



National Association for Behavioral Healthcare Annual Meeting

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Director

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Office of National Drug Control Policy

- Operational since 1989
- Principal drug policy adviser to the President
- Manages the National Drug Control Budget of more than \$40 billion
- Produces the *National Drug Control Strategy* and coordinates federal drug-control activities

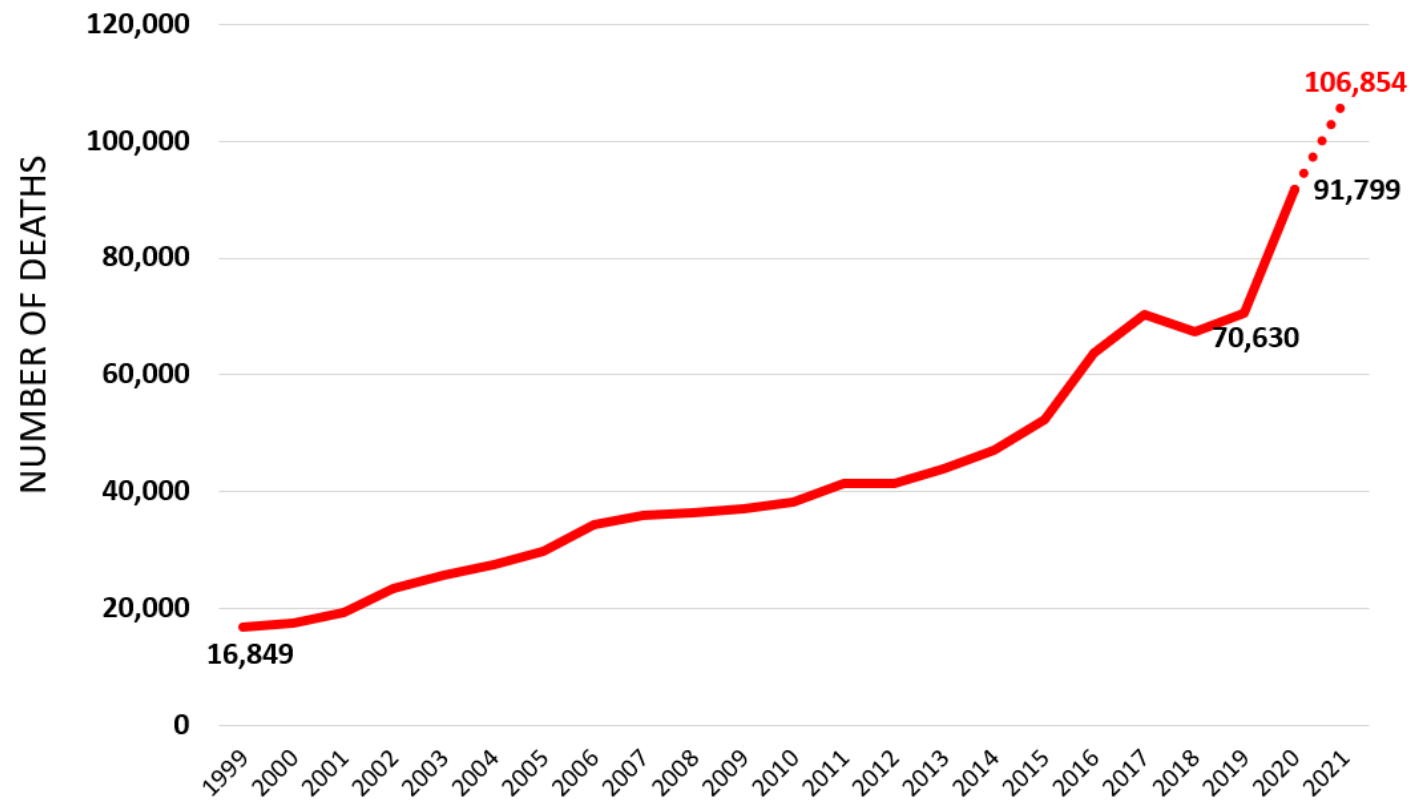


National Drug Control Program Agencies



Every Five Minutes a Life is Lost

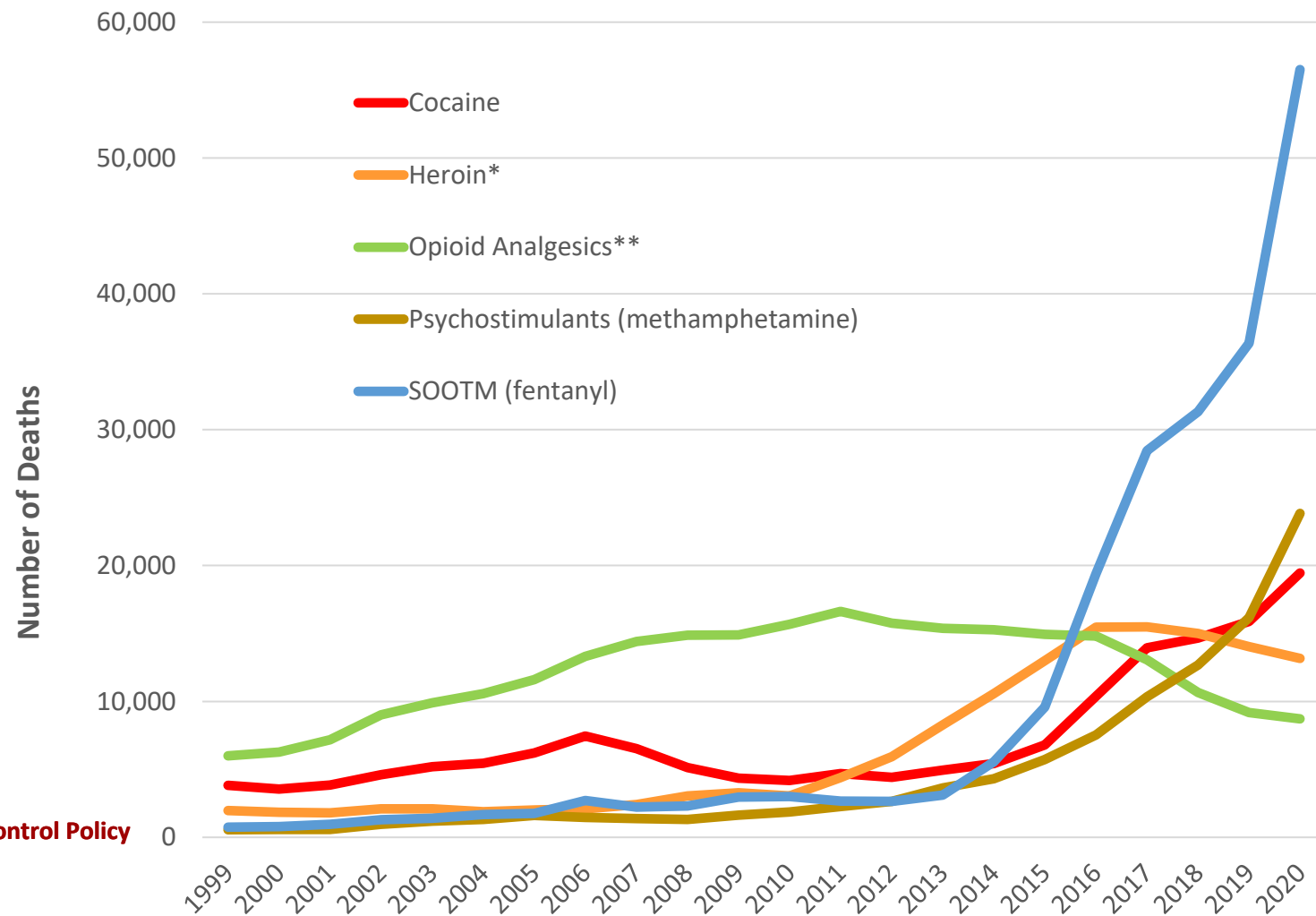
- For the first time in our Nation's history, we have passed the milestone of 100,000 deaths resulting from drug overdoses in a 12-month period.



Source: Centers for Disease Control and Prevention/National Center for Health Statistics. *Multiple Cause of Death 1999-2020* CDC WONDER Online Database for final data, extracted by ONDCP on December 22, 2021. Data for 2021 is the predicted provisional number from <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>, accessed on April 13, 2022.



Drug Poisoning Deaths Involving Selected Drug Classes 1999–2020



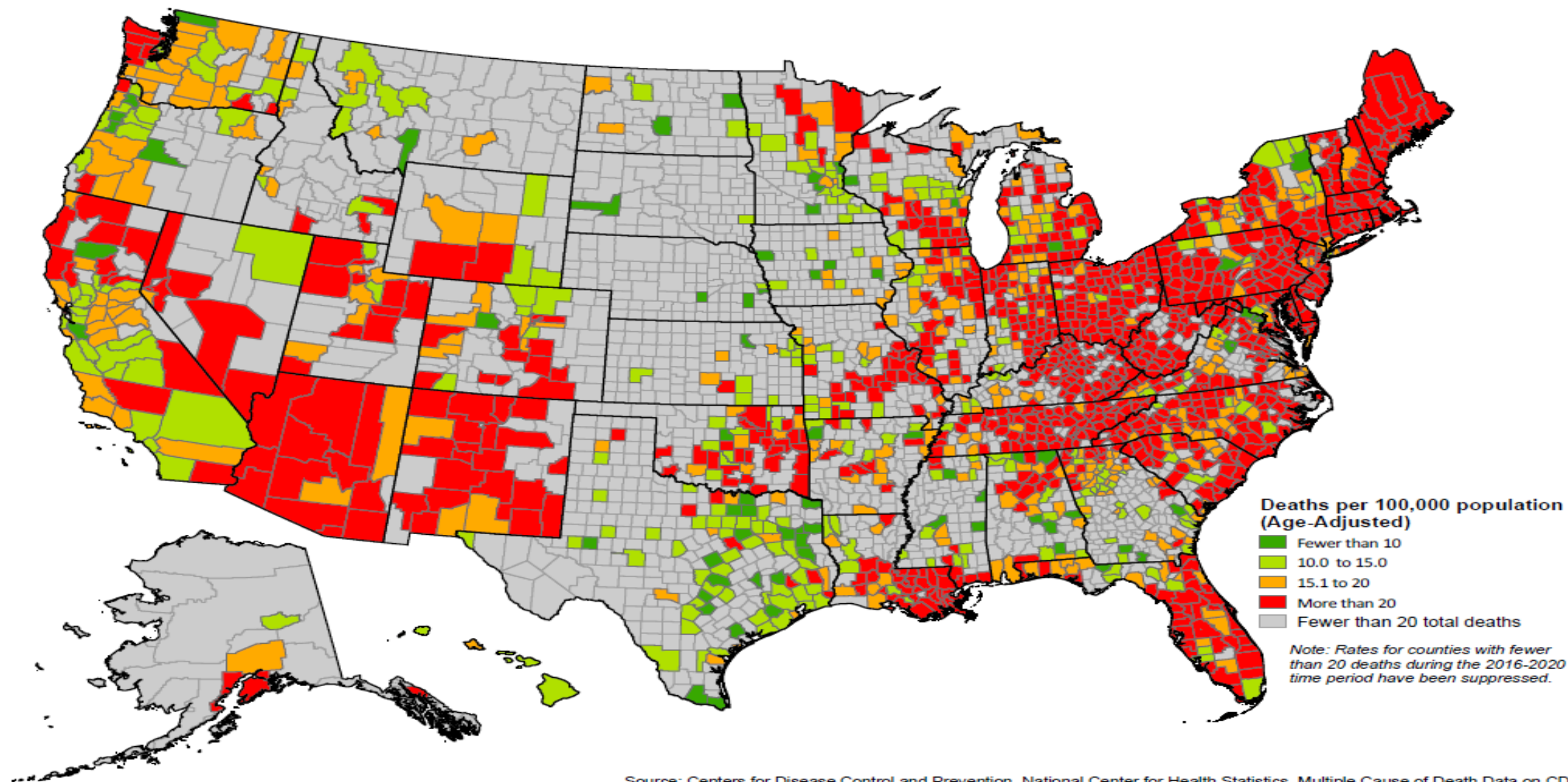
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1/2022



Drug Poisoning Deaths, Annual Average Rates, 2016-2020

U.S. National Age Adjusted Rate: 22.4 Deaths per 100,000 Population



Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Multiple Cause of Death Data on CDC WONDER Online Database, extracted by ONDCP on December 23, 2021.

Key Drivers of the Overdose Epidemic

- **Demand Side: Untreated Addiction**
 - Polysubstance use
 - Increased lethality of drug supply
 - Counterfeit pills – difficult to tell the difference



Key Drivers of the Overdose Epidemic

- **Supply Side: Drug Trafficking Profits**
 - The journey from China to your local emergency room
 - Border tunnels



What's the Solution?

- Compassionate response
- Sound policy built on science, evidence, and data
- High-impact, scalable, and sustainable actions



Already Accomplished

- **Telehealth for buprenorphine induction**
- **Mobile methadone vans**
- **New funding for harm reduction, including syringe services programs (SSPs)**
- **New Practice Guidelines**
- **Increased the Substance Abuse Prevention and Treatment Block Grant by 63%**
- **American Rescue Plan →** nearly \$4 billion for expanding access to vital mental health and substance use disorder services



President Biden's Unity Agenda

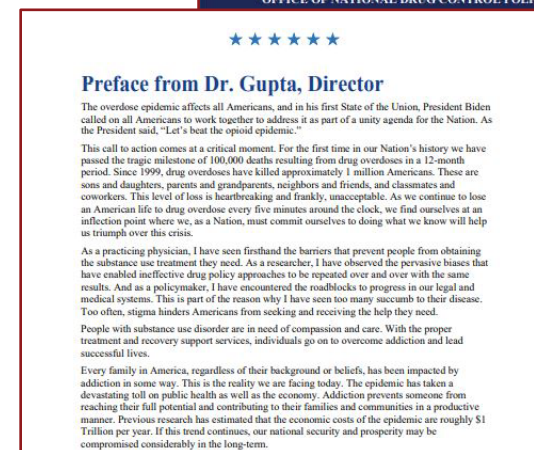
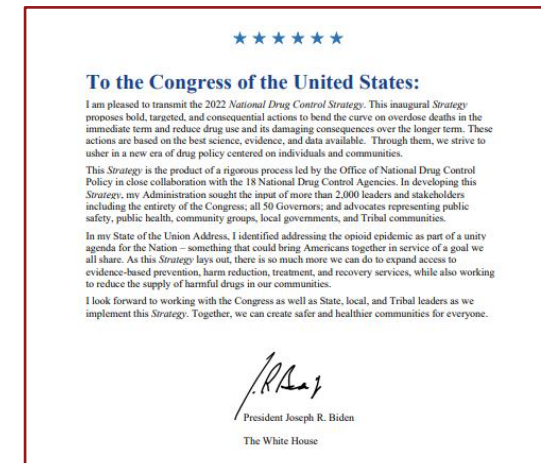
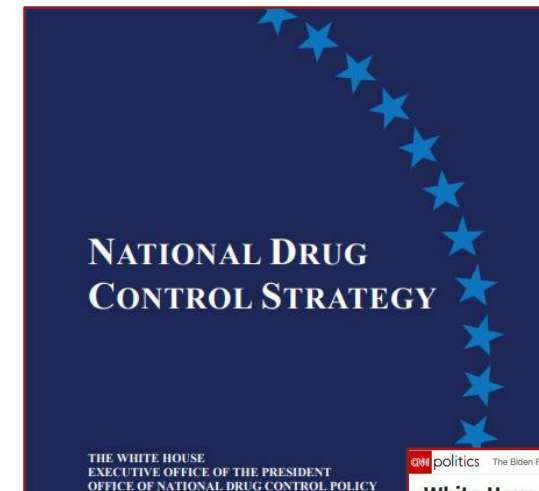
- Beat the overdose epidemic
- Take on mental health
- Support our veterans
- End cancer as we know it



President Biden's Inaugural National Drug Control Strategy

- Sound policy built on science, evidence, and data
- April 21, 2022: President Biden releases his inaugural National Drug Control Strategy

Office of National Drug Control Policy
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National Drug Control Strategy

Chapter Breakdown

- Prevention and Early Intervention
- Harm Reduction
- Substance Use Disorder Treatment
- Building a Recovery-Ready Nation
- Reduce the Supply of Illicit Substances through Domestic Collaboration
- Reduce the Supply of Illicit Substances through International Engagement
- Criminal Justice and Public Safety
- Data Systems and Research



Top Four Priorities

- **Making sure that naloxone is available at every overdose incident**
- **Scaling up treatment so our capacity meets the needs of everyone seeking care**
- **Timely, actionable data to guide our overdose response strategies**
- **Cracking down on illicit finance**

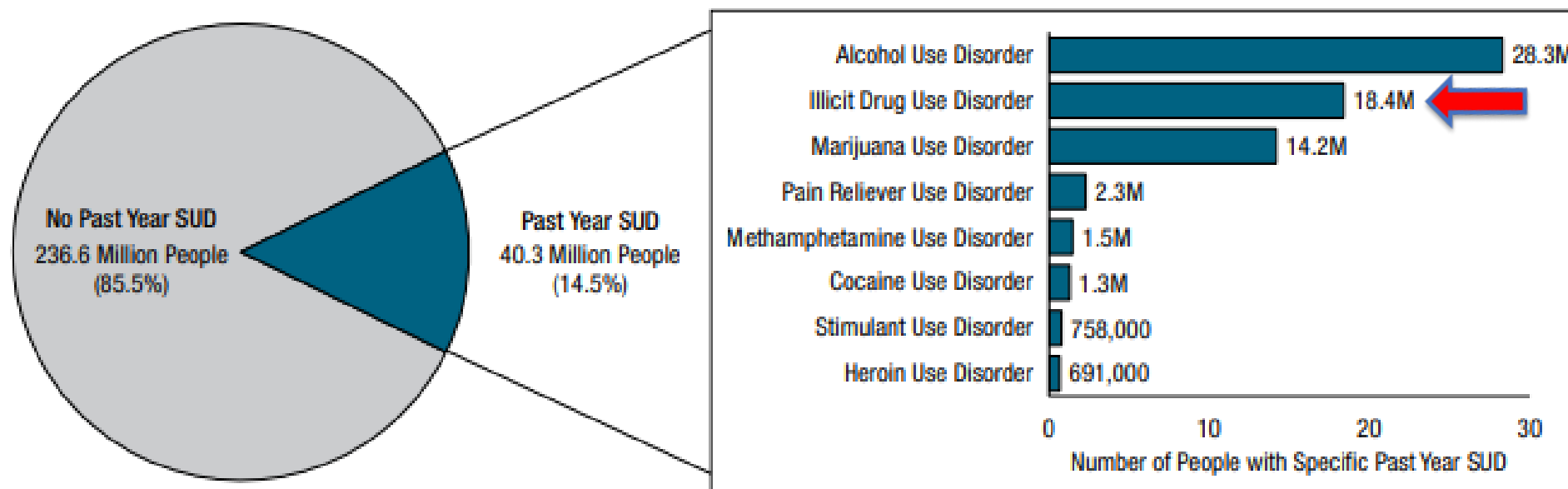
Evidence Supporting Naloxone Priority

- **Community Distribution of Naloxone: A systematic review of economic evaluations**
Cherrier et al. PharmacoEconomics, 2021 (<https://doi.org/10.1007/s41669-021-00309-z>)
- Comprehensive review of economic evaluation literature
- Studies meeting quality levels as specified by the *British Medical Journal*
- 1 cost-effectiveness analysis; 8 cost-utility analyses; 1 cost-benefit analysis
- **All studies indicated the community distribution of naloxone was cost-effective**
(\$111 to \$58,738 per quality-adjusted life year saved)
- The sole cost-benefit study found an incremental cost-benefit ratio of \$1:\$2,769
(Naumann et al. Drug Alcohol Depend 2019;204:107536)



Evidence Supporting Treatment Priority

Persons Aged 12 or Older with a Past Year Substance Use Disorder, 2020



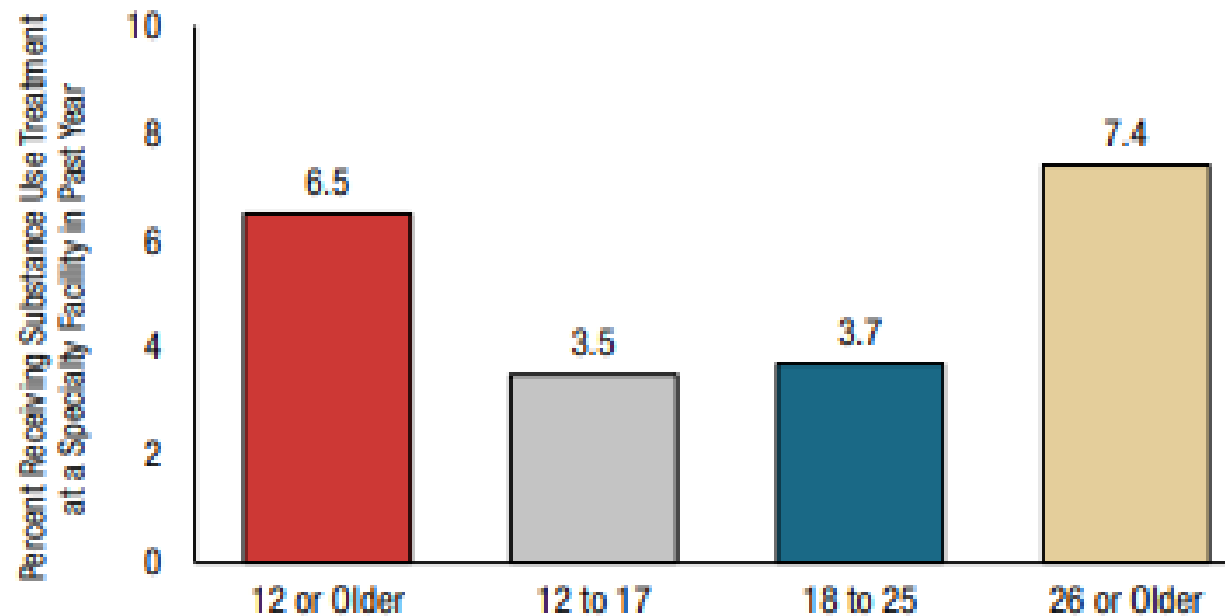
Note: The estimated numbers of people with substance use disorders are not mutually exclusive because people could have use disorders for more than one substance.

Source: Substance Abuse and Mental Health Services Administration (2021). *Key substance use and mental health indicators in the United States: Results from the 2020 National Survey on Drug Use and Health* Rockville, MD: Center for Behavioral Health Statistics and Quality.



Evidence Supporting Treatment Priority

Among Persons Aged 12 or Older Who Needed Substance Use Treatment in the Past Year, 2020
Percent Who Received Substance Use Treatment at a Specialty Facility



Source: Substance Abuse and Mental Health Services Administration (2021). *Key substance use and mental health indicators in the United States: Results from the 2020 National Survey on Drug Use and Health* Rockville, MD: Center for Behavioral Health Statistics and Quality.



Evidence Supporting Data Priority

- Carefully tracked *fatal* overdose deaths are reported and predicted regularly (and with little lag time) by CDC
- By contrast, no completely comprehensive national system of tracking *nonfatal* overdose occurrences exists
 - Some national approximations exist, but none entirely comprehensive
 - Some states do collect such information, but not uniformly
 - For every fatal overdose that occurs there are multiple nonfatal overdose occurrences, with some states reporting ratios of 14 to 1 and even higher.



DATA CHALLENGE: Capturing Nonfatal Overdose Events

- 2017: 70,237 drug overdose deaths in the United States
- 2017: 967,615 nonfatal drug overdose visits to emergency departments*
- Do the math: There were at least 13.8 nonfatal overdoses to one fatal overdose
 - *Likely an undercount*
- State Examples:
 - Maine, 2021: 7% of all overdoses were fatal
 - Other recent state data reflecting different points between 2019 and 2021, ratio of nonfatal overdoses to overdose deaths:

• Florida – 6:1	Michigan – 10:1
• Tennessee – 8:1	Minnesota – 14:1



A New Era of Drug Policy

- **Historic Firsts:**

- First time the Federal Government is **embracing high-impact harm reduction** as a tool to reduce overdoses
- First time proposing **commercial disruption** of drug trafficking
- Delivered extensive **data and criminal justice chapters**, and a new emphasis on treatment for incarcerated populations
- The Prevention chapter emphasizes **ACEs and SDOH** as key issues
- The Recovery chapter is focused on **providing workforce opportunities** to people in recovery
- The Treatment chapter calls for **making access to treatment universal**



Key Initiative: Model State Acts

- **Ensure Opioid Litigation Settlements Funds Address Addiction and Overdose**
- **Expand Access to Naloxone**
- **Ensure Access to Safe, Effective, and Cost-saving Syringe Services Programs**
- **Use Deflection Programs for Law Enforcement and Other First Responders**

Challenges Facing the Medical and Public Health Community

- **Two key problems:**
 - Lack of addiction treatment infrastructure
 - Lack of enforcement of parity laws
- Additional challenges:
 - Workforce Strain
 - COVID-19 pandemic
 - **Shortages →**

Exhibit 1. Projected Supply and Demand for Behavioral Health Occupations in the U.S., 2017-2030

	Adult Psychiatrists	Child & Adolescent Psychiatrists	Nurse Practitioners	Physician Assistants	Psychologists	Social Workers	Marriage & Family Therapists	Addiction Counselors	Mental Health Counselors	School Counselors
Supply ^a										
Estimated supply, 2017	33,650	8,090	10,450	1,550	91,440	239,410	53,080	91,340	140,760	116,080
New entrants, 2017-2030	10,270	5,000	9,520	1,770	49,400	367,520	39,190	33,300	72,860	158,440
Attrition ^b , 2017-2030	(14,850)	(2,810)	(2,770)	(350)	(29,670)	(82,760)	(18,080)	(28,030)	(45,150)	(52,640)
Change in work patterns ^c	(2,050)	(450)	(300)	(80)	(7,730)	(10,800)	(1,540)	(2,730)	(4,150)	(3,750)
Projected supply, 2030	27,020	9,830	16,900	2,890	103,440	513,370	72,650	93,880	164,320	218,130
Total Growth, 2017-2030	(6,630)	1,740	6,450	1,340	12,000	273,960	19,570	2,540	23,560	102,050
% growth, 2017-2030	-20%	22%	62%	86%	13%	114%	37%	3%	17%	88%
Demand										
Estimated demand, 2017	38,410	9,240	10,450	1,550	91,440	239,410	53,080	91,340	140,760	116,080
Projected demand, 2030 ^d	39,550	9,190	12,050	1,670	95,600	268,750	57,970	105,410	158,850	119,140
Total growth, 2017-2030	1,140	(50)	1,600	120	4,160	29,340	4,890	14,070	18,090	3,060
% growth, 2017-2030	3%	-1%	15%	8%	5%	12%	9%	15%	13%	3%
Adequacy of Supply, 2030										
Total Projected Supply (minus) Demand	(12,530)	640	4,850	1,220	7,840	244,620	14,680	(11,530)	5,470	98,990

Notes: All numbers reflect full time equivalent (FTEs); Numbers presented are rounded to the nearest ten and may not sum due to rounding; Negative numbers are in parenthesis;

^a For all professions except psychiatrists, the model assumes that demand and supply are equal in 2017.

^b Includes retirements and mortality.

^c For example, changes from full-time to part-time hours, or vice versa.

^d Demand growth reflects changing demographics.

Support for the Medical Community

- Federal Actions and Supports:
 - Loan Repayment for practicing in underserved areas
 - Health Resources & Services Administration (HRSA) training and resources
 - Block grant funding to States
 - President Biden signed the Lorna Breen Act



Dr. Lorna Breen Health Care Provider Protection Act



- Investing in training health care providers on suicide prevention and behavioral health
- Breaking stigma



The Corrosive Effects of Stigma

- Stigmatizing attitudes towards drug use and people who use drugs exist throughout our society, including in health care.*
- According to the 2020 National Survey on Drug Use and Health (NSDUH), nearly all of the almost 20 million people living in the United States who need treatment are not currently receiving addiction treatment services.
- People with addiction face prejudice, stigma, and discrimination.
 - Especially true for Black individuals seeking treatment
- President Biden’s new budget – changing agency names from “Abuse” to “Use”



Actions You Can Take

- **Improve** equity in the care patients receive
- **Advocate** for state laws that will keep people alive
- **Promote** evidence-based harm reduction strategies
- **Break** the stigma



**We are in the business
of saving lives.**



Thank You

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