



STATE OF WASHINGTON

September 21, 2023

State leaders, healthcare providers, and all other Washingtonians

SUBJECT: National Opioid Awareness Day

To our fellow Washingtonians:

Today, on National Opioid Awareness Day, we remember those who have lost their lives to overdose, honor those who have tirelessly worked to prevent and treat overdose and resolve to do all we can to save lives from a public health crisis that kills five to six Washingtonians every day.

Overdose deaths involving opioids and/or stimulants are at unprecedented levels across our state. Opioids and overdose impact all Washingtonians. Communities of color and tribal communities have been especially devastated by this crisis that has touched people of all races, ethnicities, and socioeconomic groups in both rural and urban areas throughout Washington.

The causes of the opioid and overdose crisis are many. The first wave of deaths started in the mid-1990's from prescription opioid medications. The second wave was driven by heroin, ensnaring many who had become addicted to prescription opioids. We are in the third wave of deaths that is largely fueled by fentanyl, a synthetic opioid that comes in many forms. A single counterfeit pill bought on the street can contain enough fentanyl to kill. More and more deaths are also occurring when opioids are mixed with methamphetamine, cocaine, stimulants, and other drugs.

The increased supply of illegal drugs has exploited the underlying structural and systemic roots of the opioid and overdose crisis. These include poverty, lower education rates, and housing insecurity. Lack of access to health care and mental/behavioral health services lead many to self-treat their physical and emotional pain with drugs. Trauma from adverse childhood experiences and intergenerational and historical trauma driven by racism have also been powerful underlying forces that increase rates of substance use disorder, as they do for many other chronic conditions such as heart disease, cancer, and diabetes.

Preventing substance use disorder means we must invest more in addressing these social drivers that influence the health of individuals throughout the life course from the prenatal period extending through early childhood and into adolescence and adulthood.

To respond to the increasing rates of death due to fentanyl in recent years, we must focus on saving lives from opioid overdose by urgently expanding our efforts in the following three areas.

Although we believe there is a need for a quick and rapid response to the opioid crisis, we also agree that we need a long-term plan to ensure success.

Our three priorities for the immediate term are:

1. **Treatment medications:** Medications such as buprenorphine and methadone are our most powerful tools to save lives from opioid use disorder. Most people who use opioids want to reduce their use and start treatment medications. Yet there are major gaps in access to treatment medications. Some of these gaps are due to the lack of capacity or willingness to serve people who actively use drugs in the existing care systems. We need to lower the barriers to treatment, expand the number of health care providers offering treatment medications, and support people in their recovery during treatment. Healthcare providers have an ethical imperative to treat people with opioid use disorder with the same dignity, respect, and quality of care as patients with other medical conditions. That means not only starting or referring to specialty care and counseling for people who use drugs, but also continuing to care for people who keep using drugs, because studies show that continuous treatment leads to better health and faster recovery.
2. **Naloxone:** Naloxone can reverse the symptoms of opioid overdose when given as either a nasal spray or injection. For naloxone to save a life, a person suffering from an opioid overdose must have someone with them who can give naloxone. We need to make sure that everyone who uses substances and the people around them have naloxone, which can be obtained from pharmacies without a prescription through a statewide standing order. We should expand community organizations and harm reduction services throughout the state that engage people at high risk for overdose, give them naloxone, and provide an array of life-saving services.
3. **Awareness:** We need to raise awareness of the risks of opioid use disorder and overdose, give people accurate information, and reduce stigma. Many people, including teens and parents, are not aware of the potentially lethal effects of a counterfeit pill or a white powder containing fentanyl. There is low public awareness that medications for opioid use disorder are by far the most effective treatments, and that naloxone can save lives from opioid overdose. And even though around 50% of Americans know someone with substance use disorder, shame and stigma force individuals and families affected by substance use into the shadows, making it harder for them to get the help they need.

We all must get involved with this work. You don't have to be a health care provider to use one of the most powerful tools we have: social connection. Reach out to people. Ask them, "Are you okay?" And if the answer is, "no," listen with love and understanding, and connect them with help.

On National Opioid Awareness Day, we give our deep gratitude to our fellow Washingtonians in social services, health care, education, and first responders who have been on the front lines of the opioid and overdose crisis. You have saved countless lives while working in extremely difficult circumstances, often thanklessly and without the resources you need. We appreciate all you are doing and have done. For those of you not yet prescribing, we ask that you please do so. You can save a life tomorrow.

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And to all people who are caught in the grip of opioids and other drugs, you are our friends and loved ones who deserve our compassion and our commitment to get you the prevention and treatment services you need to live a healthy life.

Sincerely,



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