Introduction

Our nation is in the midst of an opioid epidemic that has been described as one of the worst public health crises in U.S. history. Drug overdoses, the majority of which are opioid-related, are now the leading cause of accidental death in the U.S. In Massachusetts, the rate of drug-induced deaths exceeds the national average by 38% while the number of infants born with narcotics in their system is more than three times the national average.

Although important steps have been taken to combat the epidemic, there is an increasing awareness that our interventions cannot be successful without the input of those who are living at the center of the experience. The purpose of the Listening to Unheard Voices (LUV) Project is to better understand the experiences and opinions of individuals in North Central Massachusetts who have been directly impacted by addiction. The LUV Project seeks to hear from people struggling with addiction, people with loved ones who are or have struggled with addiction, and first responders and service providers. Information from these individuals will be used to develop a report that will help stakeholders better understand the needs of their communities as it relates to drug and alcohol addiction. The primary partners of the LUV Project include the Joint Coalition on Health, UMass Medical School, and Community Health Connections.

Goals

- Interview individuals directly impacted by addiction
- Document interview notes
- Synthesize and present preliminary results

Conducting Interviews

Interviews consisted of 8 questions targeted at the causes, experience, treatment, and recommendations for future changes surrounding addiction. 57 individuals were interviewed from central Massachusetts towns such as Fitchburg, Lunenburg, Gardner, Shirley, Leominster, and Ashburnham. Individuals were people who currently or previously suffered from addiction, family members of those who had addictions, and healthcare professionals who worked with people with addictions.

Why do people become addicted to drugs and/or alcohol?

- Substance use to cope with feelings
- Addictions starting in childhood
- Trauma (physical, emotional, sexual abuse), Genetics (addictive personality/predisposition), Social and environmental factors, Mental health

Why do people relapse?

- Stress (political, debt, children, intense relationships, food/finance)
- Physical pain
- Lack of stable routine

Why do people overdose?

- Unknown dose strength and purity of drug
- “I wasn’t in control” mentality
- Younger generations are more naive
- Greater access to drugs due to over prescription
- Trying to escape pain
- Taking too much drug to try and break through the substance block

Why have so many people overdosed and died?

- Heroin is cheaper
- More meetings connect people to dealers
- No sure injection facility

What programs are helpful?

- NA (narcotics anonymous), AA (alcoholics anonymous)
- Counseling
- Meds
- Methadone

What programs are unhelpful?

- Substitution medications such as Suboxone and methadone
- Jail
- Any program that is short in duration

What are things that would help more people recover from addiction?

- Long term care
- Education for children, adults, healthcare professionals
- Housing
- NB and AA programs
- Less judgement and more empathy and understanding
- Healthy lifestyle and access to activities
- A feeling of purpose and motivation through jobs, education, etc
- Transportation services

Interview Survey Statistics:

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Total (%)</th>
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</thead>
<tbody>
<tr>
<td>18-29</td>
<td>59 (21.3)</td>
</tr>
<tr>
<td>30-39</td>
<td>52 (19.3)</td>
</tr>
<tr>
<td>40-49</td>
<td>54 (20.2)</td>
</tr>
<tr>
<td>50-59</td>
<td>51 (19.3)</td>
</tr>
<tr>
<td>60+</td>
<td>21 (8.0)</td>
</tr>
<tr>
<td>Asian</td>
<td>1 (3.7)</td>
</tr>
<tr>
<td>Black/African American</td>
<td>1 (3.7)</td>
</tr>
<tr>
<td>60+</td>
<td>12 (44.4)</td>
</tr>
<tr>
<td>I have a friend who is currently addicted to drugs and/or alcohol</td>
<td>7 (25.9)</td>
</tr>
<tr>
<td>I have lost a loved one to addiction</td>
<td>6 (22.2)</td>
</tr>
<tr>
<td>I have been trained to use Narcan</td>
<td>7 (25.9)</td>
</tr>
<tr>
<td>I know what Narcan is but I have never been trained to use it</td>
<td>8 (29.6)</td>
</tr>
<tr>
<td>I have been trained to use Narcan and carry it</td>
<td>9 (33.3)</td>
</tr>
<tr>
<td>I have a friend who is currently addicted to drugs and/or alcohol in the past</td>
<td>12 (44.4)</td>
</tr>
<tr>
<td>I have never been trained to use Narcan or carry it</td>
<td>8 (29.6)</td>
</tr>
</tbody>
</table>

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Why people use substances to cope

- To escape pain
- To connect with others
- To achieve a state of “high”
- To feel better emotionally

Fitchburg Demographics:

- Population: 40,000 individuals
- Poverty: 20% of the population living in poverty
- Overdose related deaths: 32.2 per 100,000 residents (2015)

Improving the Survey Tool:

- Inclusion of a prevention question
- Comprehensive demographic questions
- Combining questions 4 & 5

References


Acknowledgements:

We would like to thank all people who generously and bravely shared their stories of addiction with us. The Fletcher Public Library, First Parish Church, Fitchburg Free Clinic, and others provided us with space to conduct interviews. Thank you to Susan Rocheleau, M. (2016, May 03). Opioid overdose deaths by race/ethnicity in 2015: Boston Globe.

Where is the LUV?

Listening to Unheard Voices of the Opioid Epidemic

Andrea Chang, Meaghan Foster, Hillary Mullan, Tim Olivier, Eric Romo, Ellen Wallace