



# The American Opioid Epidemic in Special Populations: Five Examples

The United States is in the midst of an unprecedented crisis of prescription and illicit opioid misuse, use

Drug overdose deaths grew 325% in nonmetropolitan areas, compared to 198% in metropolitan areas between 1999 and 2015, and patients in the most geographically isolated rural counties were 87% more likely than counterparts in large metropolitan counties to receive an opioid prescription between 2014 and 2017. Rural populations face numerous barriers to treatment, including a lack of appropriate providers and opioid treatment programs. Compared to their urban counterparts, rural residents often travel longer distances to receive health care and these transportation challenges can make adhering to treatment with MOUD difficult. In 2017, 56% of rural counties lacked a single physician with a DATA 2000 (“X”) waiver, which allows them to prescribe MOUD, presenting significant challenges to being prescribed MOUD at all.

**Research and action priorities for rural populations could include:**

1. Continuing financial and technical assistance support for rural communities planning to and currently implementing evidence-based interventions to address the opioid epidemic.
2. Establishing entry points to treatment in rural service delivery settings which are less likely to invoke self and community stigma among these populations, such as churches, libraries, and other community-based settings.
3. Providing incentives for waived physicians who work in rural communities to see as many patients in need of medication for opioid use disorder that their license allows.
4. Providing incentives for providers of non-pharmacologic, non-opioid pain management therapies to operate in rural communities, giving residents an alternative to opioid therapy for pain management.

## Adolescents and Young Adults

**SOURCE:** Blanco, C., M. M. Ali, A. Beswick, K. Drexler, C. Ho man, C. M. Jones, T. R. A. Wiley, and A. Coukell. 2020. The American Opioid Epidemic in Special Populations: Five Examples. *NAM Perspectives*. Discussion Paper, National Academy of Medicine, Washington, DC. <https://doi.org/10.31478/202010b>