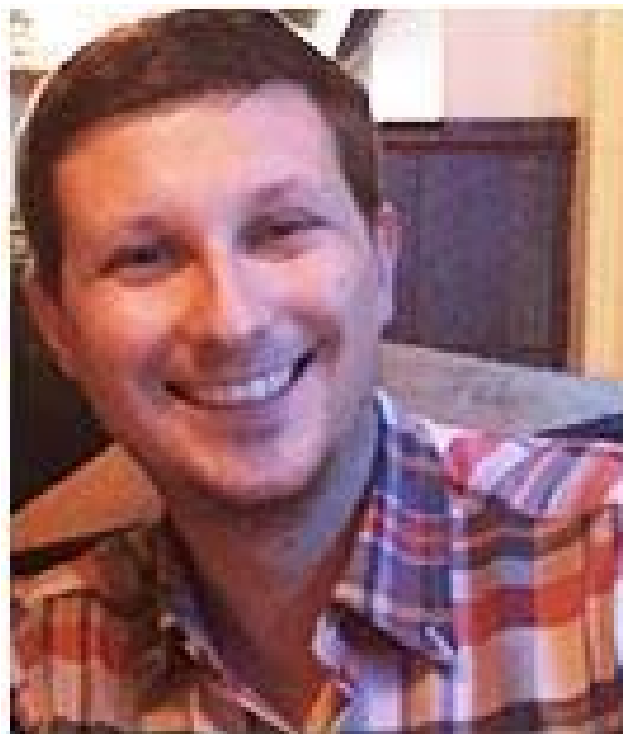


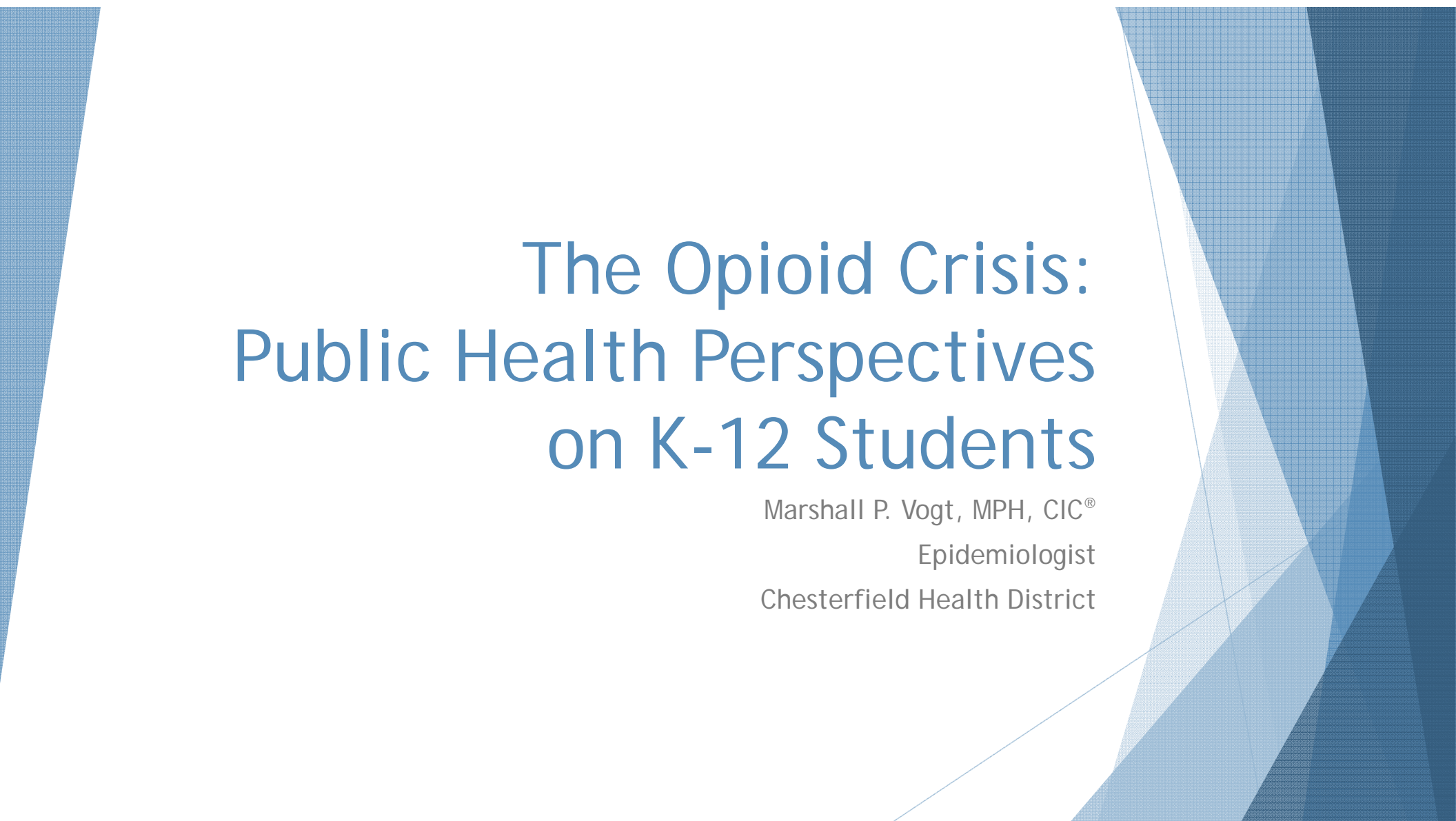
Marshall Vogt

Epidemiologist, Chesterfield Health District

Marshall Vogt, a native of Richmond, Virginia, serves as the Epidemiologist for the Chesterfield Health District, which includes the Counties of Chesterfield and Powhatan, and the City of Colonial Heights. In this capacity, he is responsible for comprehensive oversight of disease surveillance and control activities for a population of over 380,000 citizens.

Marshall received his Bachelors of Science in Biology from the University of Mary Washington in Fredericksburg, VA and earned his Masters of Public Health with a concentration in Epidemiology from the University of Georgia. Prior to his current position, Marshall has held jobs in state level public health and hospital infection prevention.



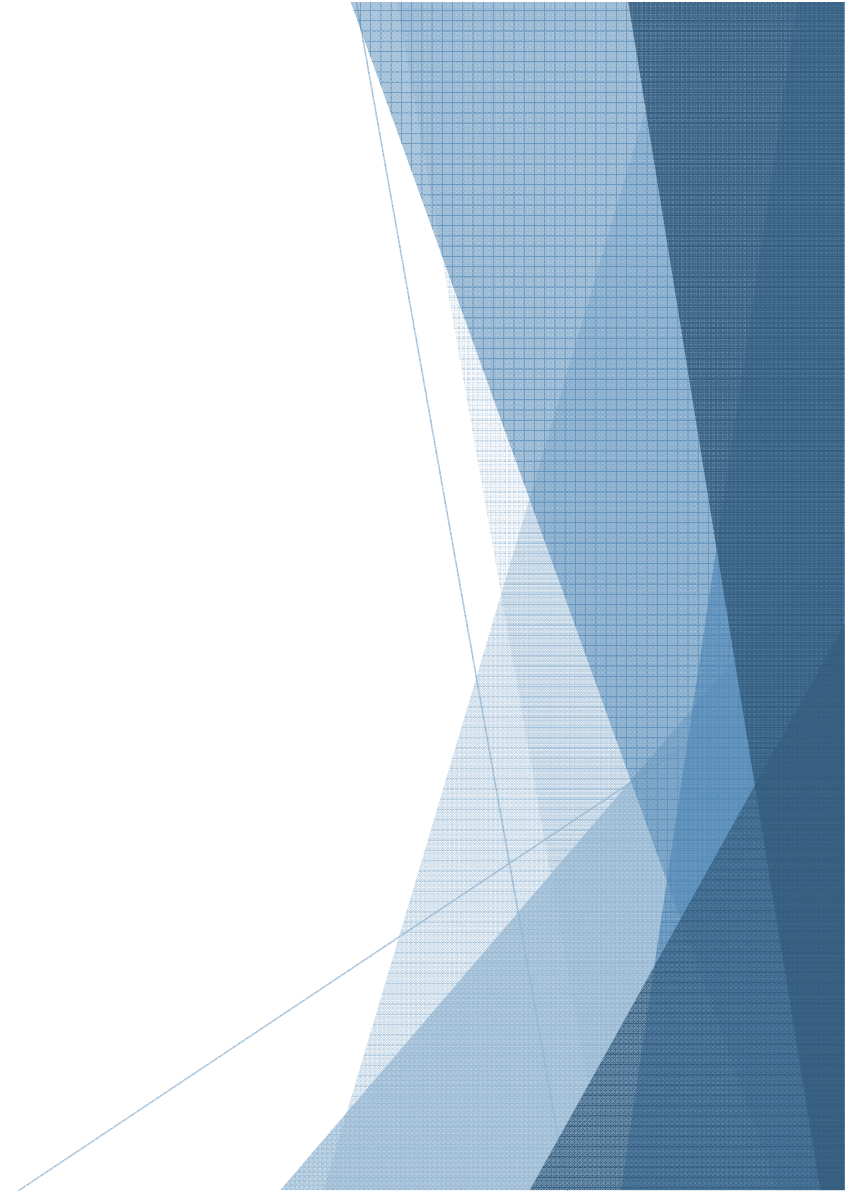


The Opioid Crisis: Public Health Perspectives on K-12 Students

Marshall P. Vogt, MPH, CIC®
Epidemiologist
Chesterfield Health District

Today's presentation

- ▶ Introductions
- ▶ What data is available?
- ▶ What does it mean?
- ▶ Where do we go from here?

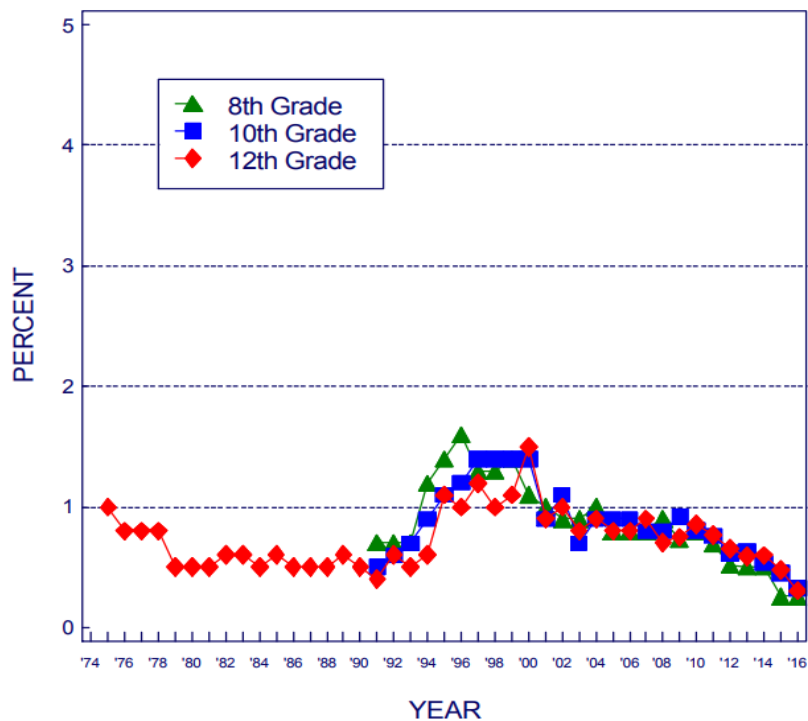


The data

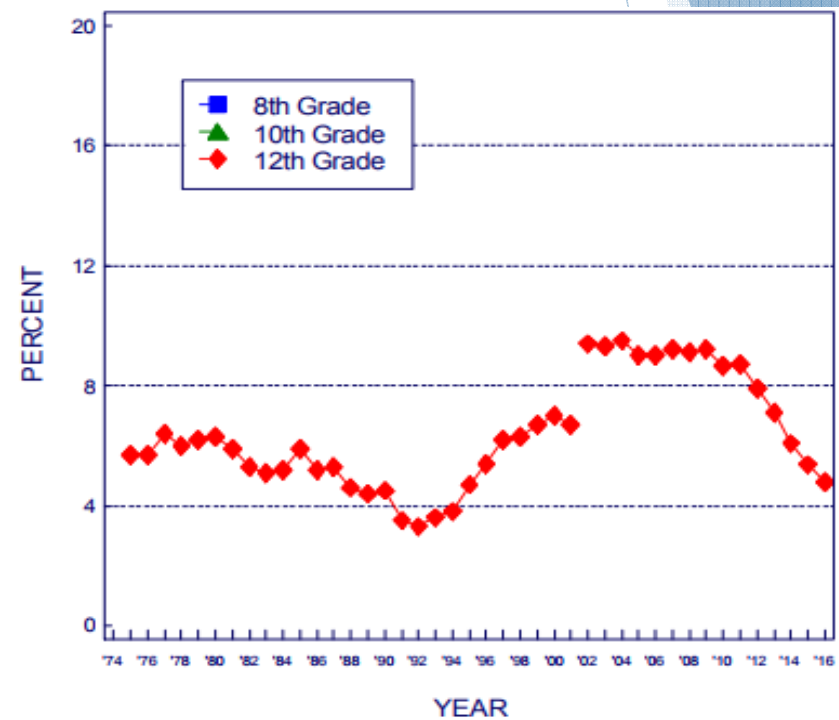
- ▶ The challenge
 - ▶ Paucity of data
 - ▶ Available data focuses on other substances of abuse
 - ▶ “Opioids” vs. “heroin” vs “heroin/opioids”
- ▶ But there are solutions!
 - ▶ Syndromic surveillance data
 - ▶ Discharge/claims data
 - ▶ Youth behavior risk factor surveys

Opioid use, K-12 students, National

Heroin Use
% who used in last 12 months

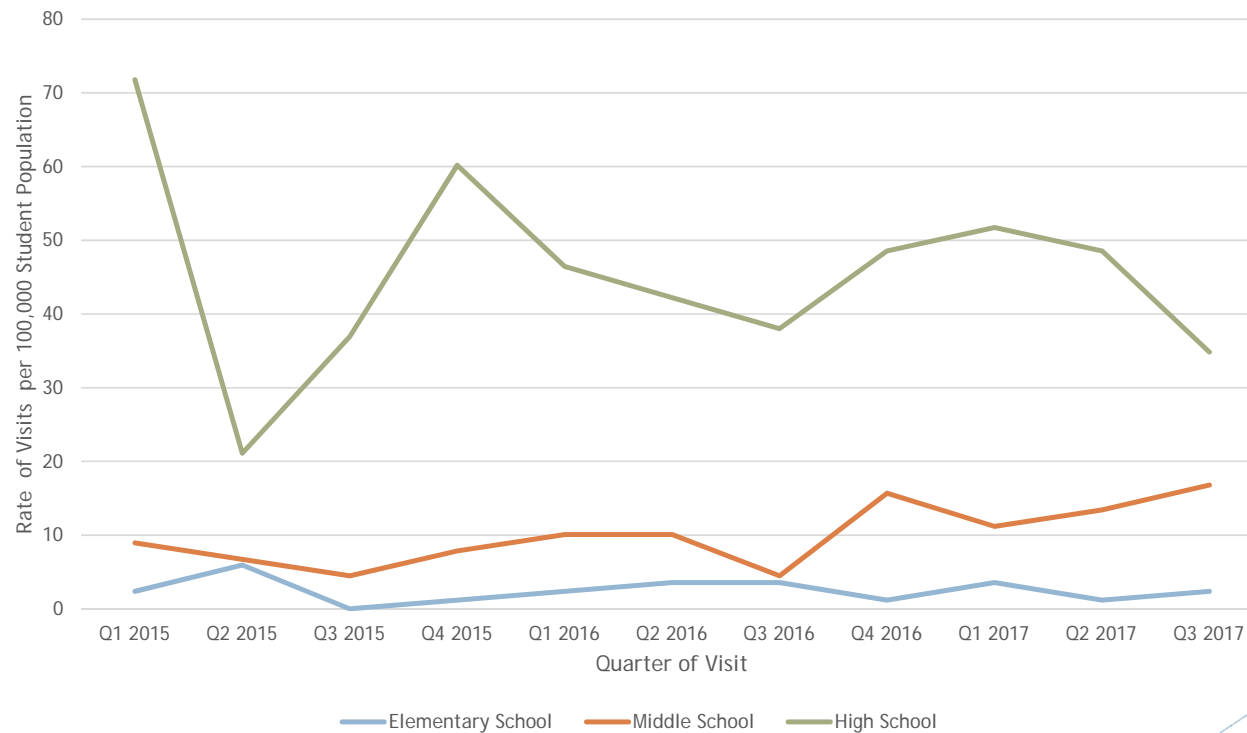


Narcotics other than heroin use
% who used in last 12 months



Monitoring the Future, 2016 data

Opioid use among K-12 students, Regional

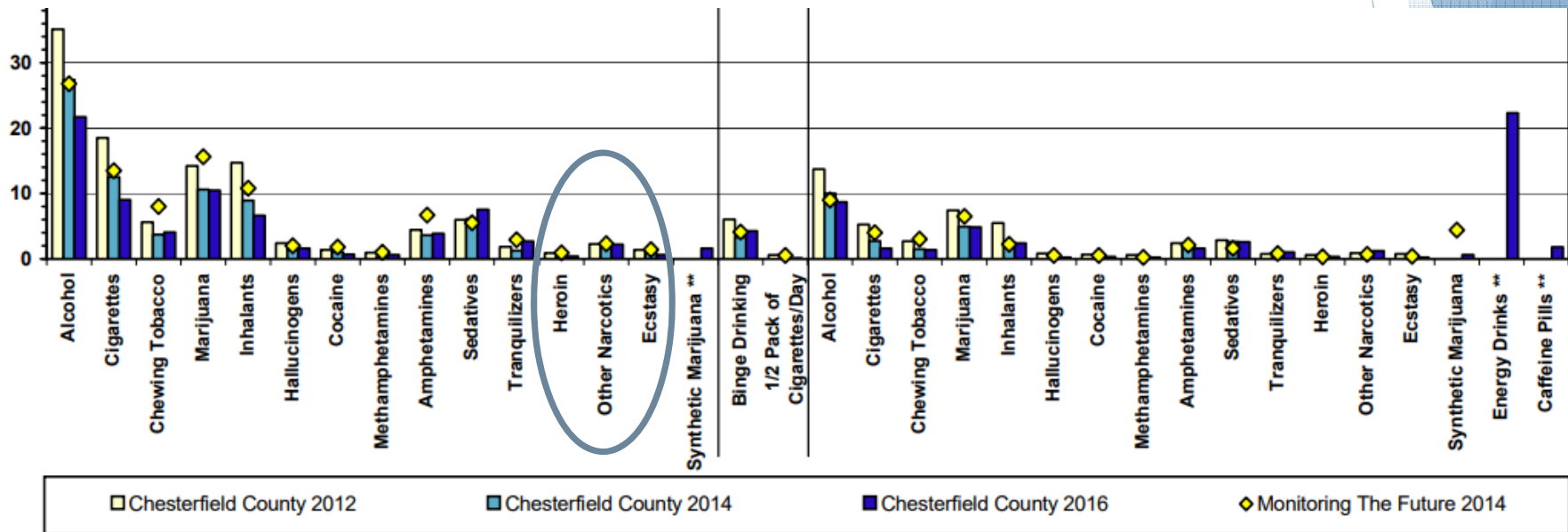


Rate of ED Visits for Unintentional Overdose by Opioid or Unspecified Substance among Central Region Residents by Quarter and School Group, Jan 2016 - Sept 2017

VDH Syndromic Surveillance Data

Opioid use among K-12 students, Local

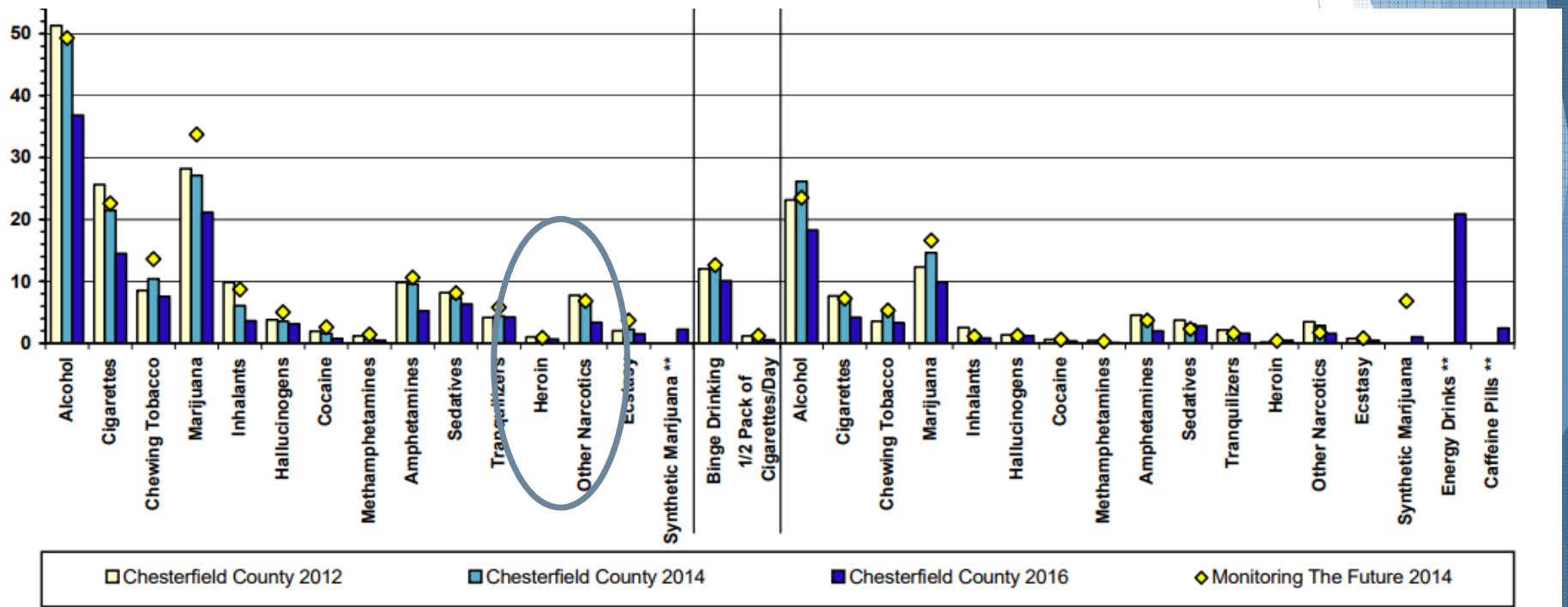
Lifetime and 30-day percent use, 2016 Chesterfield County Survey, Grade 8



SAFE, Prevention Needs Assessment Survey

Opioid use among K-12 students, Local

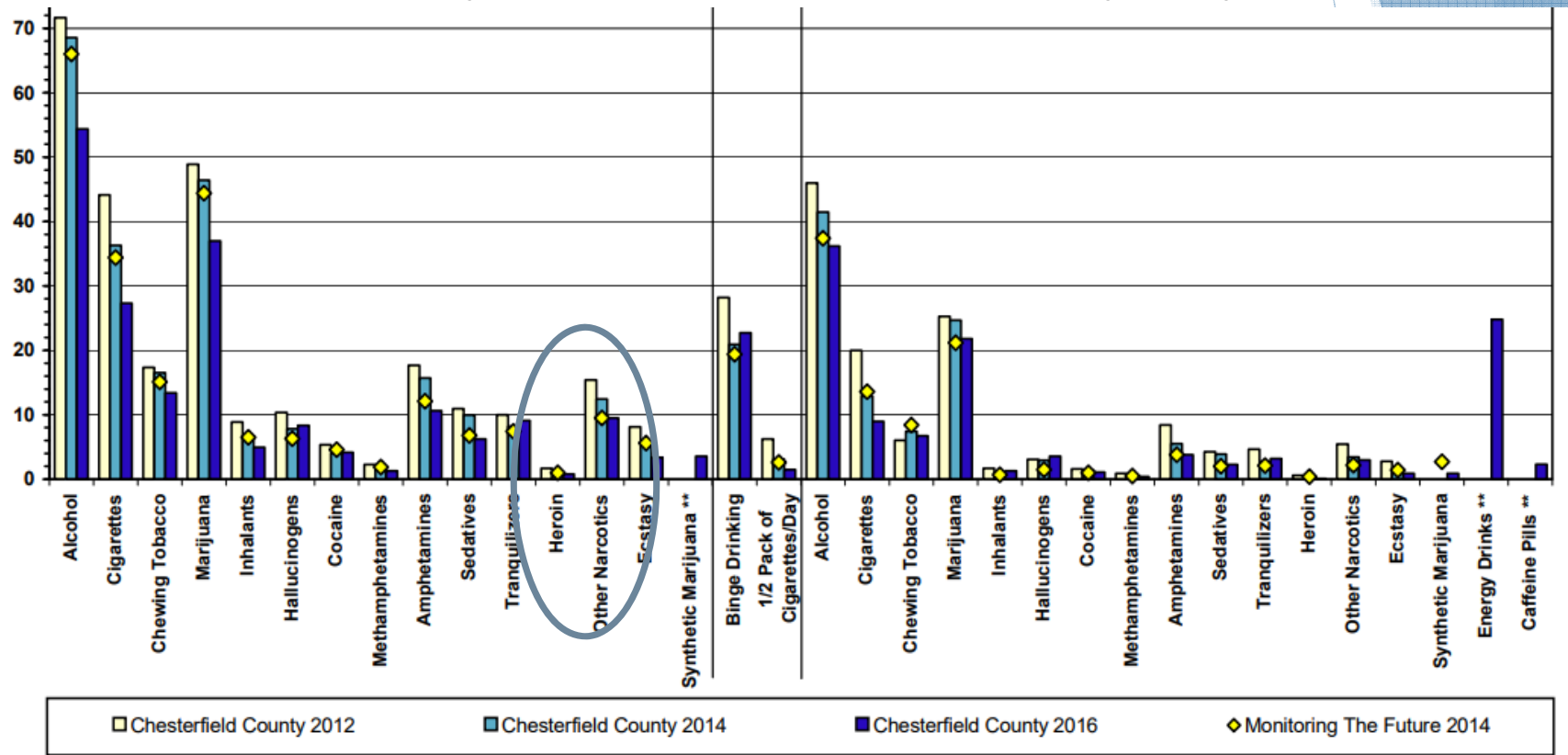
Lifetime and 30-day percent use, 2016 Chesterfield County Survey, Grade 10



SAFE, Prevention Needs Assessment Survey

Opioid use among K-12 students, Local

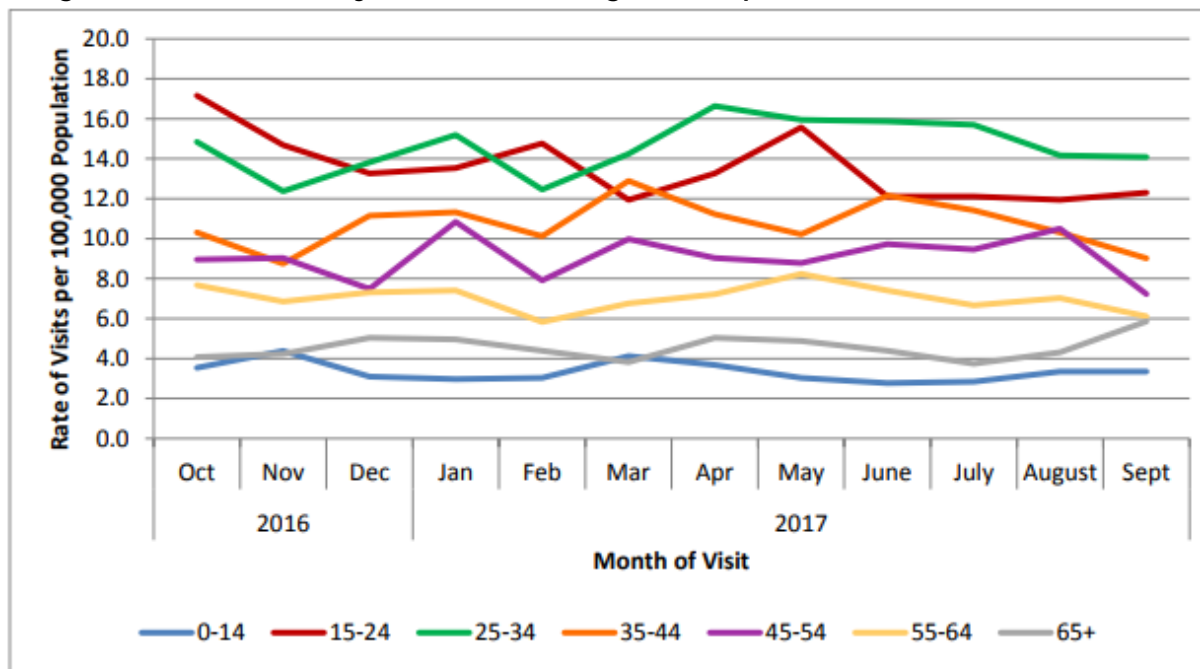
Lifetime and 30-day percent use, 2016 Chesterfield County Survey, Grade 12



SAFE, Prevention Needs Assessment Survey

For comparison...

Rate of ED Visits for Unintentional Overdose by Opioid or Unspecified Substance among Virginia Residents by Month and Age Group (Years), Most Recent 12 Months



VDH Syndromic Surveillance Data

An opportunity...

- ▶ Public health = prevention
- ▶ K-12 student population is ideal for prevention campaigns
 - ▶ Majority of this group have not adopted behaviors of opioid misuse/abuse
 - ▶ Stop opioid misuse/abuse before it starts

An example...

- ▶ Preventure
 - ▶ School-based intervention
 - ▶ Two 90-minute group sessions
 - ▶ Targets students with high risk behavior traits
 - ▶ Sensation seeking
 - ▶ Impulsiveness
 - ▶ Anxiety
 - ▶ Hopelessness
 - ▶ Growing evidence base demonstrating effectiveness at reducing high-risk behaviors, depression, anxiety, and impulsive behavior

Conclusions

- ▶ Data is scarce, but does exist
 - ▶ Need to improve data sources, continue to examine the problem
- ▶ K-12 students impacted by opioid crisis
 - ▶ Propensity to misuse/abuse increases with age among K-12 population
 - ▶ Less misuse/abuse than other age groups
- ▶ Opportunities for prevention exist
 - ▶ Research, implement, and review impact

Thank you!

Marshall Vogt

