

Advancing Addiction Education / Reducing Stigma

First Annual West Texas Health Disparities Research Symposium

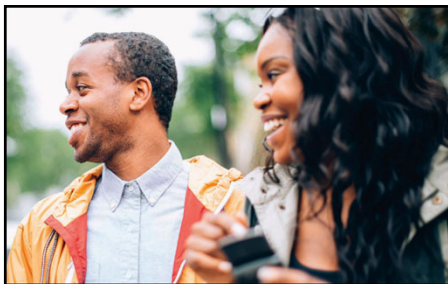
April 28, 2023

Joseph Skrajewski, MA, MFTI
Executive Director, Medical & Professional Education
National Director, Business Development –
Healthcare Solutions



Betty Ford Center

Part of the Hazelden Betty Ford Foundation



Advancing Addiction Education / Reducing Stigma

Disclosures

Joseph Skrajewski, MA, MFTI is employed by the Hazelden Betty Ford Foundation. He receives both private and public funding for a number of his initiatives and ventures. A list of his supporters is available at <https://www.hazeldenbettyford.org/annual-reports/medical-professional-education>.

He has no other disclosures to report.



Betty Ford Center

Part of the Hazelden Betty Ford Foundation

Today

- **Why addiction education is so important**
- **The skills and competencies required today**
- **Healthcare disparities that exist related to seeking care and advancing addiction education**
- **Educating medical students, physicians and the healthcare field as a whole**

ADDICTION

- **A primary, chronic disease of brain reward, motivation, memory and related circuitry.**
- **Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.**

ADDICTION

- **Addiction is characterized by inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of significant problems with one's behaviors and interpersonal relationships, and a dysfunctional emotional response. Like other chronic diseases, addiction involves cycles of relapse and remission. Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death.**

ALCOHOL USE DISORDER

- **Alcohol use disorder is a primary, chronic disease with genetic, psychosocial and environmental factors influencing its development and manifestations. The disease is often progressive and fatal. It is characterized by impaired control over drinking, preoccupation with the drug alcohol, use of alcohol despite adverse consequences, and distortions in thinking, most notably denial. Each of these symptoms may be continuous or periodic.**

THE TWO MISSING WORDS

- **Quantity**
- **Frequency**

WHO GETS THE DISEASE AND WHY?

- **A = P x E**
 - Addiction = Predisposition x Exposure
- **Predisposition**
 - Genetics
 - Comorbid Disorders
- **Exposure**
 - Environment
 - Stressors

WHAT IS THE EVIDENCE?

■ Choice:

- **Responsible**
 - -Fault
- **Behaviors**
 - -Punishment may work
- **Cause**
 - -Parental examples
 - -Feeling of deprivation
 - -Health/Behavioral issues
- **Free will**
 - -Can Stop

● Disease:

- **Not responsible**
 - ✗ -Faultless
- **Symptoms**
 - ✗ -Punishment doesn't work
- **Cause**
 - ✗ -Genetic predisposition 60%
 - ✗ -Environmental 40%
 - ✗ -Nature of the drug
- **No free will**
 - ✗ -Can't Stop

12 STEP GROUPS AND THE IRONY IN HOW THEY WORK

- **No Facilitator.**
- **No Therapeutic Approach.**
- **Group Attendance Varies.**
- **No Attendance Required.**
- **No Participation Requirements.**
- **No Drug Testing.**

Yet They Work And The Only Requirement Is:

- **“A Desire To Stop Drinking.”**

Addiction Focused Interview (6 Key Questions)

- **Tell me about the things alcohol helps you to accomplish...**
- **Tell me about the things alcohol prevents you from doing...**
- **Tell me why you really came here...**

Addiction Focused Interview (6 Key Questions)

- **Tell me about your first experience with alcohol...**
- **Tell me about your last experience with alcohol...**
- **Have you tried to stop on your own and how did that work out for you?**

Ask yourself...

- What is the one thing that might cause this patient to die today?



120 seconds

Disparities in Health and Health Care

■ 5 Key Questions and Answers

- 1. What are health and health care disparities?
 - Health and health care disparities refer to differences in health and health care between groups that stem from broader inequities.
- 2. What is the status of disparities?
 - People of color and other underserved groups faced longstanding disparities in health. There also are longstanding disparities in health care. The ACA health coverage expansions led to gains in coverage across groups. Despite these gains, people of color and low-income individuals remain at increased risk of being uninsured, contributing to greater barriers to accessing health care.

Disparities in Health and Health Care

- 3. How has the COVID-19 pandemic affected disparities?
 - Data consistently shows that American Indian and Alaska Native (AIAN), Black, and Hispanic people have experienced disproportionate rates of illness and death due to COVID-19
- 4. What are the broader implications of disparities?
 - Addressing disparities in health and health care is important not only from a social justice and equity standpoint, but also for improving the nation's overall health and economic prosperity.

Disparities in Health and Health Care

- 5. What are current federal efforts to address health disparities?
- -The administration has identified racial equity, including health equity, as a key priority, which has been reflected in several recent agency actions.
- -Federal COVID-19 response efforts included a focus on equity.
- -The administration and Congress have taken a range of actions to expand access to and enrollment in health coverage.
- -The administration has launched several initiatives focused on addressing inequities in maternal health.

* <https://www.kff.org/racial-equity-and-health-policy/issue-brief/disparities-in-health-and-health-care-5-key-questions-and-answers/>

Behavioral Health Equity

- As population demographics continue to shift, behavioral health care systems will need to expand their ability to fluidly meet the growing needs of a diverse population.
- By improving access to behavioral health care, promoting quality behavioral health programs and practice, and reducing persistent disparities in mental health and substance use services for underserved populations and communities, recipients can ensure that everyone has a fair and just opportunity to be as healthy as possible.

Behavioral Health Equity

- In conjunction with promoting access to high-quality services, behavioral health disparities can be further mitigated by addressing social determinants of health, such as social exclusion, unemployment, adverse childhood experiences, and food and housing insecurity.

Advancing Health Equity

- Advancing health equity involves ensuring that everyone has a fair and just opportunity to be as healthy as possible. This also applies to behavioral health.
- In conjunction with quality services, this involves addressing social determinants, such as employment and housing stability, insurance status, proximity to services, culturally responsive care – all of which have an impact on behavioral health outcomes.

[*https://www.samhsa.gov/behavioral-health-equity/about](https://www.samhsa.gov/behavioral-health-equity/about)

BACKGROUND ON ADVANCEMENTS IN MEDICAL EDUCATION ON ADDICTION

- Training on addiction is severely lacking in Medical School studies and curriculum.
- Most Medical Schools report anywhere from 2 – 10 hours of education on addiction throughout their entire Medical School experience.
- If a great deal of patients encountered in PCP offices have a substance use concern, then why is it that future Doctors aren't getting the training in Medical School that is clearly needed?

HBFF's Movement to Educate Medical Students, Physicians and the Healthcare Field as a Whole

HBFF'S Four Medical & Professional Education Programs

- 1. Summer Institute for Medical Students (SIMS)
- 2. Professionals in Residence (PIR)
- 3. Course on Addiction & Recovery Education (CARE)
- 4. ACGME-Accredited Addiction Medicine Fellowship

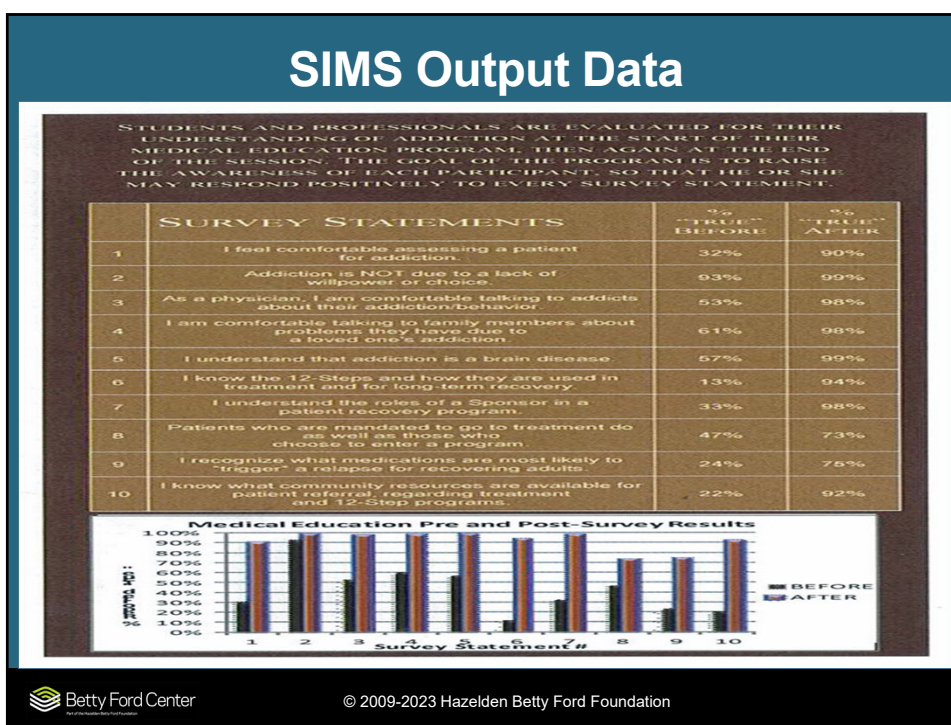
1. Summer Institute for Medical Students (SIMS) Program Description



SIMS Program Overview

- Addiction is a bio-psycho-social-spiritual disease.
- Treatment addresses: the whole person.
- How 12 step programs are used in treatment & become part of the lifetime recovery prescription.
- This is an immersion program – it is emotionally charged.
- Ideally: Medical education group becomes a safe place to share your experiences.
- SIMS participants come to learn about the science of addiction – they leave knowing the spirit of recovery.

SIMS Output Data



Betty Ford Center

© 2009-2023 Hazelden Betty Ford Foundation

2. Professionals In Residence (PIR) Program Description

- The Professionals in Residence (PIR) program gives participants the opportunity to learn about addiction, treatment and recovery side-by-side with our expert clinicians and our treatment patients in a five-day program.
- PIR provides an insider's view into the process of evidence-based, Twelve Step addiction treatment and recovery.
- PIR involves:
 - Classroom instruction
 - Clinical observation
 - Integration into patient life

Betty Ford Center

© 2009-2023 Hazelden Betty Ford Foundation

3. Course on Addiction & Recovery Education (CARE)

- Used in medical schools around the world, the CARE online curriculum prepares medical students to identify, intervene and address substance use disorders.
- A first-of-its-kind online course for medical students, CARE draws from leading experts and emerging science:
- Aquifer/MedU and NYU Grossman SOM platforms support easy access and navigation
- Interactive format fosters learning engagement
- Flexible modules allow for customization

4. Addiction Medicine Fellowship

- With an intense focus on patient care, the Hazelden Betty Ford Eisenhower Health ACGME-Accredited Addiction Medicine Fellowship involves:
- Assessing patients from admission through treatment
- Administering detoxification protocols
- Completing addiction-focused patient history and physical exams
- Determining pathophysiology, medical treatment and relapse indicators, proficiency in medical management, interview skills, patient education and oral presentations

Medical & Professional Education at HBFF

- Focus Groups For 2023 And Beyond:
 - Medical Students (Through SIMS)
 - Medical Education Partnerships (Individual School Groups – UNTHSC-TCOM, Texas Tech University Health Sciences Center, UNR SOM, Mayo Clinic ASOM, Stanford Medicine)
 - Professionals in Residence (PIR)
 - Doctors
 - Nurses, NPs & PAs
 - Pharmacists
 - Corrections Officers
 - Family Law Lawyers & Judges
 - And More...

Summary

- Addiction education is a must in all settings
- Now is the time for action
- If we don't take matters into our own hands, no one will

ADVANCING ADDICTION EDUCATION / REDUCING STIGMA

-Questions?

-Comments?

-Thank you so much for your support.

-For more information, please contact:
Joseph Skrajewski at 760-773-4375 or
jskrajewski@hazeldenbettyford.org



© 2009-2023 Hazelden Betty Ford Foundation

