

Date:05/30/2024 Time: 10AM to 12PM

Location: 1750 West 103rd street

Virtual info:

Meeting ID: 83457129193

Password: 553998

Phone number:312-626-6799

Educator: Dr. Karen White CADC, NCRS, RCT Community Topic: Substance Use Disorders and The Disparities

### Defining the meaning:

Disparity: A noticeable and usually significant difference or dissimilarity or situation in which two things are equal or similar especially when things are said to be unfair in nature. The condition of being unequal and a disparity is a noticeable difference!

**Example**: Giving less appropriate services to a person because of race, religion, sex, biases of any kind etc.

### Statistics:

### Recovery/Treatment

- Individuals who receive treatment for substance use disorders
   According to SAMHSA: 23.5% are whites and 18.6% Hispanic/ Black
- Studies suggest young people with low levels of education are regarded as HIGH RISK for consumption of substances, lack of self- control, anxiety, as well as low level parental control.
   Factors that can contribute to disparities in substance misue:
- Geographical limitations, for example: treatment facilities are often located in urban areas and populated states. They lack basic needs: such as housing stable employment or having difficulties seeking recovery services and support.
- For women and or single fathers little support or no support as it relates to someone keeping the child/ern while the individual go through a treatment program successfully.

### Healthcare:

Gaps in quality of care due to race, ethics, and social status.

Individuals who typically falls into these disparities are low income, low education, Substance
use disorders, Mental Health disorders, underserved communities and Rual area communities
where resources are lacking.

### Other Factors that contribute to disparities:

- Structural racism
- Poverty
- Differential access to healthcare
- Racial/ethnic discrimination
- Social economic status
- Criminal history
- Co—occurring mental health issues

### Some changes that can be made/ as a community:

- Improve the prevention and treatment of substance, issue and disparities through awareness, advocatcay and education.
- Implementation of national legislation to address the barriers. Get more involved with local state representatives and voice your concerns.
- · Work collective together to ensure no one is being left behind.

### Strategies: Combination use of strategies will assist with lowering disparities with substance use disorders.

- Information dissemination
- Prevention Education
- Alternatives
- Problem Identification and referral
- Community-based process
- Environmental approach

### Plan to action: Observe, acknowledge, and correct through advocacy,

### awareness and education!

- A detailed observation of the participants and an individual level to address disparities associated with substance misue collectively.
- Acknowledge the systems have been disproportionately harmed humans throughout history
- Corrective action that implements programs that service the individual needs holisticly

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This Presentation Will:

- Define the meaning of the word disparity
- Discuss Disparities in Healthcare
- Explore and examine the primary causes of disparities in general
- Identify some reasons why various disparities, affect those who have a substance use disorder.
- Provide Solutions to Substance Use Disorders and the Disparities
- Provide a Plan of Action

## THE FUNDAMENTAL MEANING OF THE WORD DISPARITY:

A noticeable and usually significant difference or dissimilarity or situation in which two or more things are not equal or similar especially when things are said to be unfair in nature.

Ex. Giving less appropriate services to a person because of race, religion, sexual identity, etc.

The condition of being unequal and a disparity is noticeable difference. Disparity usually refers to a

### STATISTICS

Hispanic individuals receive treatment 18.6% of 17.6% receive treatment 23.5% of the time, while Black and treatment for illicit substance use disorders, whites According to SAMHSA, of individuals who need of the time, respectively

### STUDIES INPUT

self-esteem, and self-control, as well as the low level of parental control also poses a risk for substance misuse. of education are regarded as high risk for consumption Studies have shown that young people with low levels psychoactive substances (Lopes, 2013). Anxiety, low

# DISPARITIES IN HEALTHCARE

minority groups. People with lower socioeconomic status. Underserved Healthcare disparities are differences and/or gaps in the quality of health populations that experience health disparities include racial and ethnic and healthcare across racial, ethnic, and socio-economic groups rural communities

### HEALTH CARE USING DIFFERENT APPROACHES INSTEAD OF RELYING ON ON-FIT SOLUTIONS (MULTIPLE PATHWAYS)

Healthcare systems should integrate a range of services that can support and treat and individual. Including, regular screening for drug-related problems and follow-up after care

- Use of multifaceted professionals and People with Lived Experience
- Raising Public Awareness
- Expanding health insurance coverage
- Improving the capacity and number of providers in underserved communities
- Increasing the knowledge base on causes and interventions to reduce disparities.

## KEY POINTS TO SUBSTANCE USE DISORDERS AND THE DISPARITIES

Substance use and mental health services Lack of cultural competency in the healthcare work force that extends to

disorders. Older Americans are increasingly seeking treatment for substance use

counterparts more likely to be asked to leave before treatment is complete to their white Black Americans are less likely to finish substance use disorder treatment and

# FACTORS THAT CAN CONTRIBUTE TO DISPARITIES IN SUBSTANCE MISUSE

- Geographical limitations
- Treatment facilities are often located in urban areas and populated states.
- Basic needs
- People who are unhoused, have poor housing, or lack employment may have difficulty seeking help or engaging in a recovery process

## OTHER FACTORS CONTRIBUTING TO DISPARITIES

Structural Racism

Poverty

Differential access to healthcare

- Racial/ethnic discrimination
- Social economic status
- Criminal history
- Co-occurring mental health issues

### HOW CAN WE

Improve the prevention and treatment of substance misuse and disparities

and improve access for evidence-based substance use disorder treatment for The proposal and implementation of national legislation to address barriers the justice system will help dimmish inequities in access and retention. individuals from all racial and ethnic backgrounds who come into contact with

### STRATEGIES

Combination use of strategies will assist with lowering disparities with substance use disorders.

- Information Dissemination. ...
- 2. Prevention Education. ...
- 3. Alternatives. ...
- 4. Problem Identification and Referral. ..
- 5. Community-Based Process. ...
- 6. Environmental Approach.

## PLAN OF ACTION

- A detailed observation of the participants on an individual basis is what's required to develop and implement an organized plan of action to address the various disparities associated with substance misuse collectively.
- Acknowledge the systems that have disproportionately harmed historically rehabilitation of the individuals from a wholistic spectrum. those systems towards services and treatment while improving the standard and marginalized persons who use substances and implement programs that reorient

### References:

older (2015-2019) (Publication No. PEP21-07-01-001). Rockville, MD: Substance Abuse and use, substance use disorders, and substance use treatment utilization among people aged 12 or Center for Behavioral Health Statistics and Quality. (2021). Racial/ethnic differences in substance Mental Health Services Administration. Retrieved from https:// www.samhsa.gov/data/

Associated with Psychoactive Substance Abuse by Adolescents in Serbia. Front Pharmacol. 2017 Jun 13;8:366. doi: 10.3389/fphar.2017.00366. PMID: 28659800; PMCID: PMC5468426 Janicijevic KM, Kocic SS, Radevic SR, Jovanovic MR, Radovanovic SM. Socioeconomic Factors

### References:

Lopes, G. M., Nóbrega, B. A., Del Prette, G., & Scivoletto, S. (2013). Use of psychoactive substances by adolescents: current panorama. Brazilian Journal of Psychiatry, 35, S51-S61