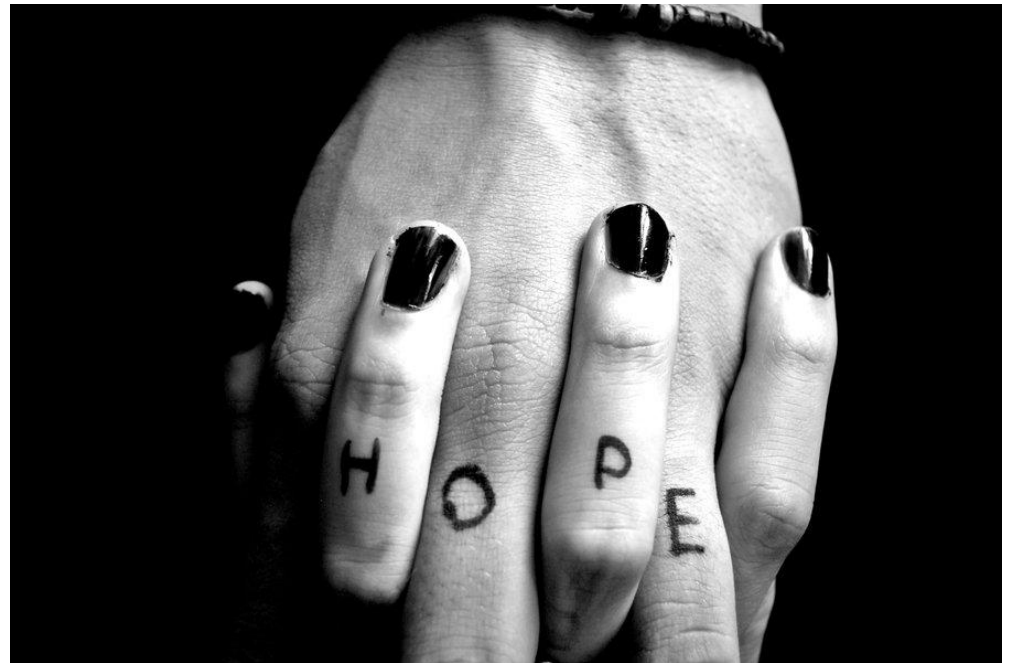
Overview// Metro region planning process

- Components of a public education campaign to reduce prescription opiate use:
 - Campaign purpose
 - Target audience
 - Messages
 - Communication channels
 - Evaluation plan
 - Budget
- Our planning deliverable: scalable proposal that contains different funding options



Important Qualities of Campaign

- Acknowledge fear
- Amplify hope
- De-stigmatize abuse & addiction
- Educate people about the risks
- Be respectful
- Reinforce patient and provider education efforts



Primary Purpose// What we hope campaign will achieve

Raise
community
awareness of
the dangers of
prescription
opiates.



Summary of Data // Overdose Deaths

Over the last 5 years, we have seen the most prescription opiate overdose deaths among...

- Males (60-70%)
- 45-50 years-old
- 9 out of 10 are white

*Source: Mult. Co. Medical Examiner;
data are preliminary*



Summary of Data // Prescription Rates

- In Mult. Co., 225 people per 1000 receive prescriptions for opiates
 - This is below median – Josephine Co. has highest rate at 298/1000
- Age 45-54 represent 25% of population but 45% of total prescriptions (Mult. Co.)

Source: OHA, Prescription Drug Dispensing in Oregon, 2013



Summary of Data // Diverted Meds//Youth



- 1 in 4 teens reports having misused or abused a prescription drug at least once in their lifetime.
- 1 in 5 teens who say they have abused prescription drugs say they did so before age 14.
- 1 in 4 teens believe that misusing and abusing prescription drugs is safer than using street drugs.
- 1 in 3 say they believe “it’s okay to use prescription drugs that were not prescribed to them to deal with an injury, illness or physical pain.”



Summary of Data // Diverted Meds//Parents

- More than 4 in 10 teens who have misused or abused a prescription drug took it from their parent's medicine cabinet.
- 1 in 4 teens say their parents don't care as much if they are caught using prescription drugs without a prescription, compared to getting caught with illegal drugs.
- 1 in 6 parents believe that using prescription drugs to get high is safer than using street drugs.



Summary of Data // Treatment

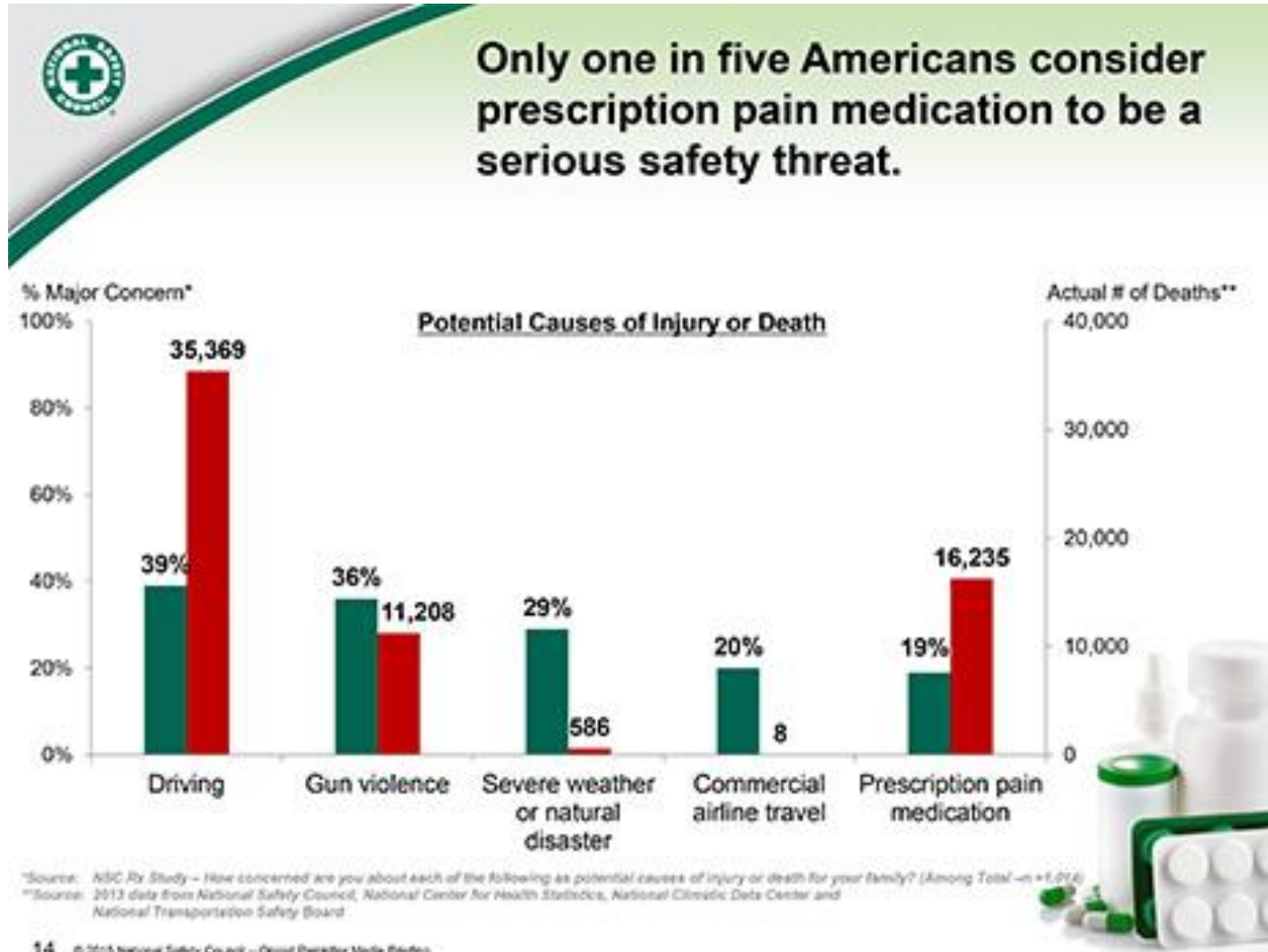
Of those who initiate treatment:

- 60% are between the ages 21-35
 - Highest age group is 26-30 years (23% of admissions)

Source: SAMHSA 2013; State data from DHHS, 2012, confirms this pattern for Oregon



“Public Does Not Understand Danger of Opioid Addiction” (2015 National Safety Council Report)



“Public Does Not Understand Danger of Opioid Addiction” (2015 National Safety Council Report)

- Americans don't know their painkillers contain opioids, or that it is a felony to share them.
- Opioid users are unconcerned about addiction, but most have reason to worry.
- Opioid users overestimate the benefits of opioids and underestimate the risks of addiction or death.



Staged Approach// Sequencing messaging for maximum impact

- Increase perception of risk in Stage 1: Risk Awareness
- Encourage people who are using prescription opiates for chronic pain to seek better ways to manage pain in Stage 2: Pain Education & Care



Stage 1// Risk Awareness

Core Message:

- *“Prescription opiates are dangerous and can lead to overdose.”*

Target Audience:

- Parents and adults who have prescription opiates in their homes.
 - We know that the majority of prescription holders (45%) are between the ages of 45 and 54.



Stage 1// Risk Awareness

Primary Action (the main thing the campaign is asking people to do):

- Talk to your loved ones about the dangers of opiate overdose.

Secondary Actions:

- Learn about safely storing prescription opiates.
- Learn about safely disposing of excess prescription opiates.



Stage 1// Risk Awareness

Target Behaviors:

- Recreational or diverted use of prescription opiates.
- Lax practices of prescription holders that enable above.

Stage of Change: Precontemplation (Not Ready)

- People in the Precontemplation stage do not intend to take action in the foreseeable future, may be uninformed or under informed about the consequences of one's behavior, and may tend to avoid reading, talking, or thinking about their behaviors.



Stage 2// Pain Education & Care



Core Message:

- *“Prescription opiates are not the best way to manage chronic pain.”*

Target Audience:

- People who are using prescription opiates for chronic pain. *There will likely be overlap in who the campaign targets across both stages.*



Stage 2// Pain Education & Care

Primary Action (the main thing the campaign is asking people to do):

- Talk to your doctor about what can work best for managing chronic pain.

Secondary Actions:

- Learn about better ways to manage chronic pain.



Stage 2// Pain Education & Care

Target Behavior:

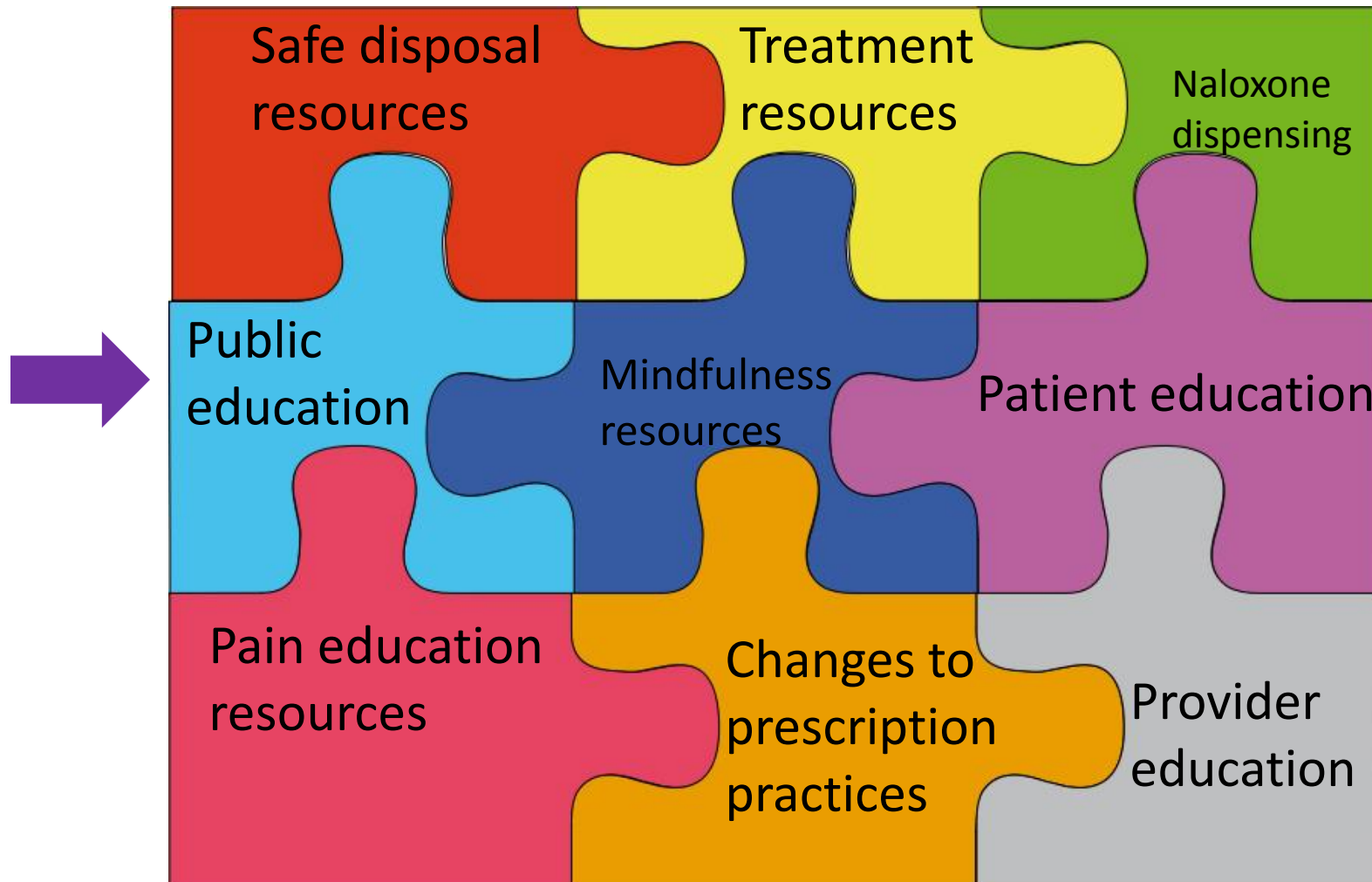
- Use of prescription opiates to manage chronic pain.

Stage of Change: Contemplation (Getting Ready).

- People in this stage are willing to consider the possibility that they have a problem, and the possibility offers hope for change.
- They are often quite interested in learning about treatment. Often with the help of a treatment professional, people can address ambivalence about changing a behavior by considering the pros and cons of their behavior, and the pros and cons of change.



A campaign to reduce dependence on and deaths from prescription opiates has many pieces



Reflection// Finding meaning for your local community

1. Does a staged approach focusing on risk awareness and pain education & care resonate for your community? Why or why not?
2. What messages do you think people need to hear?
3. What channels of communication are most effective in your community?
4. Do you have other thoughts on designing or implementing a public education campaign to raise community awareness of the dangers of prescription opiates?



Thank you for going on this journey with me!

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