



Opioid Crisis: Indiana's Hidden Victims

Youth are the hidden victims of the opioid epidemic. Nationally, the issue has grown so severe that in 2017, the Commission on Combatting Drug Abuse and the Opioid Crisis submitted a letter to the president requesting that the opioid crisis be declared a national emergency.¹ In Indiana, there were 1,271 deaths from drug overdoses in 2016, a 33% increase from 2011.² Drug overdoses have risen so sharply in Indiana that they now kill more Hoosiers than car crashes and gun homicides combined.

Hoosiers from all walks of life are facing the opioid epidemic in all corners of our state. Eighty-nine of Indiana's 92 counties have experienced drug overdose deaths from heroin or prescription opioids in the past 5 years,³ and Indiana has seen increases in heroin use among both men and women, in most age groups, and across all income levels.⁴

Opioid Overdose Non-Fatal Emergency Department Visits, Rate per 100,000 Residents: Top 10 Counties 2015

1	Morgan County	94.8
2	Jennings County	93.2
3	Delaware County	79.6
4	Marion County	78.0
5	Wabash County	77.8
6	Fayette County	76.8
7	Montgomery County	75.9
8	Jay County	75.8
9	Howard County	73.9
10	Clinton County	73.6

Source: Indiana State Department of Health



The opioid epidemic affects Hoosiers from all walks of life, in all corners of our state.

What is an Opioid?

Opioids are a class of drugs that includes heroin, synthetic opioids such as fentanyl, and prescription pain relievers such as oxycodone, hydrocodone, and morphine. These drugs act on opioid receptors in the brain to produce pain relief and a feeling of euphoria.⁵

Opioids prescribed by doctors can be effective in treating severe pain, but they also come with serious risks. Due to their addictive

nature, prescription opioids are frequently misused. Further, people who become addicted to opioid pain relievers are 40 times more likely to become addicted to heroin as well,⁶ and approximately 80 percent of people who use heroin first abused prescription opioids.⁷

Opioids are highly addictive because they affect brain regions involved in reward. Risks associated with opioid abuse include addiction, physical dependence and overdose. Injection drug use places people at risk of serious, long-term viral infections such as HIV and Hepatitis C.⁸ Opioid abuse can have a severe impact on quality of life, affecting individuals' ability to be productive employees, lead healthy lives and care for their families.⁹

What is the Impact on Kids?

In the midst of Indiana's opioid crisis, youth are the hidden victims.

Kids of all ages are impacted, both directly and indirectly. Parental and community opioid abuse often affects younger children, while older youth may also combat opioid addiction themselves.

Indiana's youngest children are affected by Indiana's opioid epidemic before they are even born. Babies born to women who use opioids during pregnancy are at increased risk for poor fetal growth, preterm birth, congenital heart defects, and problems with brain and spinal development.¹⁰

Infants may also experience opioid withdrawal at birth, known as neonatal abstinence syndrome (NAS). During pregnancy, opioids and other substances are passed along to the baby, who may become dependent on opioids along with the mother. Once the baby is born, withdrawal symptoms occur as the opioids are

slowly cleared from the baby's system.¹¹ Approximately 60 to 80 percent of infants exposed to opioids prenatally suffer from NAS, which can result in increased irritability, tremors, difficulty eating, vomiting, seizures and respiratory complications. The long-term effects are not fully understood, but early research suggests NAS can negatively impact children's growth, behavior, cognitive development, language abilities and academic achievement.¹²

Hoosier children whose parents abuse opioids are more likely to experience abuse or neglect than other children. Research shows a clear connection between parents' substance abuse and child maltreatment,¹³ and the impact of substance abuse is growing. In cases where a child was removed from their home, parental substance abuse was a primary factor in more than half (52.2%) of removals in 2016, up from less than a third (31.7%) of removals in 2013. Indiana has also seen an influx of children in foster care, with the number of children in care up 50.2 percent from 2012 to 2015,¹⁴ an increase often attributed to drug addiction epidemics.¹⁵

Approximately 60 to 80 percent of infants exposed to opioids prenatally experience neonatal abstinence syndrome.

Parents' opioid abuse may affect their ability to function effectively in a parental role. Substance abuse can impair parents' awareness of and sensitivity to their child's emotions, interfering with healthy parent-child attachment.¹⁶ Substance abuse also interferes with mental

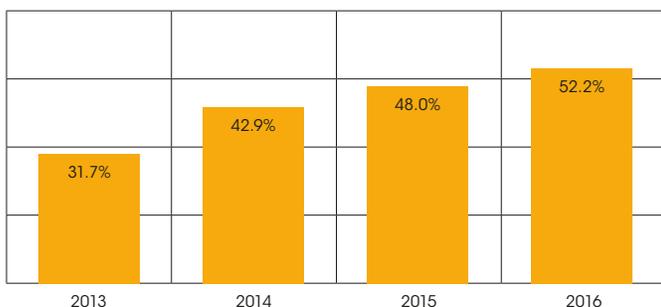
functioning, judgment, self-control, and regulating anger and impulsivity, all factors which increase risk for engaging in abusive behavior.¹⁷ The time a parent invests in obtaining and using opioids can also take away from time with their child or interfere with adequate supervision of a child, contributing to potential neglect.¹⁸

In addition to interfering with a parent's ability to function effectively, opioid abuse can also affect the family in ways that increase a child's risk of maltreatment. In households with parental addiction, resources may go towards opioids instead of food or other household needs.¹⁹ In two-parent households where one parent does not use, children still may not receive adequate attention if the other parent must invest their time and energy in the parent with an addiction. Opioid abuse can also strain relationships with others outside the immediate family, sometimes leading to

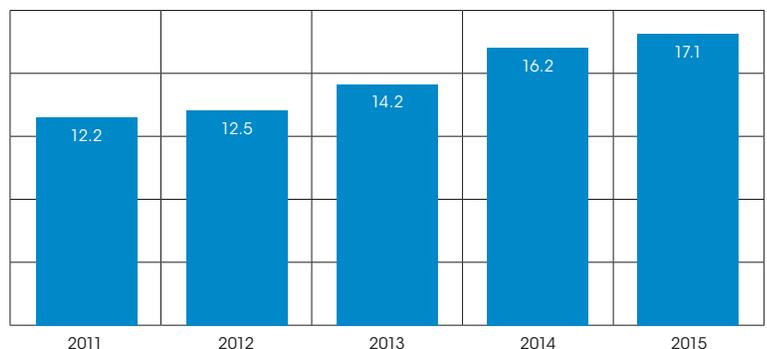
Effects for newborns exposed to opioids in utero

- Poor fetal growth
- Preterm birth
- Opioid withdrawal at birth (neonatal abstinence syndrome)
- Congenital heart defects
- Problems with brain and spinal development

Percentage of Children Removed from Home Because of Parent Drug and/or Alcohol Abuse, Indiana



Child Abuse and Neglect Rate Per 1,000 Children, Indiana



Source: Indiana Department of Child Services

estrangement from extended family and other social supports. Estrangement and the resulting social isolation further increases risk of maltreatment.²⁰ Further, substance abuse not only increases a child's risk of being abused by a parent, but also increases a child's risk of being abused by another adult outside the family.²¹

While Indiana's young children are impacted by their parents' and communities' opioid abuse, Indiana teens may also struggle with opioid addiction themselves. In 2015, 2.4 percent of Indiana high school students had ever used heroin, and 16.8 percent had abused prescription drugs, including prescription opioids.²² On average, Indiana high school seniors who use heroin first started at age 14.²³

Opioid abuse contributes to child maltreatment
• Interferes with mental functioning, judgment, self-control, and regulating anger
• Takes time away from child
• Can lead to family estrangement
• Leaves child vulnerable to abuse by other adults
• Household resources may be spent on opioids rather than the child's needs

How Can the Opioid Issue be Addressed?

Indiana's best and brightest, including individuals, communities, organizations, universities and leaders, are combatting the opioid epidemic. The opioid epidemic is a community problem, and until we reach a solution, Indiana must continue to press on with all hands on deck.

What can individuals do?

Prevent risks. Youth workers and parents are in a unique position to address the opioid epidemic's impact on youth. Caring adults can help prevent high-risk exposure to opioids that could lead to addiction.²⁴ This may mean monitoring a teen's use of opioid pain relievers when prescribed by doctors, and ensuring teens do not have ready access to non-prescribed opioids in medicine cabinets at home.

Know the warning signs. Parents and youth workers can also be aware of signs that a teen may be struggling with opioid abuse. These include declining academic performance, losing interest in favorite activities, changes in eating or sleeping habits, deteriorating relationships, a sudden change in behavior for no clear reason, and a change in peer group.²⁵ Research shows that the best predictor of substance abuse among youth is substance abuse among their peers, thus, caring adults should be especially aware of teens' friend groups.²⁶ Those who become aware of a teen abusing opioids can make appropriate referrals to treatment centers and counseling.

Serve as a foster parent. Passionate adults can serve as foster parents for youth victimized by parental opioid abuse. Foster parents often play an important role in helping kids who have been abused or neglected, especially when parental addiction is involved. Children with substance-abusing parents are more likely to be placed in out-of-home care and tend to stay there longer than children without parental substance abuse.²⁷ Advocates for children can help address the opioid crisis by fostering children themselves or supporting other foster parents.

Volunteer. A variety of volunteer opportunities are available to adults wishing to serve children of addicted parents. Some

hospitals seek volunteers to cuddle and comfort babies who experience withdrawal. Interested adults may contact their local hospital to inquire about volunteer opportunities. In addition, community members may connect with a local systems of care coordinator to assist in local efforts. Adults may also volunteer as a Court Appointed Special Advocate (CASA). CASA volunteers advocate for the best interests of children who have experienced abuse as they navigate the courts and other settings, helping to ensure children are placed with a safe and loving family.²⁸

What can organizations and communities do?

Implement substance abuse prevention programs. Organizations can implement substance abuse prevention for youth in their schools and programming. Because most substance use occurs in young or emerging adulthood, early prevention initiatives can influence future outcomes.²⁹

Train youth workers and staff. Those who work directly with youth can be trained in how to identify and refer youth who may be struggling with opioid addiction or who are impacted by adult addiction.

Expand treatment options. Communities can expand access to substance abuse treatment services, including medication-assisted programs for youth.³⁰ Medication-assisted treatment (MAT) combines counseling with medication such as methadone, buprenorphine or naltrexone. MAT has been shown to be effective in treating opioid use disorders, however, only 1 in 4 youth under 26 receive this treatment.³¹ Research also shows that mental health and substance use disorders often occur together, so integrating treatment and addressing both disorders at the same time can improve outcomes.³²

Include the entire family in treatment. Family treatment drug courts (FTDCs) are specialized courts that handle cases of child maltreatment involving parental addiction. As an alternative to traditional courts, FTDCs offer substance abuse treatment, frequent drug testing, comprehensive wrap-around services and intensive monitoring.³³ These programs use a family-centered approach to address child safety and parental substance abuse recovery simultaneously. Caring adults in many different roles can refer families to FTDCs, including caregivers, social workers, attorneys, guardians ad litem, and family court judges.³⁴

Develop a community asset map. Asset mapping documents the strengths and resources available in a community and helps to inventory these resources in one place. Communities can develop maps of opioid resources in their area to use for referrals.

What can policymakers/leaders do?

Include the entire family in policies. Leaders can increase funding for supportive services for the entire family, such as job training, child care, and case management.

Ensure additional research is conducted. Additional research is needed to understand evidence-based programs to treat opioid addiction and address the impact on kids.

Make available vital data. More data is needed at the local level to understand Indiana's opioid epidemic and its impact on kids. Leaders can encourage consistent and accurate data collection across agencies and organizations.

Resources

Indiana Next Level Recovery is an online entry point for all state resources on the opioid crisis. It offers information for healthcare professionals, emergency personnel, law enforcement, community leaders, and families impacted by substance abuse. <http://www.in.gov/recovery>

Indiana Problem-Solving Court Directory provides information on all of Indiana's problem-solving courts, including local family drug treatment courts. www.in.gov/judiciary/pscourts/files/pscourts-psc-directory.pdf

Alateen and Narateen are support programs for children affected by an adult's addiction. Group members come together in a confidential setting to share experiences, offer encouragement, and learn effective ways to cope with problems. www.al-anon.org/for-alateen

Al-Anon and Nar-Anon are support programs for adults who are affected by someone else's addiction. These groups can be beneficial for partners of an addicted parent. www.al-anon.org/

Court Appointment Special Advocates provides volunteer opportunities for adults to speak up for children's best interests as they navigate the court system. www.casaforchildren.org

Opioid Treatment Centers offer help for those combatting addiction. The Indiana Family and Social Services maintains a list of available opioid treatment centers in Indiana. https://www.in.gov/fssa/dmha/files/OTP_Treatment_Centers_-_1-2012.pdf

Systems of Care is a strategy for local communities to build comprehensive systems of behavioral and mental health care for youth and families. A list of local system of care coordinators is available for many of Indiana's counties. <https://www.doe.in.gov/sites/default/files/student-services/local-soc-subcommittee-members31417-jw.pdf>

IYI Resources

The latest data is at your fingertips with IYI's Data Center. Search statistics and gather data to improve your program planning and grant writing or, request customized data. Go to www.iyi.org/data.

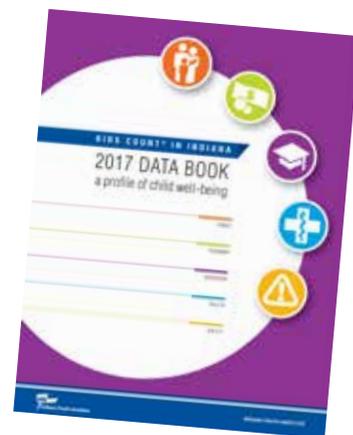
Get the most comprehensive overview of children's well-being in Indiana. **Download the Kids Count in Indiana Data Book** at www.iyi.org/databook.

Want in-depth information on youth? Check out the free resources at **IYI's Virginia Beall Ball Library**. We will mail you the library materials and include a postage paid return envelope. Go to www.iyi.org/library for details.

Text the word "grad" plus your or your student's high school graduation year to 69979 to receive free, grade-specific text reminders about test and application deadlines and other great tips for college and career readiness.

Looking for training on youth issues? IYI provides regional trainings and free webinars on youth development and nonprofit management. Go to <https://www.iyi.org/professional-development/trainings> for details.

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