A CRISIS OF HER OWN: FATAL OPIOID OVERDOSE, OPIOID USE DISORDER, AND INTIMATE PARTNER VIOLENCE AMONG RURAL UTAH WOMEN
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CONTENTS

04 NATIONAL TRENDS

05 UTAH TRENDS

06 POTENTIAL FACTORS INCREASING OVERDOSE FATALITIES AMONG WOMEN

07 INTIMATE PARTNER VIOLENCE AND SUBSTANCE USE DISORDERS

08 RESOURCES

09 TAKE-AWAYS

10 REFERENCES

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While U.S. women, compared to men, are less likely to die of a drug overdose (Mazure & Fiellin, 2018), the rate of overdose deaths among women is rapidly increasing, narrowing the gender gap in overdose deaths (CDC, 2018a). Women experienced a 532% increase in fatal opioid overdose deaths between 1999 and 2017, compared to a 355% increase for men (CDC, 2018a). Among women, those in rural areas have disproportionately higher drug overdose death rates than women in urban areas (Mazure & Fiellin, 2018), indicating an opportunity for targeted rural public health interventions to slow overdose fatality increases among women.
Between 1999 and 2017, women in Utah mirrored national trends with a disproportionately high increase in opioid overdose deaths. Overdose deaths increased by 243% among Utah women, while deaths rose only 63% among men (CDC, 2018a). From 2013 to 2017, Utah’s rural areas experienced some of the highest rates of drug-induced mortality. According to the Centers for Disease Control and Prevention (CDC, 2018a), the top three highest rates (per 100,000) of overdose deaths occurred in the following rural counties: Carbon, 47.6; Tooele, 20.6; Sanpete, 19.0.

Three counties in Utah, all of which are rural, reported higher rates of opioid overdose among women than among men: Juab, Uintah, and Sevier (CDC, 2018a), the former two housing reservation lands as well (USDA, 2019). Of the remaining rural counties, many do not have sufficient data to report reliable numbers (CDC, 2018a). Other barriers, such as stigma regarding opioid use and medication-assisted treatment, may obscure the full extent of the issue (Olsen & Sharfstein, 2014). As a result, it is difficult to determine the exact number of rural Utah women who lost their lives to opioid overdose.
POTENTIAL FACTORS INCREASING OVERDOSE FATALITIES AMONG WOMEN

Features of opioid use disorder differ by gender. For example, women experience:

- Shorter duration between the start of opioid use and diagnosed addiction than men (Back, Payne, Wahlquist et al., 2011; Hernandez-Avila, Rounsaville, & Kranzler, 2004).
- More likelihood than men to be prescribed an opioid and a higher dose of that opioid (Darnall, Stacey, & Chou, 2012).
- Greater addiction severity (HCUP, 2019).

Also, trauma enhances risk for opioid use disorders among women more strongly than men (Hemsing, Greaves, Poole, & Schmidt, 2016), and post-traumatic stress disorder (PTSD) due to physical and sexual trauma (including intimate partner violence [IPV]) is more common among women with addictions than men (NIDA, 2012). Furthermore, PTSD is positively associated with opioid misuse (McCauley, Amstadter, Danielson, Ruggiero, Kilpatrick, & Resnick, 2009). Women who are victims of IPV are at greater risk of misusing opioids (Cole, & Logan, 2010; McCauley, Amstadter, Danielson, Ruggiero, Kilpatrick, & Resnick, 2009), and opioid misuse is associated with higher risk of overdose and death (Hemsing, Greaves, Poole, & Schmidt, 2016).

Although research investigating connections between IPV and opioid use disorder is limited, the more general association between substance use disorders and IPV is thoroughly documented.
Intimate partner violence is defined as physical, sexual, or psychological violence inflicted by a current or past intimate partner (CDC, 2018b). Problematic drug use (including problematic opioid use) is significantly associated with both perpetration of IPV (male partner to female partner) and IPV victimization (of the female partner), and females who use substances are more likely than male counterparts to be victims of IPV (Cafferky, Mendez, Anderson, & Stith, 2018; Gilbert, El-Bassel, Chang, Shaw, Wu, & Roy, 2013). While substance use both exacerbates and increases the risk of IPV occurring (Moore, Easton, & McMahon, 2011; Smith, Homish, Leonard, & Cornelius, 2012), what many do not realize is that substance use is a common coping response among people being victimized by violence (Cafferky, Mendez, Anderson, & Stith, 2018). Substance use among perpetrators can also exacerbate the severity of IPV (El-Bassel, Gilbert, Wu, Chang, & Fontdevila, 2007; Moore, Easton, & McMahon, 2011). Unfortunately, women living in rural areas often have higher rates of unmet service needs, such as access to healthcare and treatment (Karra, Fink, & Canning, 2017; Nicholl, West, Goodacre, & Turner, 2007; Raknes, Hansen, & Hunskaar, 2013; Stulz, Pichler, Kawohl, & Hepp, 2018). This unmet access puts women at increased risk of both substance use disorders and IPV (Gilbert, El-Bassel, Chang, Shaw, Wu, & Roy, 2013).
RESOURCES

If you or someone you love is experiencing or has experienced an opioid use disorder, and/or IPV, here are some resources to help.

**Methadone Clinics**
http://www.opiateaddictionresource.com/treatment/methadone_clinic_directory/ut_clinics

**Buprenorphine Prescribers**
https://www.samhsa.gov/medication-assisted-treatment/practitioner-program-data/treatment-practitioner-locator

**Naltrexone**
Any healthcare professional licensed to prescribe medications can prescribe Naltrexone.

**Naloxone**
https://naloxone.utah.gov

**Harm Reduction Services, Education, and Advocacy**
https://utahharmreduction.org/

**Community Abuse Prevention Service Agency**
24-hour Crisis Hotline: 435-753-2500
https://www.capsa.org/

**Center for Disease Control and Prevention**
https://www.cdc.gov/violenceprevention/intimatepartnerviolence/index.html

**Preventing Intimate Partner Violence**
https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html

**Office on Women’s Health**
https://www.womenshealth.gov/relationships-and-safety/domestic-violence

**National Domestic Violence Hotline**
1-800-799-7233 or TTY 1-800-787-3224
Secure online chat: https://www.thehotline.org/what-is-live-chat/

**Utah Domestic Violence Coalition**
124 South 400 East, Suite 300, Salt Lake City, UT 84111; (801) 521-5544
www.udvc.org
Overdose rates are increasing dramatically among women.

There is an association between intimate partner violence and substance use disorders.

There are state and national resources to assist women experiencing opioid use disorder and intimate partner violence.
REFERENCES


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