Opioids are a class of drugs that act in the nervous system to produce feelings of pleasure and pain relief. They can be generally classified into three categories:

### Prescription Opioids

These can be prescribed by doctors to treat moderate to severe pain, but can have serious risks and side effects.

Common types are: oxycodone (OxyContin), hydrocodone (Vicodin), morphine, and methadone.

### Fentanyl

Fentanyl is a synthetic opioid pain reliever. It is many times more powerful than other opioids and is approved for treating severe pain, typically advanced cancer pain.

The illegal manufacture and distribution of fentanyl has been on the rise in several states.

### Heroin

Heroin is an illegal opioid. Heroin use has increased across the United States among men and women, most age groups, and all income levels.

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**Addiction** (termed “substance dependence” by the American Psychiatric Association) is defined as a brain disease that leads to compulsive substance use despite harmful consequences.

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### Opioids and Georgia’s Children

Opioid misuse and addiction can negatively impact childrens’ and adolescents’ lives in multiple ways. Parental misuse, during pregnancy or otherwise, can lead to unintended consequences for their children, including health challenges at birth, inadequate supervision, or other experiences which could negatively affect a child’s short- or long-term wellbeing. Youth opioid misuse may result in addiction, potentially impacting a child’s academic performance, brain development, or life span.

#### Impact of Parental Misuse

Neonatal Abstinence Syndrome (NAS) is a set of clinical withdrawal signs and symptoms present in a newborn infant that results from the abrupt discontinuation of chronic fetal exposure to illegal or prescription drugs that were used or abused by the mother during pregnancy.

- **762** confirmed cases of NAS in Georgia in 2017, and **20%** were attributed to opioids
- **More than 1 in 3** infants with NAS were born to mothers 25-29 years of age
- **41.5%** of children who entered foster care from July 2022 to June 2023 did so due to parental substance abuse

#### Misuse Among Georgia’s Youth

During the 2022-2023 school year, among middle and high school students:

- Nearly **15,500 students** reported taking a prescription drug painkiller than was not prescribed for them within the last 30 days
- Approximately **9,500 students** reported using heroin within the last 30 days

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From 2019 to 2021, Georgia saw:

- a **236% increase** in opioid overdose deaths
- a **800% increase** in overdoses involving fentanyl
- Fentanyl overdoses rise to **78% for adolescents**, compared to 53% for adults

In 2021, **80%** of all overdose deaths among adolescents involved opioids.

Opioid-involved overdoses accounted for **7,954** emergency department visits and **2,822** hospitalizations.

**Select Examples of Georgia’s Response**

- Pharmacists across the state are allowed to dispense naloxone/Narcan, an opioid overdose reversal drug (effective in 2017).
- The Opioid and Substance Misuse Unit is implementing a sustainable, collaborative, and multi-disciplinary approach, by forming eight workgroups and one supporting committee on Multicultural Inclusion; Prevention Education; Maternal Substance Use; Data and Surveillance, Prescription Drug Monitoring Program, Treatment and Recovery; and Control and Enforcement; Harm Reduction and Hospice. Each workgroup outlined strategic next steps for the state.
- The Criminal Justice Coordinating Council (CJCC) received funding from the Office of Juvenile Justice and Delinquency Prevention (OJJDP) to create the Georgia Opioid Affected Youth Initiative competitive grant opportunity that supports strengthening opioid misuse and overdose data collection, overdose prevention training, treatment and recovery services, and more.
- Secured $636 million from the multi-state opioid settlement with three major pharmaceutical distributors to strengthen state and local prevention efforts.

**Recommendations**

- Increase state funding for treatment and prevention efforts, including youth-focused opioid misuse awareness campaigns and evidence-based positive youth development and resilience programs (e.g., Strengthening Families, Prevention Clubhouses).
- Ensure annual collection and reporting of opioid-related data, including NAS/Neonatal Opioid Withdrawal Syndrome (NOWS), youth misuse, and fatal and non-fatal overdoses.
- Encourage naloxone (Narcan) availability within schools, afterschool sites, community programs, and similar settings serving children and adolescents.
- Leverage internet-based learning networks (e.g., Maternal Health ECHO) to provide healthcare providers consultation, training, and collaboration opportunities for treating NAS/NOWS, pregnant women with opioid misuse challenges, and to increase awareness of family-centered treatment and recovery support services.
- School Districts: Allocate a portion of opioid settlement funding to train teachers, school nurses, and counselors to increase identification of youth opioid misuse and improve access to services and supports.
References for Opioid Misuse in Georgia


6 Ibid.
9 Ibid.
11 Ibid.