

Broadening Perspectives to Narrow the Treatment Gap

Elizabeth Salisbury-Afshar, MD, MPH

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Disclosure Information

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No financial disclosures

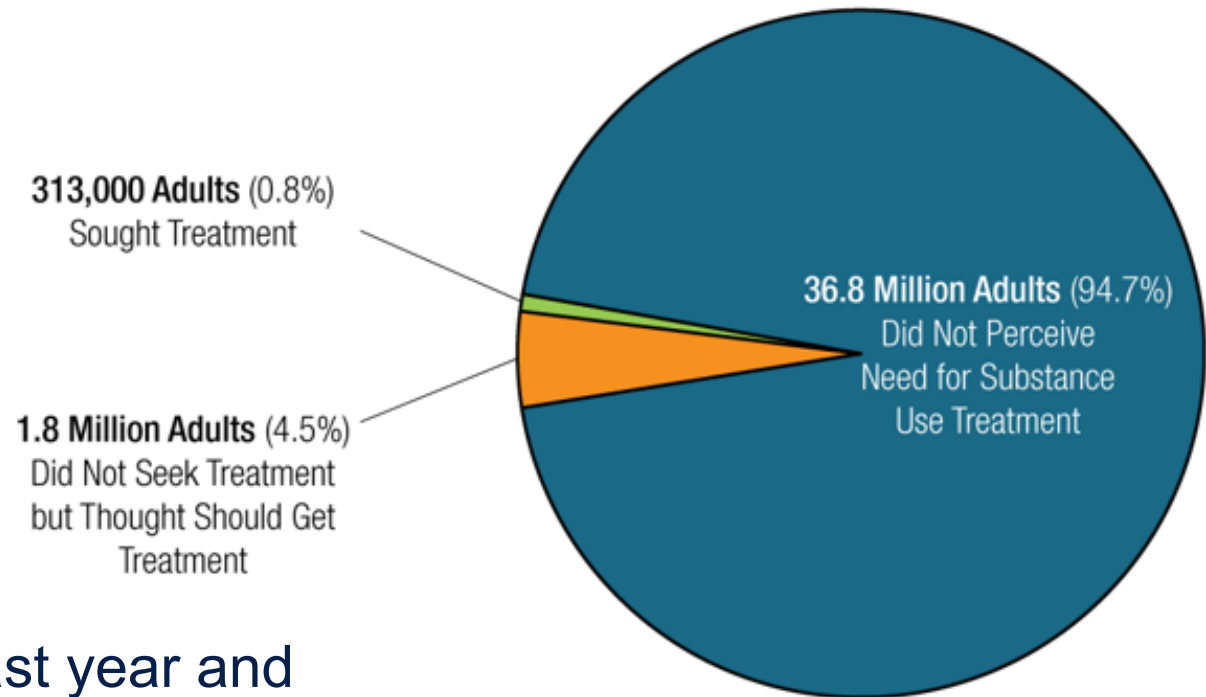


The Treatment Gap

- In 2022, **48.7 million Americans** 12 or older had a substance use disorder in the past year.

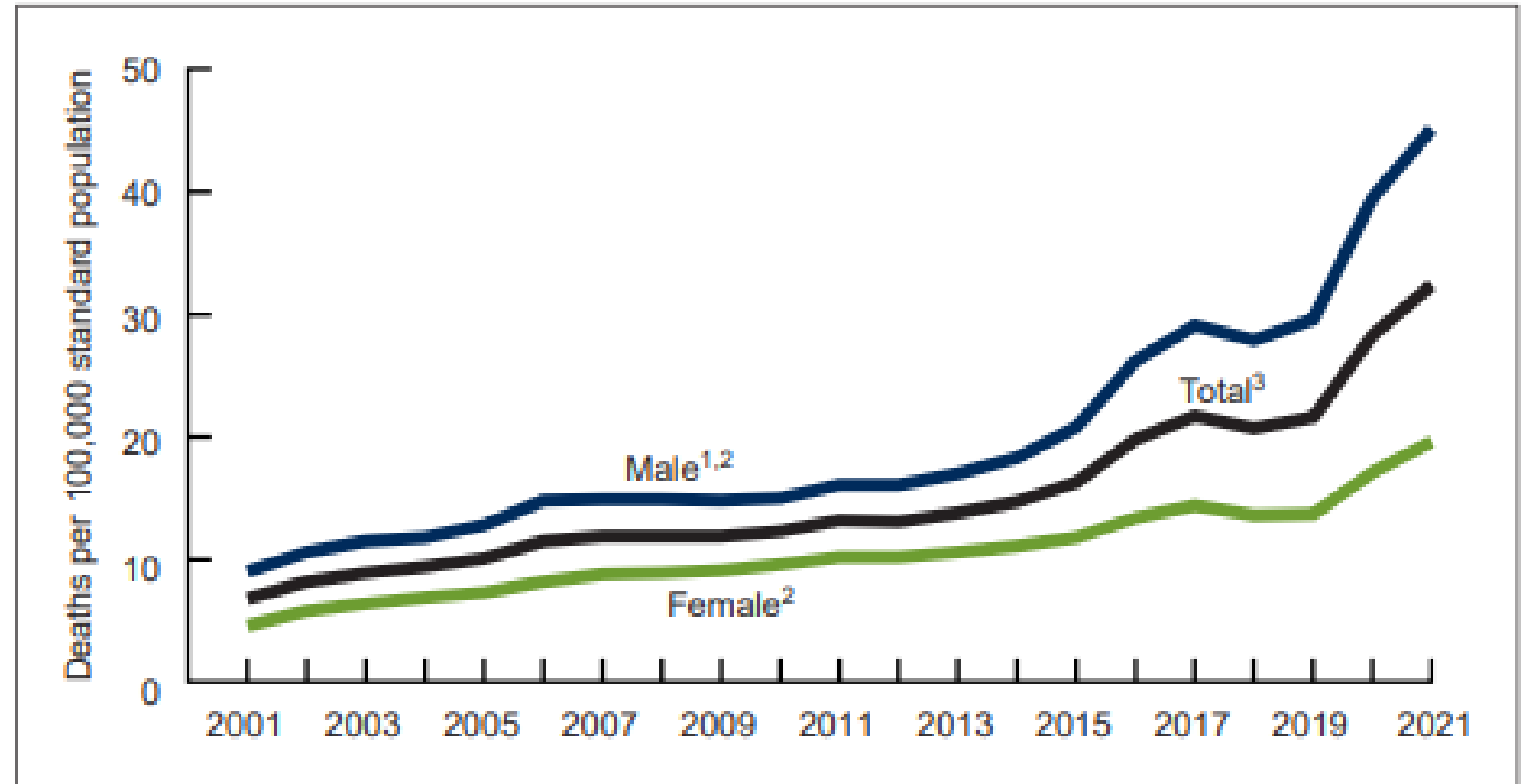
• **7 in 4** received substance use treatment (residential, outpatient, telehealth, carceral setting) in the past year.

- Of the adults who had an SUD in the past year and did not receive SUD treatment **94.7% did not seek treatment or think they should get it.**



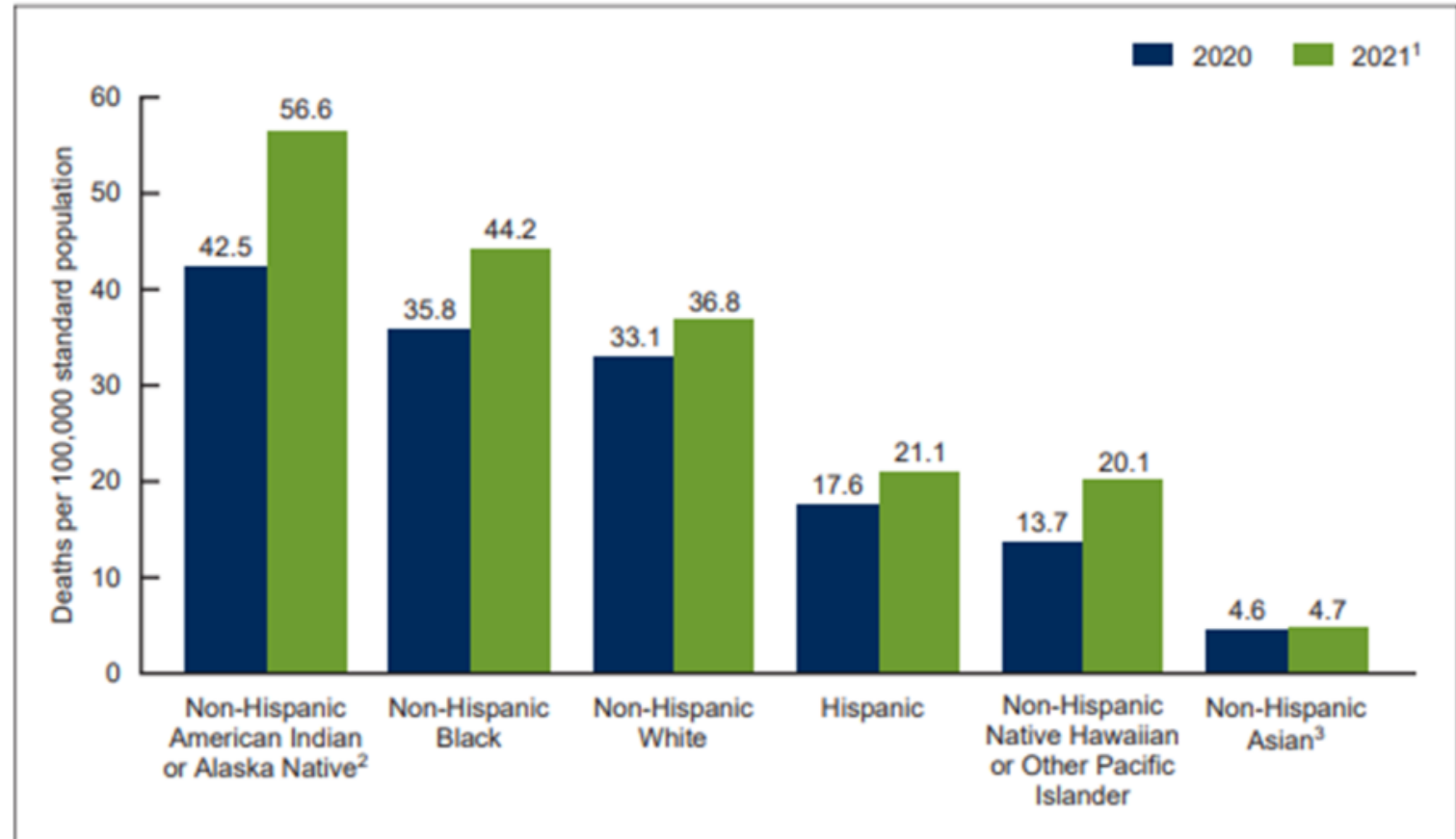
Overdose Death Rates Continue to Rise

Figure 1. Age-adjusted rate of drug overdose deaths, by sex: United States, 2001–2021



Significant Racial/Ethnic Disparities Persist

Figure 3. Age-adjusted rate of drug overdose deaths, by race and Hispanic origin: United States, 2020 and 2021



Paradigm Shift in SUD Care

Acute Care Model

- ☀ Enter treatment
- ☀ Complete Assessment
- ☀ Receive treatment
- ☀ Discharge

Goal of Treatment

- ☀ Help patients stop using all substances



Chronic Care Model

- ☀ Prevention
- ☀ Early Identification
- ☀ Referral to treatment/support services
- ☀ Recovery supports

Goal of Treatment

- ☀ Reduce morbidity and mortality
- ☀ Maximize function
- ☀ Improve wellness

A False Dichotomy

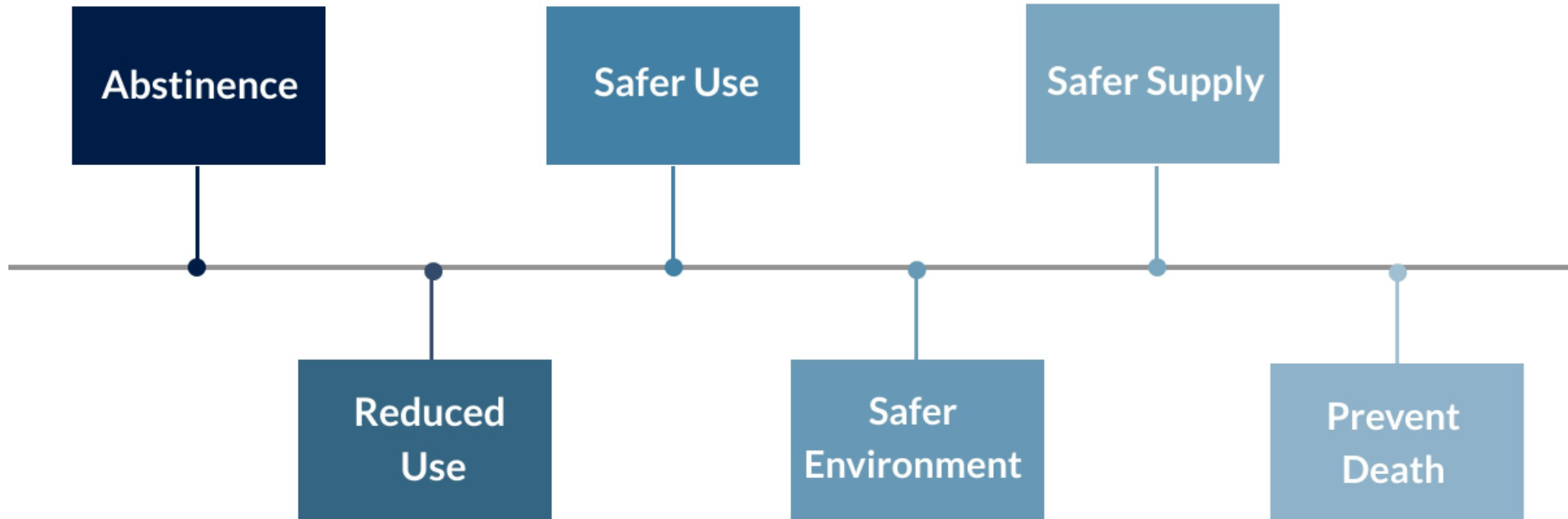


Abstinence



*Harm
Reduction*

Harm Reduction as a Continuum



SAMHSA's Definition of Harm Reduction

SAMHSA defines harm reduction as a practical and transformative approach that incorporates community-driven public health strategies –including prevention, risk reduction, and health promotion – to empower people who use drugs (PWUD) and their families with the choice to live healthier, self-directed, and purpose-filled lives. Harm reduction centers the lived and living experience of PWUD, especially those in underserved communities, in these strategies and the practices that flow from them.



SAMHSA Principles of Harm Reduction

SAMHSA Principles of Harm Reduction	Existing Best Practices
Assist, not direct	Patient Centered Care
Provide support without judgement	
Provide many pathways to well-being across the continuum of health and social care	
Connect with community	
Value practice-based evidence and on-the-ground experience	Trauma-informed care
Practice acceptance and hospitality	
Cultivate relationships	
Promote safety	
Engage first	Motivational Interviewing
Prioritize listening	
Respect autonomy	
Work toward systems change	Advocacy



Harm Reduction in Clinical Practice

- Acknowledges the harms and trauma existing systems have caused.
- Intentionally includes people with lived and living experience in creation of service delivery models.
- Focuses on engagement and is inclusive of people who want to make positive change (even if goal is not abstinence.)
- Ensures accessible and noncoercive support.
- Promotes equity, rights and social justice.
- Works to ensure people have access to all available resources.