

## STRATEGY SAMPLER

# Arts and the Opioid Epidemic

## March 2019

America's opioid epidemic is not only broad—affecting people across the country of all demographics<sup>i</sup>—but also deep, having roots in systemic medical practices, economic conditions and community dynamics. Resolving it is similarly complex. Addiction recovery can be a multi-faceted process that may involve medication, therapy, in-patient treatment, support groups and other interventions.<sup>ii</sup> This can make it expensive and logistically onerous, especially for people living in rural communities or in economic distress.

The arts—which demonstrably support physical, mental and emotional well-being and also expedite recovery from illness and injury—can help address the opioid crisis in a number of ways.<sup>iii</sup> Arts based therapies as well as various creative practices bolster the process of addiction recovery.<sup>iv</sup> Engaging in creativity also can help prevent opioid use and misuse, which is ultimately the most effective way of reducing opioid addiction and mortality rates in America.<sup>v</sup>

State arts agencies are well situated to incorporate the arts into successful responses to the current opioid epidemic and to help prevent similar public health crises in the future. This strategy sampler considers how state arts agencies can support addiction recovery and prevention efforts. It first reviews evidence of how the arts can help prevent opioid misuse and facilitate addiction recovery before looking at model arts and addiction programs. It discusses how state arts agencies can support arts based therapies and enable creative engagements in health care and other recovery environments. The paper concludes with a set of programming tips and a collection of resources to inform ongoing and future efforts to counter the opioid epidemic through the arts.

NASAA always wants to learn more about state arts agency efforts. If your agency has a new policy, program or service related to the opioid crisis or another addiction issue—or is updating an existing one—please let us know. Contact NASAA Research Manager [Paul Pietsch](#).

## Research Findings [\(back to Table of Contents\)](#)

Engaging in creative activities contributes to feelings of personal agency, purpose and social connection, which not only contribute to overall wellness but also mitigate known risk factors of opioid misuse and addiction such as chronic pain, anxiety, stress, depression and other mental health issues.<sup>vi</sup> (Social determinants of health, such as economic distress and social isolation, are compounding factors<sup>vii</sup>; see NASAA's research on [arts and the military](#), [arts based development in rural communities](#) and [creative economic development](#) to learn more about state arts agencies working in these fields.)

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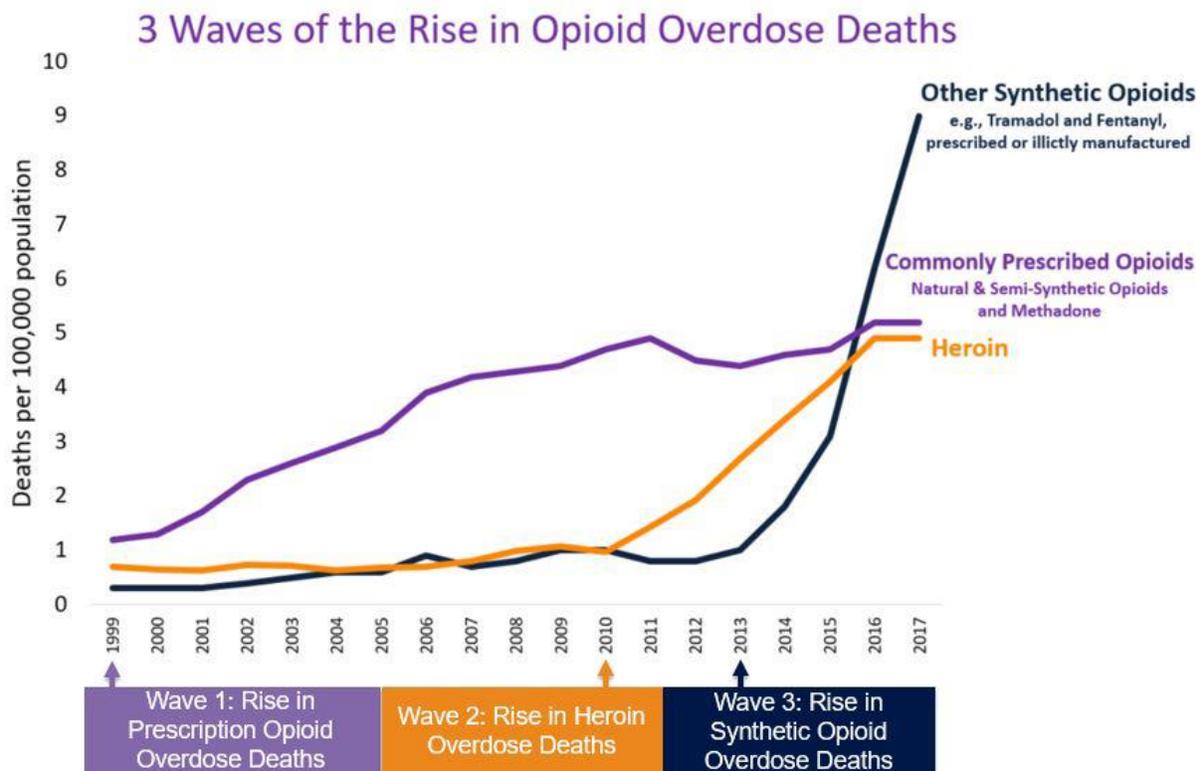
## THE OPIOID EPIDEMIC [\(back to TOC\)](#)

Opioids are a class of natural or synthetic chemicals that reduce feelings of pain by interacting with nerve cells in the body and brain. Opioids include heroin as well as prescription painkillers such as oxycodone, hydrocodone, codeine and morphine. Fentanyl, which is at the center of the current opioid crisis, is 50-100 times more potent than morphine.<sup>viii</sup> Opioids have a long history of both effective medical applications and devastating misuse.

There are more than 130 overdose deaths every day in America. This epidemic began nearly 40 years ago when medical opinion began to change about the safety and effectiveness of using opioids to treat chronic pain—which historically has not had a sound and effective remedy—in addition to acute and terminal pain.<sup>ix</sup> In the 1990s, the American Academy of Pain Medicine and the American Pain Society approved the use of opioids to treat chronic pain. Soon after, pharmaceutical companies began aggressively and directly marketing to doctors the newly created extended-release oxycodone and other prescription pain relievers.<sup>x</sup> The number of opioid prescriptions rose significantly and, in the 2000s, increased further as medical standards recognized pain as the "fifth vital sign."<sup>xi</sup> Subsequently, patient satisfaction became a proxy for assessing health care quality and was tied to Medicare and Medicaid reimbursements.<sup>xii</sup> Meanwhile, many pharmacies and insurance companies made opioid pain medications not only cheaper when bought in bulk but also less expensive than non-opioid alternatives.<sup>xiii</sup>

### NASAA's Arts and Health Care Resources

For more information about how state arts agencies can support arts based efforts to foster health, well-being and recovery from illness and injury, see NASAA's [Arts in Clinical Settings](#) and [Creative Aging](#) strategy samplers.



Source: Centers for Disease Control and Prevention, National Vital Statistics System

As opioid prescriptions increased significantly—from 2 million in 1990 to 92 million in 2015—so too did abuse of and addiction to them.<sup>xiv</sup> Up to 29% of opioid prescriptions are misused today.<sup>xv</sup> Many people misusing prescription opioids ultimately switch to heroin because of its lower cost and greater availability. This led to a sharp rise between 2010 and 2016 in the rate of heroin overdose deaths. Since 2013, synthetic opioids, particularly illicitly manufactured fentanyl sold as heroin or counterfeit prescription pain pills, have been the leading cause of opioid related deaths.<sup>xvi</sup> There were more than 28,000 deaths in 2017 alone involving synthetic opioids.<sup>xvii</sup>

### The Opioid Crisis by the Numbers

- 700,000 Americans died from a drug overdose between 1999 and 2017, and **400,000** of these deaths involved a prescribed or illicit opioid.<sup>xxxiv</sup>
- Nearly **48,000** died in 2017 from an overdose involving an opioid.<sup>xxxv</sup>
- Each day, more than **130** Americans die from an opioid related overdose.<sup>xxxvi</sup>
- Opioid overdose deaths today are **six times** higher than in 1999.<sup>xxxvii</sup>
- The United States consumes about **80%** of all the world's opioids.<sup>xxxviii</sup>
- **38% of U.S. adults (92 million)** use prescription opioids.<sup>xxxix</sup>
- **11.4 million** Americans misuse opioid prescriptions, and 2.1 million are addicted to opioids.<sup>xl</sup>
- The annual economic burden of prescription opioid misuse in the United States is **\$78.5 billion**.<sup>xli</sup>

## HOW THE CAN ARTS HELP ([back to TOC](#))

### Emotional and Mental Health

Research shows that art and music therapies contribute to successful substance abuse treatments. Such arts based interventions can help motivate deeper engagement in substance abuse counseling by facilitating communication, mitigating feelings of shame and breaking down resistance to treatments.<sup>xviii</sup> Music therapy, in particular, facilitates addiction recovery by reducing anxiety, stress, depression and anger, powerful emotions that can trigger relapses.<sup>xix</sup> Similarly, drama therapy promotes positive self-image, self-esteem and self-discipline.<sup>xx</sup> Psychodrama facilitates feelings of autonomy, self-acceptance and personal growth while also countering common barriers to recovery such as problem avoidance and emotional irresponsibility.<sup>xxi</sup> Arts based therapies also foster interpersonal connections and community building, which help alleviate feelings of social isolation and dislocation that are common to the experiences of both addiction and recovery.<sup>xxii</sup>

There is therapeutic value to participating in creative activities even without a formal clinical treatment plan. The arts, for example, have proved to be

particularly effective tools for overcoming the debilitating mental and emotional effects of post-traumatic stress disorder and traumatic brain injury, both of which significantly increase the risk of opioid addiction.<sup>xxiii</sup> Engaging in the arts also can help address emotional and mental health issues that often underlie substance use disorders and impede recovery efforts.<sup>xxiv</sup> Maintaining sobriety following recovery treatment, which often is an isolating process, can be bolstered by explorations of the arts that are inherently social, such as taking an art class, auditioning for a play or volunteering for an arts event.<sup>xxv</sup> Finally, the arts—and arts based therapies—can provide similar support to the families of people recovering from addiction, as the effects of the disease can be traumatic for children and others living with them.<sup>xxvi</sup>

### Physical Health

The arts promote physical health and well-being. They also expedite medical recovery for ill and injured people of all ages. They are conducive to patient-centered health and holistic care models, and they provide comfort for and increase the quality of life for people living with chronic or terminal illnesses.<sup>xxvii</sup>

Most importantly, research indicates that arts based therapies and other arts engagements can reduce the need for pain management.<sup>xxviii</sup> Many opioid addictions begin with seeking relief from chronic pain, defined as persistent or recurring pain lasting more than three months, which is a major public health problem that affects more Americans than diabetes, heart disease and cancer combined.<sup>xxix</sup> For example, 21-29% of Americans prescribed opioids for chronic pain misuse them, 8-12% become addicted to them and 4-6% transition to heroin use.<sup>xxx</sup> Since preventing the use of opioids is the best way to stem addiction rates, arts based therapies and other arts interventions that can offset the need for prescription pain medication are particularly attractive.<sup>xxxi</sup>

## Arts and Addiction Programs [\(back to TOC\)](#)

Many local programs and projects support addiction prevention or recovery through the arts. Learning about such programs can be a good first step for state arts agencies interested in addressing the opioid crisis because they may illustrate the kind of work that would be relevant to local communities. Active programs also may be able to offer advice about potential strategies or partnerships. At the same time, they may benefit from learning about existing state arts agency programs that might support their efforts. Examples of arts and addiction programs include the following:

- The [Addiction Performance Project](#), produced by Theatre of War Productions, presents dramatic readings from Eugene O'Neill's *Long Day's Journey into Night* as a catalyst for community discussions about the disease of addiction as it touches patients, families and health professionals. The project was developed with support from the National Institute on Drug Abuse.
- [The Art of Hope](#) is a program of the Currier Museum of Art in Manchester, New Hampshire, and Partnership for Drug-Free Kids to help families struggling with addiction. The free program, which takes place in the comforting and safe space of the museum's galleries, is designed for parents supporting children recovering from a substance use disorder. Participants not only make art but also receive training in supporting recovery through love, listening, self-care and other strategies. The program also facilitates supportive relationships among families overcoming similar challenges. Counseling services are available to provide clinical support.
- The [Culture of Recovery](#) project of the Appalachian Artisan Center in Kentucky—conducted in partnership with addiction recovery programs and the health care industry—facilitates a holistic and arts-integrated approach to combating addiction in rural Appalachian communities. Through apprenticeships and other mentorships for people overcoming addiction, it develops creative expression, personal agency and skills that lead to economic opportunity.
- [Porch Light](#), a program that Mural Arts Philadelphia conducts in collaboration with Philadelphia's Department of Behavioral Health and Intellectual disAbility Services, fosters health and wellness by providing opportunities for city residents to contribute to the production of meaningful works of public art. The program has opened a [storefront](#) in a neighborhood particularly impacted by the opioid crisis that serves as a workshop for local and visiting artists, a community safe space,

### Cultural Awareness

Cultural competence is vital to effective behavioral health services, and research shows that culturally attuned addiction treatment can be more effective for populations with a strong common identity.<sup>xlii</sup> Race, ethnicity, gender, sexual orientation, socioeconomic status, education attainment and other factors can influence conceptions of addiction as well as the process of recovering from it.<sup>xliii</sup> Some addiction treatment programs work with and through specific cultural traditions.<sup>xliv</sup> To learn more about the intersections of culture, addiction and recovery, see [A Treatment Improvement Protocol: Improving Cultural Competence](#) from the U.S. Department of Health and Human Services.

and a learning hub that connects individuals to organizations that provide health and human services and referrals.

- Resounding Joy, Inc. is a California based nonprofit group that provides, through its [Semper Sound](#) program, music therapy to military service members and veterans dealing with post-traumatic stress disorder, a traumatic brain injury and/or substance abuse.
- The Harford County Office of Drug Control Policy in Maryland and its local partners have integrated the arts into their campaign to curb the opioid crisis. One example is a [play about addiction](#) that has been performed by young people for more than 2,500 students, parents and other county residents in high schools, colleges and churches. Other examples include a [competition](#) to develop the audio and visual components of a public service announcement and the [Hope Against Addiction Art Contest and Calendar](#).
- The [Face the Music Foundation](#) facilitates addiction prevention and recovery through live music. The group arranges performances by musicians in recovery, enabling them to tell their story to raise awareness and inspire others currently struggling with substance abuse. These performances are designed also to advance the recovery process of the participating musicians.

### Addressing Addiction through the Arts

[Creative arts therapies](#) encompass six disciplines ([art therapy](#), [dance therapy](#), [drama therapy](#), [psychodrama](#), [music therapy](#), [poetry therapy](#)) with distinct methodologies and creative processes that contribute to medical or rehabilitation treatment plans. Creative arts therapists—who are trained and credentialed professionals—can be valuable facilitators of addiction recovery.

[Expressive arts therapy](#) is a multimodal approach combining psychology and multiple art forms to foster emotional growth and healing. Credentialed expressive arts therapists are qualified to support addiction treatment plans and other health care interventions.

[Arts in health](#) is a strategy to integrate creative engagements into addiction recovery facilities and other clinical settings to improve patient and client experiences and outcomes. Arts in health activities—unlike arts based therapies, which are undertaken by therapists with formal training and accreditation—complement but are not directly part of medical treatment plans. They also bolster the resiliency of patients' family members and other caregivers.

## State Arts Agencies and the Opioid Crisis ([back to TOC](#))

### HEALTH AND HUMAN SERVICES ([back to TOC](#))

Many state arts agencies support inspiring arts activities and experiences in health care settings, which are designed to foster emotional and physical well-being as well as expedite healing and recovery from injury and illness. Examples of such efforts include grant programs that fund projects primed to combat opioid misuse and other addictions.

- Through its [Partners in Arts Participation](#) program, the **Minnesota State Arts Board** awards grants of \$5,000-\$25,000 to health care and human-service organizations. Eligible grantees include nonprofit and tribal entities with programming that addresses substance abuse as well as compounding factors such as homelessness and physical or mental health.

- The [Arts in Health](#) project grant of the **New Hampshire State Council on the Arts**, through awards of \$500-\$4,500, supports participatory arts activities, creative aging projects and artist residencies that take place in health care facilities. Arts and addiction efforts are eligible for funding. A related resource is the [New Hampshire Arts in Health Network Listserv](#), which is an on-line forum for thought leadership and practical dialogue among medical practitioners and arts professionals.
- The **Rhode Island State Council on the Arts**, in partnership with the Rhode Island Department of Health and the Rhode Island Teaching Artists Center, funds projects that bring the arts to hospitals and other health care facilities. Its [Project Grants in Healthcare](#) program awards up to \$10,000 to projects primarily serving young people that are led by teaching artists in coordination with licensed nonprofit health care providers. Projects addressing the opioid crisis are eligible.

## AT-RISK POPULATIONS ([back to TOC](#))

While the opioid crisis in the United States is widespread, transcending geographic and demographic boundaries, some populations have a greater risk of opioid misuse, addiction and related mortality. These groups include people dealing with chronic pain (which is not only one of the most debilitating medical conditions but also one of the most complex to manage<sup>xxxiii</sup>), burdened by economic distress, living with mental illness, serving in the military and reintegrating into society after incarceration. State arts agencies that already have programming designed to serve these specific populations through arts and culture can foster the hope, agency and wherewithal of at-risk individuals to avoid or overcome opioid addiction. Selected examples include:

- In the United States, 65% of incarcerated individuals meet the criteria for substance use disorder, and the use of opioids is linked with higher rates of recidivism.<sup>xxxiii</sup> The **California Arts Council's** [Reentry through the Arts](#) program promotes the arts as a connection between formerly incarcerated adults and their new communities as well as a conduit to social support services such as drug treatment, mental health counseling and job training. It awards grants of up to \$50,000 to arts based projects that holistically help former prisoners transition back into society as well as prevent the reincarceration of those on probation, parole or post-release community supervision. The agency's [Jump Starts](#) program, meanwhile, awards grants of up to \$3,000 to support arts education and artist-in-residence programs in the juvenile justice system.
- The [Specific Cultural Project](#) grant of the **Florida Division of Cultural Affairs** supports arts activities in hospitals and correctional facilities, both institutions that encounter a high number of people addicted to opioids. Grants of up to \$25,000 are available.
- The Innovative Partnership category of the **Kansas Creative Arts Industries Commission's** [Arts Integration](#) grant program awards up to \$15,000 in support of innovative programming between arts organizations and non-arts organizations that work toward community and/or economic development goals, such as reducing recidivism, creating jobs and fostering efficacious healthcare. Arts and addiction efforts are eligible for funding.
- The **Tennessee Arts Commission**, in partnership with the Tennessee Department of Veteran Services, offers grants of up to \$10,000 through the [Tennessee Military, Veterans & the Arts](#) program. The initiative encourages organizations working with military service members, veterans and their families to incorporate the arts in their programming. It also primes arts organizations to engage military populations in activities that enhance local communities. The program aims to improve the physical and emotional health and well-being of members of the

military community while increasing their social and community connections, which are vital for countering the opioid crisis.

## Factors Increasing the Risk of Opioid Abuse

### Chronic Pain

- 20.4% (50 million) of U.S. adults experience chronic pain.<sup>xlv</sup>
- 8% (19.6 million) of U.S. adults experience high-impact chronic pain, which disrupts life most days.<sup>xlvi</sup>
- Pain affects more Americans than diabetes, heart disease and cancer combined.<sup>xlvii</sup>

### Economic Distress

- 41% of counties with poverty rates of 20% or higher report above-average drug-overdose death rates, compared to only 13% of counties with poverty rates below 10%.<sup>xlviii</sup>

### Incarceration

- 65% of all incarcerated individuals meet the criteria for substance use disorder.<sup>xlix</sup>
- Within two weeks of release from prison, former inmates are 40 times more likely to die from an opioid overdose than someone not reintegrating into society.<sup>l</sup>
- Use of opioids—which include prescription pain relievers, heroin and synthetic opioids such as fentanyl—is linked with a higher rate of recidivism.<sup>li</sup>

### Mental Illness

- 51.4% of all opioids prescribed in the United States go to the 16% of Americans with a mental health disorder.<sup>lii</sup>
- 18.7% of adults with mental health disorders—compared to 5.0% of those without—are opioid users.<sup>liii</sup>

### Military Service

- 17.8% of veterans with post-traumatic stress syndrome (PTSD) receive an opioid prescription, while only 6.5% without a mental health diagnosis do.<sup>liv</sup>
- Military doctors in 2009 wrote four times the number of opioid prescriptions than in 2001.<sup>lv</sup>
- There is high comorbidity between PTSD and opioid misuse.<sup>lvi</sup>
- Opioid misuse in the military doubled from 2002 to 2005 and nearly tripled from 2005 to 2008.<sup>lvii</sup>

### Rural Communities

- Per capita retail opioid sales are about 50% higher in rural areas than in urban communities.<sup>lviii</sup>
- 56.3% of rural counties lack a certified provider of medication that treats opioid dependency (buprenorphine) compared to just 23.2% of urban counties.<sup>lix</sup>
- 92% of substance use treatment facilities are located in urban areas.<sup>lx</sup>
- 80% of opioid abusers in rural areas do not receive treatment for their addiction.<sup>lxi</sup>
- Rural communities experience a higher rate of drug overdose deaths than urban areas.<sup>lxii</sup>

## TEACHING ARTISTS ([back to TOC](#))

Teaching artist rosters can be leveraged to support arts activities and experiences for people working to overcome opioid misuse. Such activities can take place in health care settings, including hospitals and rehabilitation centers, as well as in museums and other cultural institutions.

- The **Arkansas Arts Council's** [Arts for Lifelong Learning Mini-Grants](#) program awards up to \$1,000 for short-term teaching artist residencies in community based organizations or governmental institutions, including those that frequently encounter the opioid crisis such as hospitals, rehabilitation centers, social service agencies, prisons and detention centers.
- The **New Hampshire State Council on the Arts** maintains an [Arts in Health Artist Directory](#) that is designed to help health care and other treatment providers to locate professional artists who can engage their patients and clients in hands-on arts activities and/or provide related training to their staff. To be eligible for the roster, artists must have experience or training conducive to working in health care settings.
- The **Pennsylvania Council on the Arts**, through its [Long-Term Residency](#) program, has funded a teaching artist residency at a drug-addiction rehabilitation facility.
- The **Rhode Island State Council on the Arts** is developing an [Artists in Healthcare Roster](#) as part of a [statewide arts and health policy initiative](#) that the arts council is leading with the Rhode Island Department of Health. To be included in the roster, teaching artists must demonstrate understanding of and the ability to work in health care environments.

#### Teaching Artists vs. Art Therapists

It is important to equip teaching artists with tools and training attuned to the distinct needs of people addressing their opioid use, which requires different skills than those needed in K-12 instructional settings. Teaching artists, however, are not typically qualified to design and undertake clinical treatment of patients. Clinical treatment is the purview of art therapists, music therapists, and others certified in a creative arts therapy who receive formal training and accreditation to support their practice of incorporating the arts into medical treatment plans.

## PARTNERSHIPS ([back to TOC](#))

To contribute to efforts to address the opioid crisis, state arts agencies may wish to form partnerships with other entities that offer complementary expertise and resources. Potential partners include other state agencies—such as the department of health, the veterans' affairs agency or a public university—as well as hospitals, residential care facilities, outpatient clinics, nonprofit health care organizations and related groups.

- Through the Kansas [Arts in Medicine](#) program, which is a partnership of the **Kansas Creative Arts Industries Commission** and Emporia State University, associations, agencies and organizations that provide medical services can work with the university's art therapy faculty and graduate students to build a program that meets the needs of specified populations, including those affected by the opioid epidemic.
- Since 2016, the **Rhode Island State Council on the Arts** and the Rhode Island Department of Health have led a statewide [arts and health initiative](#) supported by an advisory group including teaching artists, health care practitioners, state agency staff, researchers and other stakeholders. The initiative has funded a museum based pilot to train doctors to reduce bias in emergency-room treatment of people with opioid addiction. In 2019, the initiative released the [Rhode Island State Arts and Health Plan](#)—the first such state plan in the country—which outlines a public-health strategy for fully integrating the arts and arts based therapies into health care and community settings through innovative and sustainable policy, practice and research. The state plan calls for leveraging the arts and arts based therapies to expand the treatment and recovery options available to counter the opioid crisis.

- Indiana University, as part of its three-pronged [Grand Challenges Initiative](#), convened a think tank on combatting the opioid epidemic. The executive director of the **Indiana Arts Commission** served on the interdisciplinary team and engaged colleagues from the hard and social sciences about the efficacy of art therapy, the power of public art and the potential of design thinking to solve community problems.

## Tips for State Arts Agency Programming [\(back to TOC\)](#)

**Identify existing programming that serves at-risk populations**—such as military service members and veterans, rural and economically distressed communities, and people reentering society after incarceration—and consider whether those vehicles are equipped to appropriately address addiction.

**Expand eligibility criteria for other existing resources and services**—such as project grants, teaching artist programs and technical assistance—so health care providers and arts groups addressing the opioid crisis can access them.

**Partner with state agencies**—such as departments of health, corrections or veterans affairs—as well as with foundations and nonprofit organizations to amplify the expertise or funding available to support arts and addiction programs.

**Foreground cultural awareness** when supporting an arts and addiction program, especially when working with a community with specific cultural traditions.

**Disseminate knowledge and best practices** about leveraging the arts to address the opioid epidemic, including what is available from academic research, firsthand experiences and anecdotal reporting.

**Respect and ensure the safety of participants.** Patient and client privacy and dignity is important as is compliance with treatment and health care facility safety regulations, which may limit the use of certain art materials or forms.

**Establish a constructive narrative about addiction and recovery.** Opioid abuse and addiction, while harmful and disruptive, are issues of public health and can be discussed in terms of prevention and recovery instead of crime and punishment.

## Recommended Resources [\(back to TOC\)](#)

### NATIONAL SERVICE ORGANIZATIONS, PROGRAMS AND TOOLKITS [\(back to TOC\)](#)

- [American Art Therapy Association](#)
- [American Dance Therapy Association](#)
- [American Music Therapy Association](#)
- [American Society for Group Psychotherapy and Psychodrama](#)
- [Arts in Healthcare for Rural Communities Toolkit](#)

- [International Expressive Arts Therapy Association](#)
- [National Association for Poetry Therapy](#)
- [National Coalition of Creative Arts Therapies Associations](#)
- [National Initiative for Arts & Health in the Military](#)
- [National Organization for Arts in Health](#)
- [North American Drama Therapy Association](#)

## **RELATED RESEARCH** ([back to TOC](#))

- [The Art of Analgesia: A Pilot Study of Art Museum Tours to Decrease Pain and Social Disconnection Among Individuals with Chronic Pain](#), Pain Medicine, 2018
- [Art Therapy for Chronic Pain: Applications and Future Directions](#), Canadian Journal of Counselling and Psychotherapy, Vol. 45, No. 2, 2011
- [Art Therapy and the Recovery Process: A Literature Review](#), Michelle Sharp, 2018
- [Art Therapy Improves Mood, and Reduces Pain and Anxiety When Offered at Bedside During Acute Hospital Treatment](#), The Arts in Psychotherapy, Vol. 57, 2018
- [Complementary Therapy for Addiction: "Drumming Out Drugs,"](#) American Journal of Public Health, Vol. 93, No. 4, 2003
- [Culturally Sensitive Substance Use Treatment for Racial/Ethnic Minority Youth: A Meta-Analytic Review](#), Journal of Substance Abuse Treatment, Vol. 75, 2017
- [Drama Therapy with Addictions Populations](#), North American Drama Therapy Association
- [Experiential Addiction Treatment: Creating Positive Connection through Sociometry and Therapeutic Spiral Model Safety Structures](#), Journal of Addiction & Addictive Disorders, Vol. 5, No. 17, 2018
- [Impact of Music-Therapy on Reducing Anxiety, Depression and Stress in Narcotics Addicts](#), International Research Journal of Applied and Basic Sciences, Vol. 8, No. 2, 2014
- [Music Therapy and Music-Based Interventions in the Treatment and Management of Pain](#), American Music Therapy Association
- [Opioid Crisis: Recommendations for Creating a Culturally Sensitive System of Care](#), U.S. Department of Health and Human Services, Advisory Committee on Minority Health, 2018
- [A Treatment Improvement Protocol: Improving Cultural Competence](#), U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, 2014
- [The Use of Art and Music Therapy in Substance Abuse Treatment Programs](#), Journal of Addictions Nursing, 2014

## For More Information [\(back to TOC\)](#)

For more information, contact NASAA Research Manager [Paul Pietsch](#), who researched and wrote this strategy sampler in 2019.

The National Assembly of State Arts Agencies (NASAA) is the nonpartisan membership organization that serves the nation's state and jurisdictional arts agencies. NASAA helps state arts agencies fulfill their many citizen service roles by providing knowledge services, representation and leadership programs that strengthen the state arts agency community. NASAA also serves as a clearinghouse for data and research about public funding and the arts. For more information on the work of state arts agencies, call 202-347-6352 or visit [nasaa-arts.org](http://nasaa-arts.org).

## Citations [\(back to TOC\)](#)

- i [How Good Intentions Contributed to Bad Outcomes: The Opioid Crisis](#), Mayo Clinic Proceedings, Vol. 93, No. 3, March 2018, p. 344.
- ii National Institute on Drug Abuse, [Treatment Approaches for Drug Addiction](#), 2019, pp. 2-5.
- iii Americans for the Arts, [National Arts Policy Roundtable 2013 Report and Recommendations: Arts and Healing: Body, Mind and Community](#), 2013, p. 5.
- iv [The Use of Art and Music Therapy in Substance Abuse Treatment Programs](#), Journal of Addictions Nursing, 2014, pp. 3 and 4.
- v [Beyond Supply: How We Must Tackle the Opioid Epidemic](#), Mayo Clinic Proceedings, Vol. 93, No. 3, March 2018, p. 269.
- vi Mayo Clinic, [How Opioid Addiction Occurs](#), accessed 1/10/2019.
- vii [Opioid Crisis: No Easy Fix to Its Social and Economic Determinants](#), American Journal of Public Health, Vol. 108, No. 2, February 2018, p. 182.
- viii Centers for Disease Control and Prevention, [Opioid Overdose: Commonly Used Terms](#), accessed 1/16/2019.
- ix In 1980, the *New England Journal of Medicine* published a letter to the editor citing evidence that opioids could safely be used to treat pain. Subsequently, this letter was referenced more than 600 times in support of using opioids for treating chronic pain. To learn more about the evolution of medical opinion about the use of opioids, see [How Good Intentions Contributed to Bad Outcomes: The Opioid Crisis](#), Mayo Clinic Proceedings, Vol. 93, No. 3, March 2018, pp. 345-46. Regarding the history of treating chronic pain, see [Opioids and the Treatment of Chronic Pain: Controversies, Current Status, and Future Directions](#), Experimental and Clinical Psychopharmacology, Vol. 16, No. 5, October 2008, p. 3.
- x National Institute on Drug Abuse, [Opioid Overdose Crisis: Revised January 2019](#), accessed 1/8/2019; [How Good Intentions Contributed to Bad Outcomes: The Opioid Crisis](#), Mayo Clinic Proceedings, Vol. 93, No. 3, March 2018, p. 346; [Beyond Supply: How We Must Tackle the Opioid Epidemic](#), Mayo Clinic Proceedings, Vol. 93, No. 3, March 2018, p. 269.
- xi [How Good Intentions Contributed to Bad Outcomes: The Opioid Crisis](#), Mayo Clinic Proceedings, Volume 93, Number 3, March 2018, p. 346. (Vital signs—which include body temperature, blood pressure, pulse rate and respiration rate—are measurements of the body's basic functions. In 2000, the U.S. Veterans Health Administration published a [paper](#) promoting pain as the fifth vital sign, a notion that was endorsed by the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) through a set of pain management standards it issued in 2001. Responding to concerns about the rising use of opioids, JCAHO began in 2002 to phase out the idea of pain as the fifth vital sign. Not until 2004, however, did JCAHO remove the fifth vital sign from its Accreditation Standards. To learn more about the history of the fifth vital sign, see The Joint Commission, [The Joint Commission's Pain Standards: Origins and Evolution](#), 2017.)
- xii [How Good Intentions Contributed to Bad Outcomes: The Opioid Crisis](#), Mayo Clinic Proceedings, Vol. 93, No. 3, March 2018, pp. 346-347.
- xiii [How Good Intentions Contributed to Bad Outcomes: The Opioid Crisis](#), Mayo Clinic Proceedings, Vol. 93, No. 3, March 2018, p. 347.

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- xiv [How Good Intentions Contributed to Bad Outcomes: The Opioid Crisis](#), Mayo Clinic Proceedings, Vol. 93, No. 3, March 2018, p. 346; [Prescription Opioid Use Among U.S. Adults: Our Brave New World](#), Annals of Internal Medicine, Vol. 167, No. 5, 2017, abstract.
- xv [Prescription Opioid Use Among U.S. Adults: Our Brave New World](#), Annals of Internal Medicine, Vol. 167, No. 5, 2017, abstract; National Institute on Drug Abuse, [Opioid Overdose Crisis: Revised January 2019](#), accessed 1/8/2019.
- xvi Centers for Disease Control and Prevention, [Opioid Overdose: Understanding the Epidemic](#), accessed 1/16/2019.
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