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The purpose of this senior thesis was to analyze the barriers that prevent access to treatment for prescription opioid abuse in Vermont and what kinds of policies can minimize these barriers. Prescription opioids are painkillers that can be as dangerous and addictive as illegal drugs and according to a 2010 Vermont Control Update, opioids including prescription drugs were the most common reason for admission to a drug treatment facility in Vermont (ONDCP, 2010). Recent literature indicates that prescription opioid abuse may be a particularly severe problem in rural areas, signifying both that geographic differences play an important role in access and additionally that Vermont may face unique barriers as a largely rural state. To analyze access to prescription opioid treatment in Vermont, two research methods were used: semi structured interviews with physicians and professionals, and spatial analysis with Geographic Information Systems. By combining these qualitative and quantitative data it was determined that there are socio-economic, socio-cultural, and geographic barriers in access that vary throughout different parts of the state. Vermont has also made unique strides in approaching this problem, including an important initiative called the hub and spoke system. The results of this study are valuable in that they can be used by the Department of Vermont Health Access to better plan improving access to opioid addiction treatment in Vermont.