Root Cause Analysis of Addiction: An Ongoing Study
Genesis: How This Study Began

Heroin: “Pure Evil” and the toll it takes on the individual, the family, and society as a whole...

The idea for a study, but what questions would we focus on?

- What leads to addiction?
- How do people become addicted?
- What assists people in coming out of addiction?
- What serves as an obstacle for those addicted?
- Could early intervention have helped them?
- What’s missing in recovery?
- When addicts decide to get clean, where do they go?
- What were the results?
One of the Ultimate Goals...

- How did they get clean?
- How did they do it?
- Was it family?
- Was it something else?
- What was it exactly?

This all fit in with the county goal of reducing overdose deaths by 25% by the year 2019.
A Growing Concern: From Bad to Worse...

- According to the Centers for Disease Control, since 1990, drug overdose deaths in the nation have tripled.
- Here in Pennsylvania, the overdose crisis has reached epidemic proportions, and in Westmoreland County drug overdoses have increased by 290% since 2002.
- Overdoses, both from prescription and illegal drugs, have been the leading cause of death among accidents and suicides in Westmoreland County seven of the last eight years.
- Record numbers of overdose deaths occurred during the past four years, with 86 overdose deaths in 2013.
The overall goal of the project is to provide valid data on pathways to addiction and intercept points in order to inform future actions of the Westmoreland County Drug Overdose Task Force that will positively affect the lives of those most likely to enter the path to addiction.
2 Outcomes to Consider:

(1.) To outline and prioritize the key pathways to addiction by our County residents. (Example: What starts the addiction cycle: substance abuse, mental health, physical health issues, traumatic events, other: and what are the progression points?)

(2.) Identification of intercept points within these pathways to addiction where timely and appropriate interventions can be established which provide alternative options and supports.
Who, Where, and What did they say?

- The Institutional Review Board for the Protection of Human Subjects at Saint Vincent College approved the study and every precaution is taken to ensure the confidentiality of all who participate.

- Narcotics Anonymous (NA) Meetings

- Court Mandated Treatment
Of those 48, the gender breakdown is 31 males and 17 females.

The average age for both is 29.5 for males and 29.9 for females.

Our range of ages is 18 on the lower end to-mid 50’s for the upper end for entire study.

78% of the people we spoke with identified themselves as heroin addicts.
Non-identifiable demographic information

*Age
*Race
*Gender
*Highest Grade Completed in School
*Employment Status
*Primary Source of Income
*Zip Code of Residence
*Military service
*Who currently resides with in the home
*Diagnosis or discussion of a psychiatric/mental health disorder
*Number of arrests and if it was related to drugs/alcohol
*Outcome of said arrests (jail, probation, fines, treatment, etc.)
Drug Talk 101:

*Age at onset
*How often they used (Frequency)
The last time they used the substance
*What were the circumstances around using it (party, meet a girl, relieve pain/stress)
*Who did they primarily use with (friends family, alone)
*Who taught them how to use
*If they stopped, what was the reason
*We also look at the chronological sequence of what drugs were experimental
Currenty, every single heroin user used marijuana before switching to heroin.
It is not a variable, it is a constant.
We have not found such a strong correlation with any other substance we ask about, including prescription medications or even alcohol.
Thus far, every heroin user used marijuana at some point prior to using heroin.
72% of heroin users were abusing prescription medications prior to transitioning to heroin.

These prescriptions may have been their own, a family members, or they could have been purchased on the street.

Of these 72%, almost HALF of the self-identified their reason for using heroin was because of their addiction to prescription medications and the fact that their supply or finances dwindled.
Treatment Experiences

*If it was within the past year
*How they came about it (self, court appointed, family encouragement/insistence, etc.)
*We ask them if they feel it is effective. Why so? What is missing?
*Their length of involvement and so on
A Breakdown of the Numbers...

- 75% of the respondents thought Outpatient Treatment was effective; 25% believed it was counterproductive.

- Treatment in jail (other than therapeutic communities) 67% believed the programs were effective; 33% did not find them helpful.

- NA/AA Meetings: 96% gave positive accolades and 4% gave negative ones.

- Clergy/Religious/Spiritual Assistance: 80%, 20%, which were the same percentages for Halfway Houses.
A Breakdown of the Numbers Continued...

- Only 4 people we interviewed were in a Long-term treatment facility (all of whom were outside the county) and all 4 regarded the treatment as effective.

- Inpatient Rehab saw 67% of the people view it as effective and 33% not.

- Methadone Maintenance: 38% spoke well of it and 62% spoke very poorly about it.
Methadone...

- It makes the addiction problem worse
- Quit getting high, but it is still a drug; Got withdrawal
- Worse than heroin
- Ball and chain
- Don’t believe in it
Suboxone Maintenance

- Just another way to use
- You can get addicted
- Was a joke
- Higher dose and got more addicted
Some Other Questions We Ask...

- What leads to addiction?
- At what point did you feel you were addicted to _____?
- Our 5 point scales... Before and After Treatment
## Factor Analysis

<table>
<thead>
<tr>
<th>Items</th>
<th>Scored 1-5 for each</th>
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<tbody>
<tr>
<td>The desire to recover from abuse</td>
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<td>Employment</td>
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<td>Family and social relationships</td>
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<td>Education and training</td>
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<tr>
<td>Achieve and enjoy improved, normal, productive life</td>
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<tr>
<td>Family related</td>
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<tr>
<td>Emotional health and well-being</td>
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<td>Home and living environment</td>
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<td>Physical health</td>
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<td>Spirituality and religion</td>
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<td>Financial stability</td>
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<td>Give back/help others</td>
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<td>Legal issues/the court system</td>
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<td>Other (please specify)</td>
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