

NIH HEAL INITIATIVE

Sept. 9, 2020

Bigger than Opioids: The Social, Structural, and Spatial Determinants of the U.S. Addiction and Overdose Crisis

Shannon M. Monnat, Syracuse University



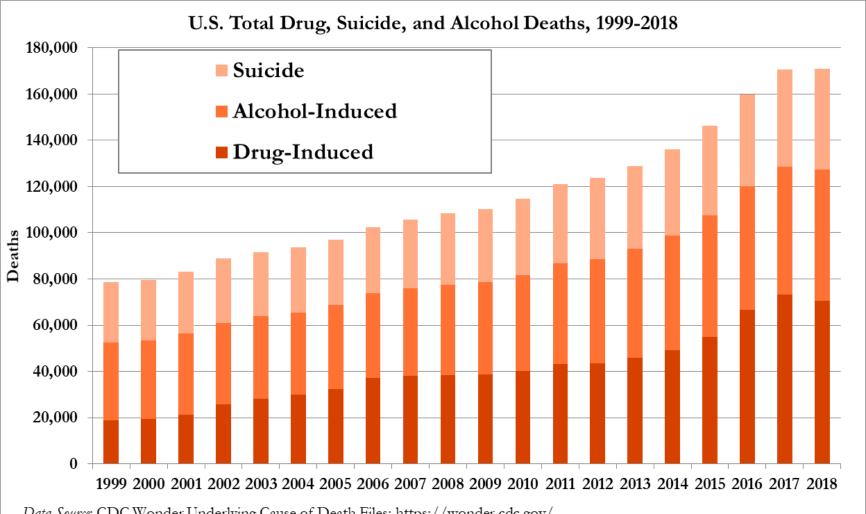
NIH HEAL Initiative and Helping to End Addiction Long-term are service marks of the U.S. Department of Health and Human Services.

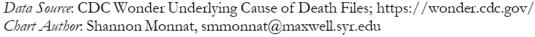
### **Main Takeaways**

- Our problem is bigger than opioids. It is bigger than drugs, altogether.
- Addiction is more than a brain disease. It is also a social disease.
- Place matters. We can observe clues about underlying causes when we research the geographic distribution of addiction and overdose.
- We can't Narcan our way out of this. Interventions must move upstream.
- Let's not lose the forest for the trees by always privileging causal research as the holy grail.



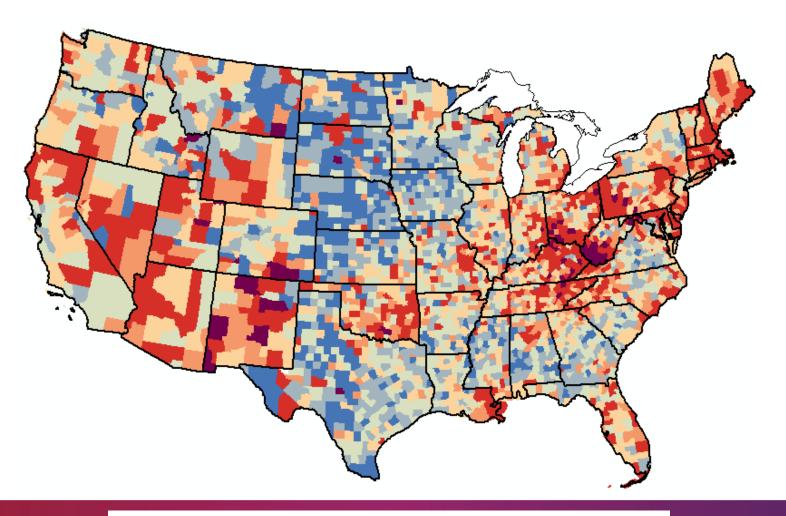
### Our Problem is Bigger than Drugs







# Fatal Drug Overdose Rates are Much Higher in Some Places than Others





## Why do some places have higher rates of fatal drug overdose than others?

**ECONOMY** 



SOCIAL INFRASTRUCTURE



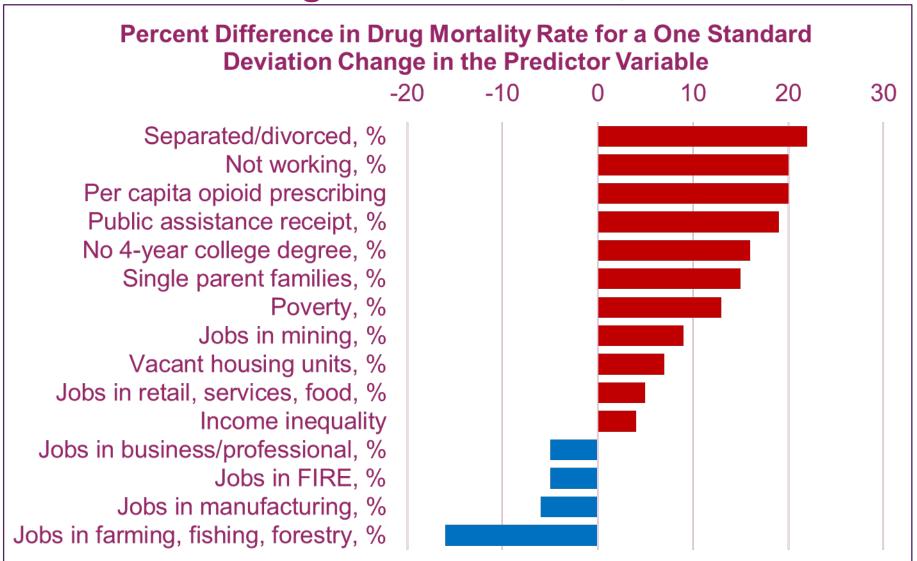




The key driving force is (dis)connection!



## Factors Contributing to Geographic Differences in Fatal Drug Overdose Rates, 2014-16



Monnat, Shannon M. 2018. "Factors Associated with County-Level Differences in U.S. Drug-Related Mortality Rates." *American Journal of Preventive Medicine* 54(5):611-619.

#### **Research Needs**

- Research that explores whether the various multilevel mechanisms that explain demographic and geographic trends in drug abuse are the same or different from those that drive trends in alcohol misuse and suicide (and other causes of death).
- Research than explores how long-term economic changes affect substance use, especially in certain geographic areas; how economic factors interact with social factors; and how programs to alleviate economic dislocation and other social stressors affect substance use.
- Research is needed to document the sources of increasing stress and disconnection in the lives of Americans (e.g., student debt, job & economic insecurity, family instability) and who is most affected by increasing stress & disconnection (e.g., the poor, less educated, young adults, racial and ethnic minorities, the long-term unemployed; rural residents).
- Research that explores the roles of various state policy choices (e.g., minimum wage; taxes; education; health care) in explaining geographic trends in SUDs and overdose.

#### **Data Needs**

- NIH and other agencies should support the oversampling of rural populations on national health and social surveys, including both new and existing (e.g., HRS, BRFSS, AddHealth, NSDUH, NHIS) surveys.
- SAMHSA should add region or census division and the 9-category USDA rural-urban continuum code or NCHS urban influence codes to the publicly accessible version of the NSUDH.
- Existing longitudinal studies (e.g., NLSY79, NLSY97), Fragile Families, Add Health) should routinely link their data to the National Death Index in order to support life course research on the early-life precursors of substance-related mortality.