

# The Opioid Epidemic

**October 18, 2018**

*Organized by the Federal Reserve Bank of Cleveland*

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- Call-in number: 888-625-5230
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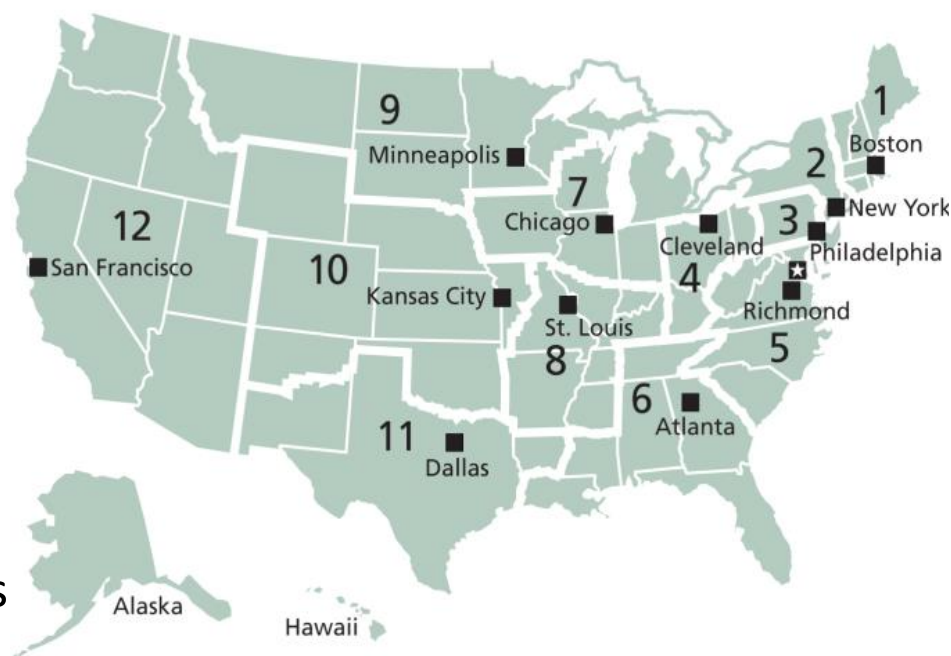
In connection with this session, you can find a variety of additional resources on this topic, available at [www.fedcommunities.org](http://www.fedcommunities.org). We encourage you to browse through this site and to contact your regional office if you would like additional information on any of these items.

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# Community Development

- The Community Development function within the Federal Reserve System—consisting of individual departments at each of the 12 Federal Reserve Banks, as well as at the Board of Governors—promotes economic growth and financial stability for low- and moderate-income (LMI) communities and individuals through a range of activities, including:
  - **Convening stakeholders**, including practitioners, financial institutions, nonprofits, governmental agencies, and the philanthropic and private sectors
  - **Conducting and sharing research** to examine economic challenges facing LMI communities and attendant policy implications
  - **Identifying emerging issues**



# Today's Presenters and Agenda

- Jeanne Milliken Bonds, Federal Reserve Bank of Richmond
- Kyle Fee, Federal Reserve Bank of Cleveland
- Anita Brown-Graham, ncIMPACT at the UNC School of Government
- Barbara Marsh, Public Health – Dayton and Montgomery County, Ohio

# What Will We Discuss Today?

- What characterizes this “crisis”?
- What is the basis of the Fed’s interest in a health issue like the opioid epidemic?
- What do we know about the connection between labor markets and opioid use?
- How can we:
  - Mobilize ideas
  - Develop networks
  - Create approaches

# Polling Question

What is your interest in the opioid issue?

1. Health Outcomes
2. Impact on the Community
3. Treatment/Rehabilitation
4. Policy/Research
5. Program Investments

# The Opioid Epidemic

**Jeanne Milliken Bonds**

**Federal Reserve Bank of Richmond**

**[Jeanne.Bonds@rich.frb.org](mailto:Jeanne.Bonds@rich.frb.org)**





# The Scope ... Based on Media Coverage

Trump hasn't formally declared the opioid epidemic a national emergency, and lawmakers want to know why

Drug overdoses driven by opioids are a leading killer in Virginia

The Cost of the Opioid Crisis

The New Yorker · 11 Sep 2017

County's opioid forum hears the gruesome statistics

Americans are hoarding a 'massive' black market supply of opioids

Americans are hoarding a 'massive' black market supply of opioids

State of Addiction special will detail opioid epidemic

Opinions

The media gets the opioid crisis wrong. Here is the truth.

It's time for new approaches to the opioid and heroin crisis

BY SEAN PATRICK MALONEY (D-N.Y.), OPINION CONTRIBUTOR — 09/13/17 06:00 AM EDT  
THE VIEWS EXPRESSED BY CONTRIBUTORS ARE THEIR OWN AND NOT THE VIEW OF THE HILL

21 COMMENT

Illinois vs. the opioid epidemic

Enriching Lawyers Is Not the Solution to the Opioid Crisis

Wonkblog · Analysis

The federal government is systematically undercounting heroin users

Cherry Hill mom: Daughter's opioid death was caused by 'corporate greed'

Philly.com · 12 Sep 2017

It's a nationwide opioid epidemic: Do you know what's in your pill cabinet?

Drug companies want to dismiss Ohio's lawsuit over opioid epidemic

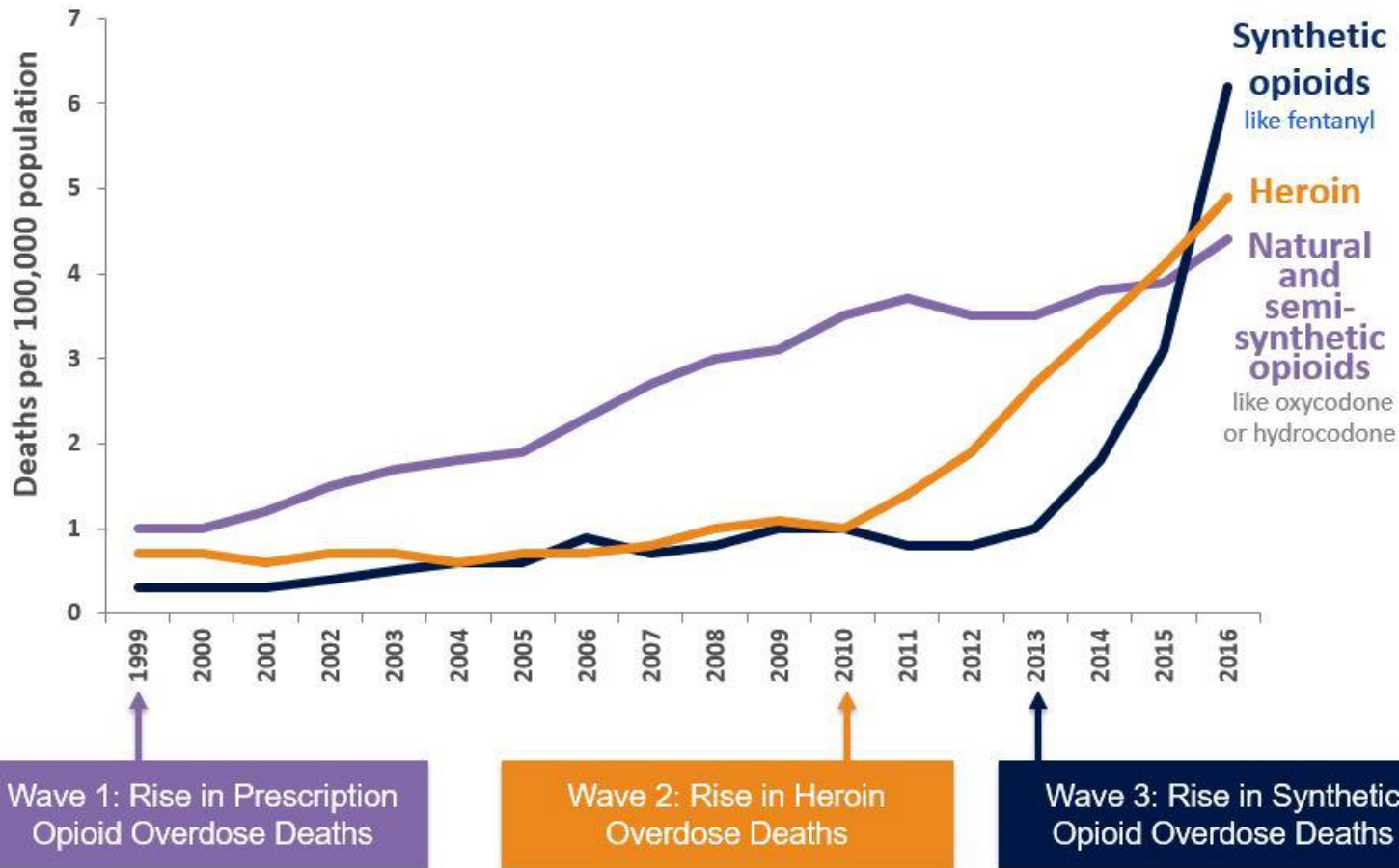
Pain patients caught in the opioid epidemic

THE HILL

# Takeaways

- Although prescribing rates have come down, opioid overdose deaths continue to rise as the problem evolves.
- West Virginia is one of the hardest hit states in the country, but many states across the nation struggle with rising overdose rates.
- The evidence thus far suggests some correlational but perhaps not a causal, relationship between labor market outcomes (such as employment-population ratios and unemployment rates) and opioid use.
- However, the data is not perfect, and much of the literature is preliminary. Researchers across disciplines continue to work to understand the effect of opioids.

# Three Waves of the Rise in Opioid Overdose Deaths



SOURCE: National Vital Statistics System Mortality File.

# Why Is the Fed Paying Attention?

- **Some comments from employers:**
  - “We lose 30 percent of applicants due to drug test failure.”
  - “People come in to apply for jobs, but when they find out we require a drug test, they ‘forget something in their car’ and never come back.”
  - “Drug problems are holding down labor force participation in West Virginia—it seems like the men, at least, are all either disabled or on drugs.”
- **According to the American Action Forum (among other news outlets):**
  - In 2015, 919,400 prime-age individuals were not in the labor force due to opioids.
  - Between 1999–2015, the decline in labor force participation cumulatively cost the economy 12.1 billion work hours.
  - During that period, the reduction in work hours slowed the real annual economic growth rate by 0.2 percentage points, cumulatively costing \$702.1 billion in real output.

# What We Know About Healthy Communities

- There is a relationship between the health and resilience of a country's economy and the health and resilience of a country's people and communities.
- Zip codes can be powerful predictors of the future—health, education, longevity, and economic mobility.
- Social determinants of health are conditions in which people are born, grow, work, live, and age, and the forces and systems that shape the conditions of daily life, including economic policies and systems, social norms, and social policies.

<https://vimeo.com/273387562/1be09893b8>



# Resources

- [The Opioid Epidemic, the Fifth District, and the Labor Force](#)
- [Economic Aspects of the Opioid Crisis](#)
- [The Economic Effects of the Opioid Crisis](#)
- [The Opioid Epidemic in the Fifth District](#)
- [The Opioid Epidemic](#)
- [Focus on ... the Opioid Epidemic](#)
- [Understanding the Opioid Epidemic in Our Communities](#)

# Opioids and the Labor Market

**Kyle Fee**

**Federal Reserve Bank of Cleveland**

**[Kyle.D.Fee@clev.frb.org](mailto:Kyle.D.Fee@clev.frb.org)**



# Connections Between the Opioid Crisis and the Labor Market

- Evidence that poor labor market prospects causes opioid abuse:
  - “Deaths of despair” (Case & Deaton, 2015)
- Evidence that opioid availability causes poor labor market outcomes:
  - Labor force participation is lower in counties with higher opioid Rx rates, even after accounting for economic conditions. (Krueger, 2018; Ruhm, 2018)

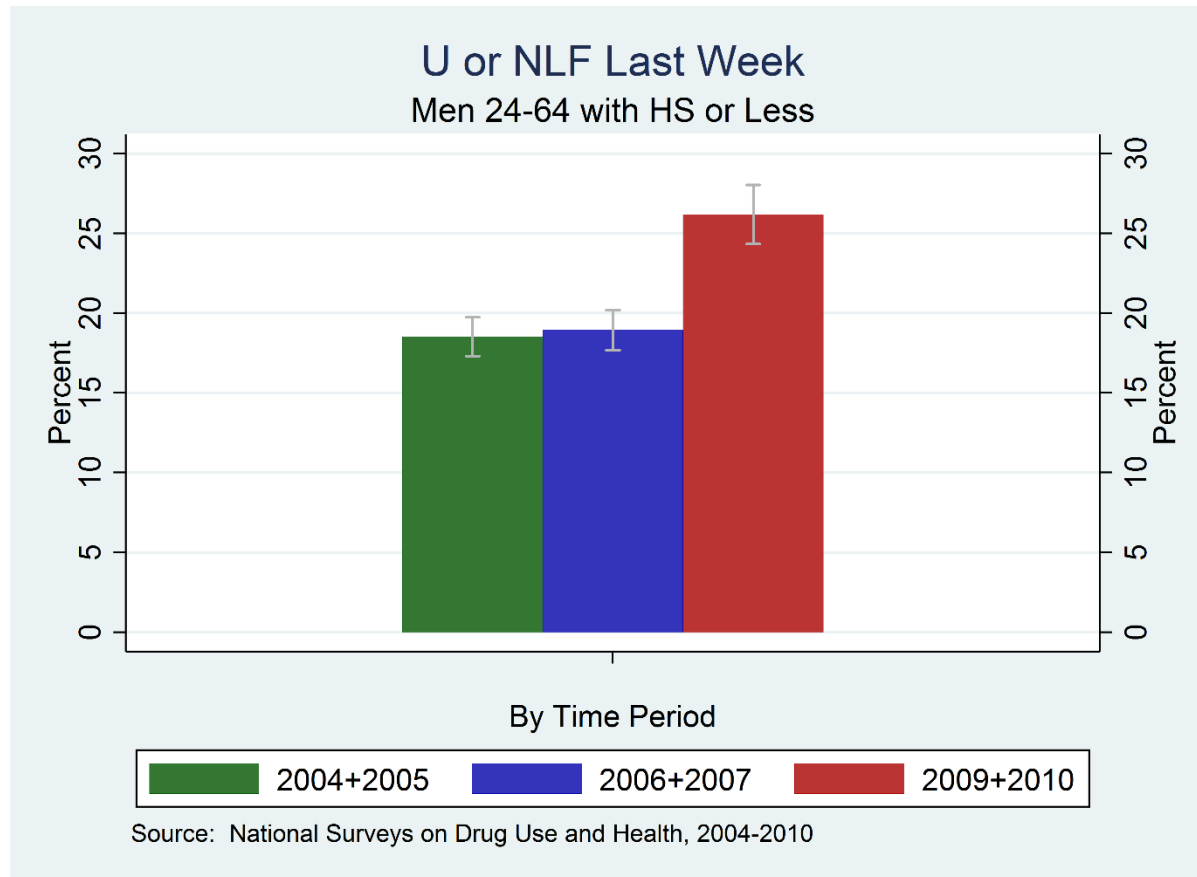
**We ask two questions ...**



# Did the Great Recession Increase Opioid Use?

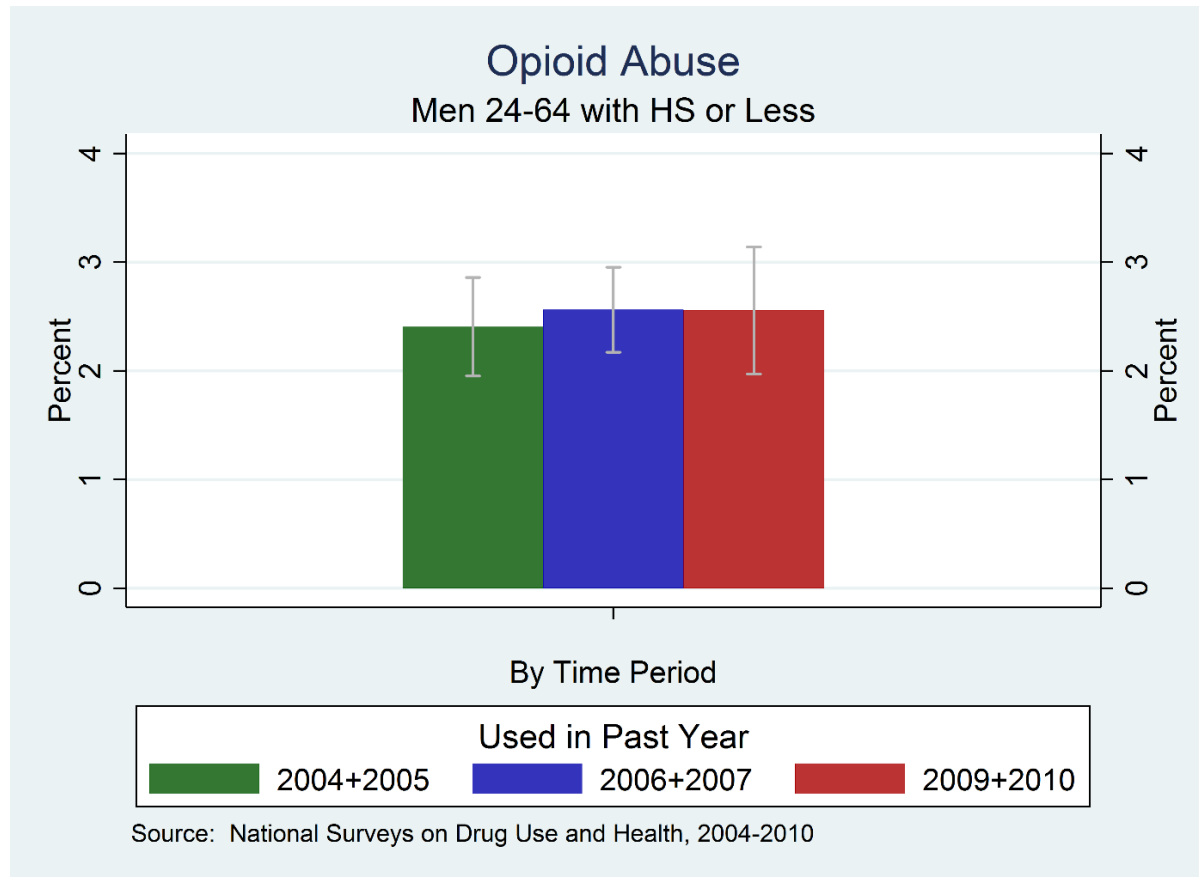
- The Great Recession was a major shock to the labor market.
- If the labor market drives opioid use, we should see an increase in use whose timing coincides with the Great Recession.
- We use individual-level data from a national survey focused on drug abuse.
  - The National Survey on Drug Use and Health (NSDUH)

# The Great Recession Increased Joblessness



Source: NSDUH

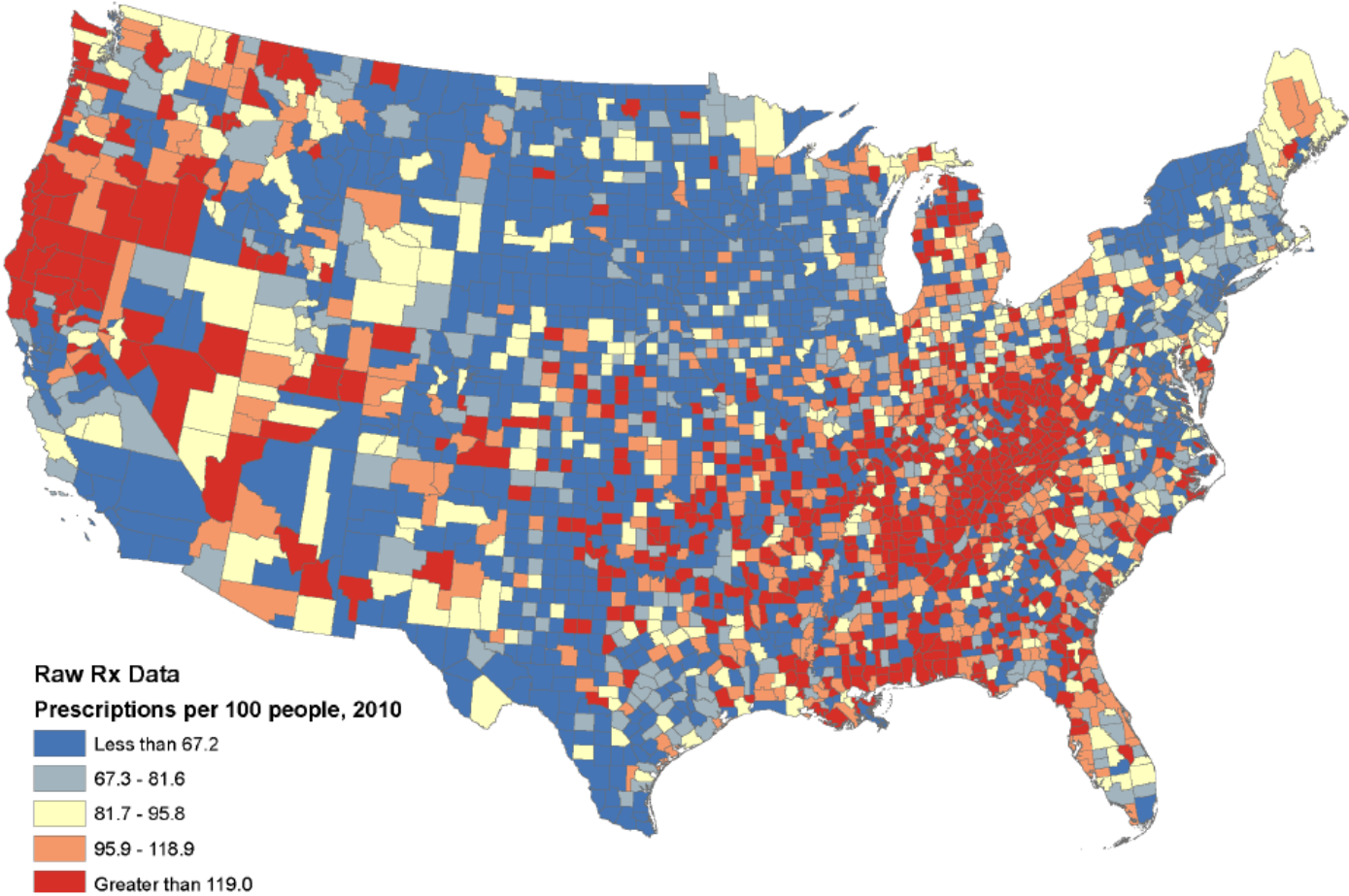
# The Great Recession Did Not Increase Opioid Abuse



Source: NSDUH

# Does Opioid Availability Impact Labor Market Outcomes?

# Opioid Prescription Rates Vary Across Counties



Source: Centers for Disease Control (CDC)

# Opioid Availability Is Correlated with Lower Employment Rates

Moving from a low-Rx to a high-Rx county:

Is a change from  $\approx 60$  Rx's per 100 people to  $\approx 120$  Rx's

	Men Participate	Men Emp/Pop	Men Unem/Pop	Women Participate	Women Emp/Pop	Women Unem/Pop
Lagged Prescrip.	-0.046*** (0.006)	-0.049*** (0.007)	0.004* (0.002)	-0.014** (0.005)	-0.015** (0.005)	0.001 (0.001)
R <sup>2</sup>	0.09	0.11	0.02	0.06	0.06	0.02
N	5,835,200	5,835,200	5,835,200	6,021,178	6,021,178	6,021,178

All regressions include year and Census division fixed effects.  
Robust standard errors with clustering on geographic units.

\*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$

# Opioid Availability Is Correlated with Lower Employment Rates (continued)

Prime Age Men by Race/Ethnicity and Education				
	White	White	Nonwhite	Nonwhite
	HS or less	More than HS	HS or less	More than HS
Lagged Prescrip.	-0.074*** (0.007)	-0.019*** (0.003)	-0.097*** (0.013)	-0.041*** (0.005)
R <sup>2</sup>	0.07	0.03	0.11	0.04
N	2,053,403	2,418,539	735,239	628,019

All regressions include full set of controls with year and Census division fixed effects.  
Robust standard errors with clustering on geographic units.

\*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$

# Resources

- [The Opioid Epidemic and Its Effects: A Perspective on What We Know from the Federal Reserve Bank of Cleveland](#)
- [Opioids and the Labor Market](#)



# North Carolina Communities

**Anita Brown-Graham**  
ncIMPACT at the UNC School of Government  
[bgraham@sog.unc.edu](mailto:bgraham@sog.unc.edu)



# The Opioid Response Project

A Partnership between the UNC School of Government and BlueCross BlueShield of North Carolina



# The Vision

- Seeks to build a collective impact model
- Intensive two-year collaborative learning model that includes peer-learning forums and monthly meetings
- Multifaceted approach inspired by “Confronting a Crisis: A Practical Guide for Policy Makers to Mitigate the Opioid Epidemic” from Governing Institute

# Project Structure

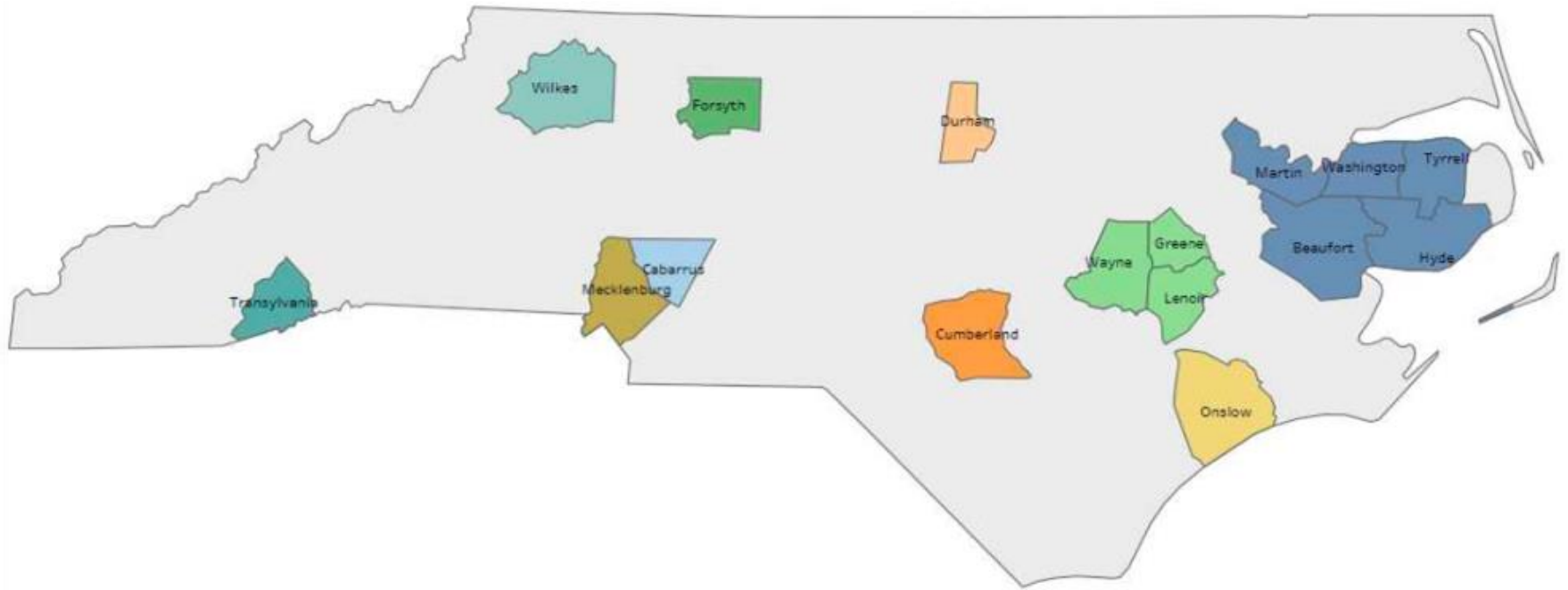
- Access to UNC School of Government resources for consultation and facilitated discussions
- \$10,000 to hire a program manager
- Connections to subject matter experts and technical resources
- Access to each other virtually and physically



# Outcomes

- Ten communities implementing high-impact practices and programs in North Carolina
- A set of model practices and programs that can be shared with communities throughout the state

# North Carolina Communities Participating in the Project



# Varying Stress Points of Participating Communities

Continuum of Care  
Gaps

Destabilized Workforce

Health  
Consequences



Stigma Effects

Impacts on Children

Justice Reform Needs

Taxpayer Burden

Inadequate Resources/  
Utilization of Resources

Lack of  
Awareness/Understanding

# Focusing on Workforce Effects, Nationally

**10** billion dollars

**2x** cost in health care expenses

**29%** of employers reported impaired job performance  
of employers cited injury or near miss attributed to

**15%** drugs

From Cast Light Health (2016) and [Bloomberg](#) - Opioids on the Job Are Overwhelming American Employers (2017)



# Focusing on Workforce Effects, Nationally (continued)

- Impacts:
  - Understaffed and overworked employees
  - Difficult to hire entry-level jobs; offering salary and benefits are not enough
  - Highest costs in construction and manufacturing industries



# Focusing on Workforce Effects, Nationally (continued)

**AGE:** Baby boomers are **four times more likely** to abuse opioids than millennials.

**INCOME:** Individuals living in America's lowest income areas are **twice as likely** to abuse opioids as those living in the highest income areas.

**MEDICAL MARIJUANA:** States with medical marijuana laws have a **lower** opioid abuse rate than those that do not.

**BEHAVIORAL HEALTH:** Patients with a behavioral health diagnosis of any kind are **three times more likely** to abuse opioids than those without one.

**GEOGRAPHY:** Opioids abusers are more likely to live in the **rural South** than in other regions.

**PAIN:** Opioids abusers have **twice as many** pain-related conditions as non-abusers.

# Community Overdose Action Team

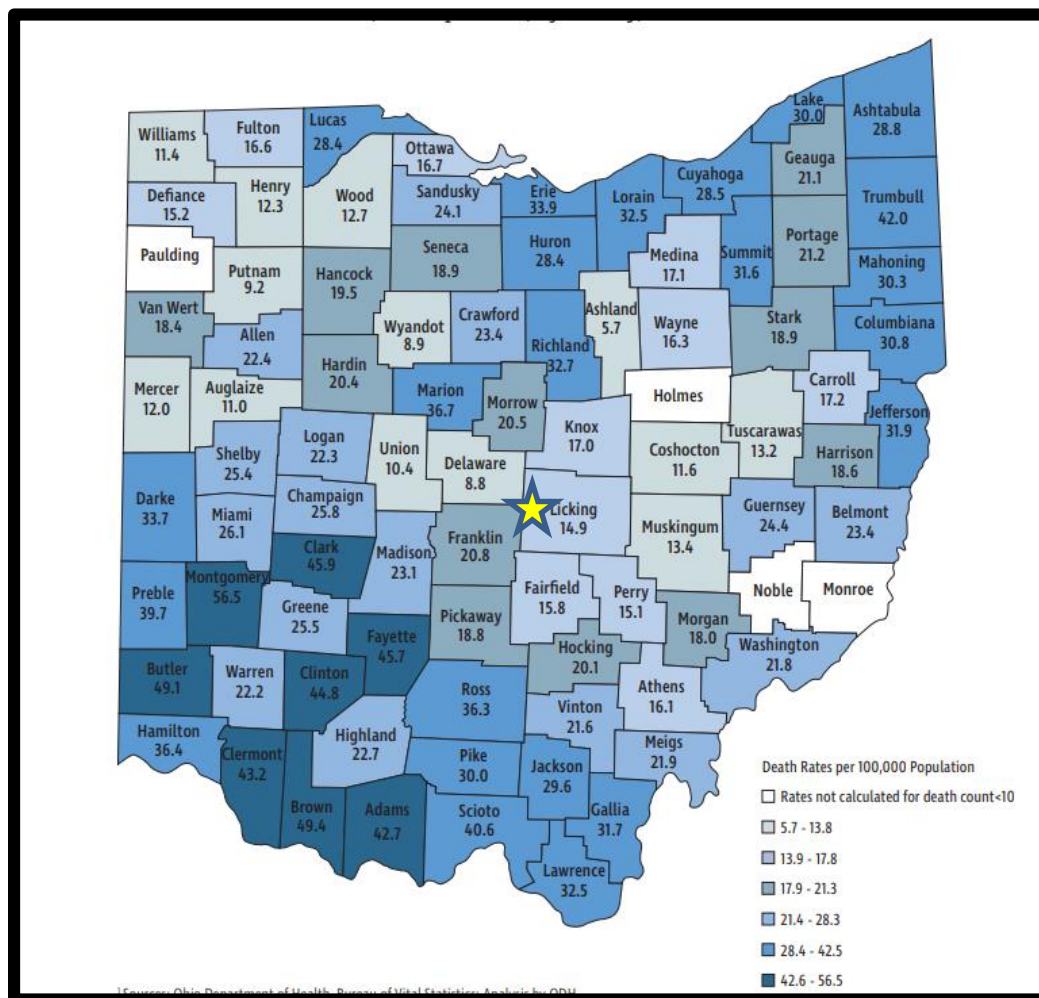
**Barbara Marsh. MSW, LISW-S, LICDC-CS**

Public Health – Dayton and Montgomery County, Ohio

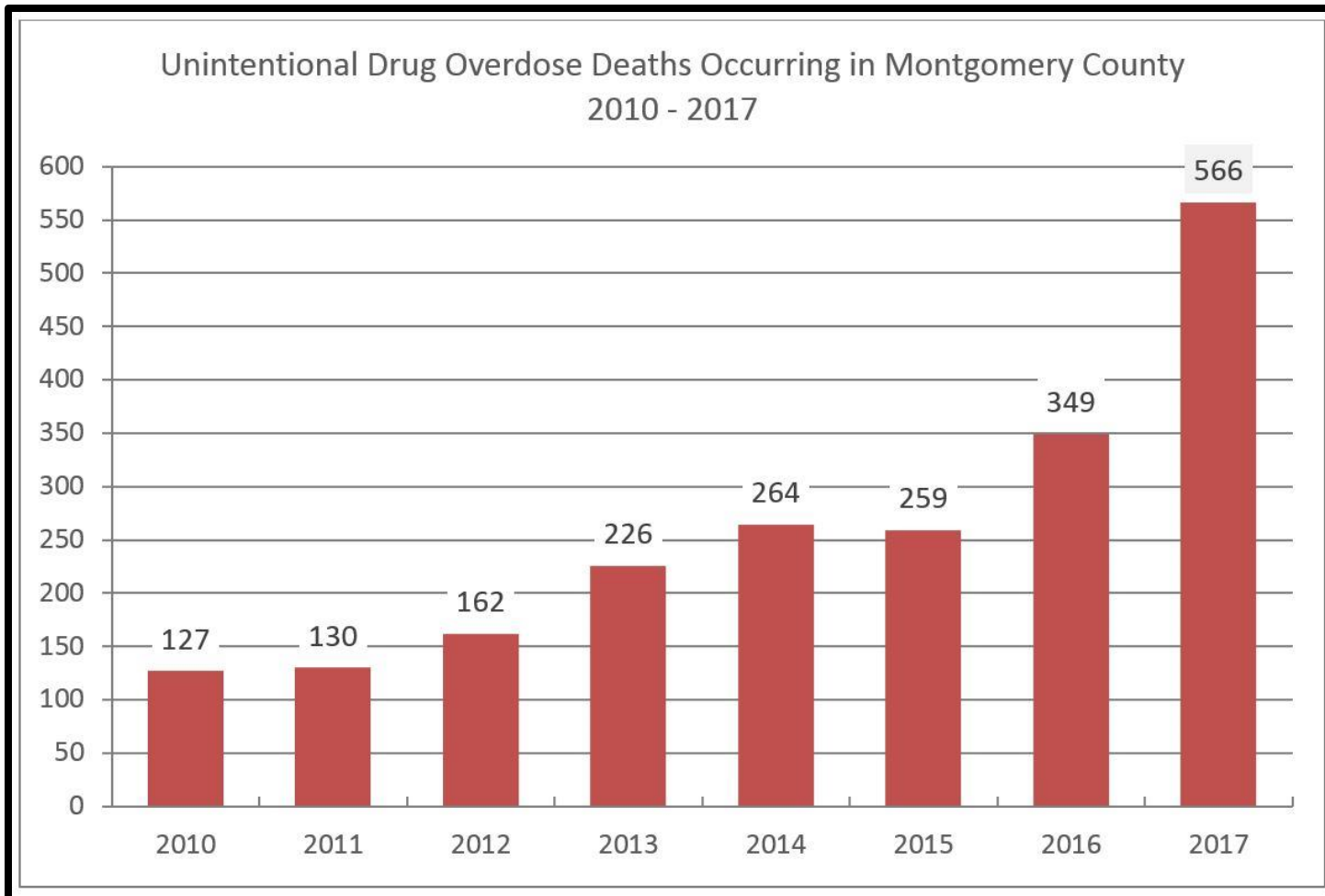
[BMarsh@phdmc.org](mailto:BMarsh@phdmc.org)



# Ohio Overdose Death Rate 2017

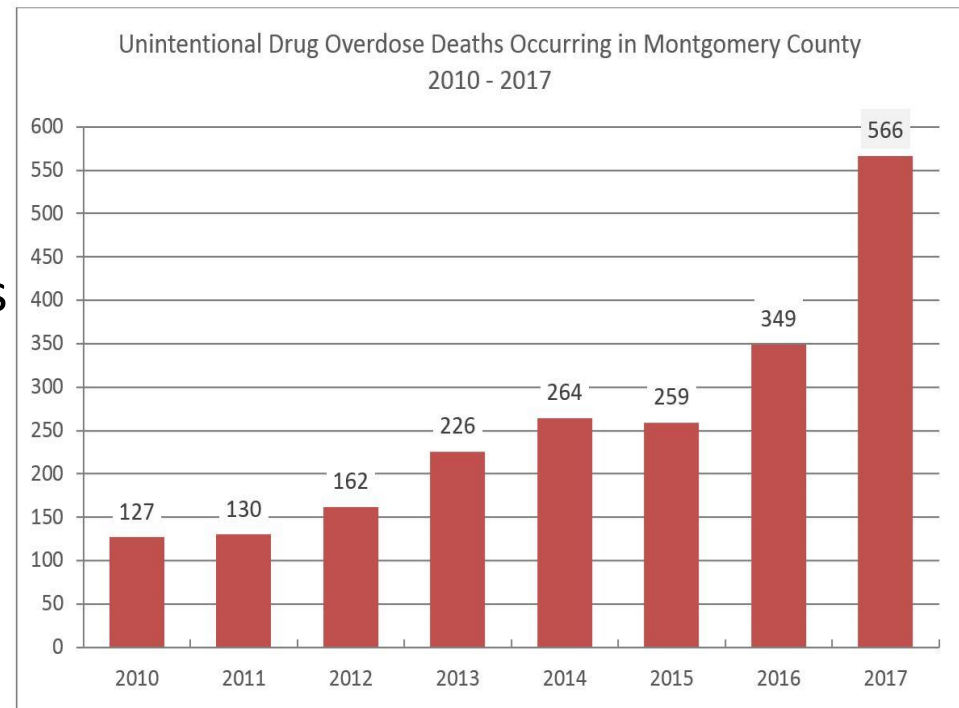


# Unintentional Drug Overdose Deaths Montgomery County, Ohio



# Partnership

- Many centers of excellence exist in the community, BUT they were struggling to align county-wide efforts to change the trend.
  - 4 coalitions
  - 3 hospital systems
  - 30+ treatment providers
  - Recovery support providers
  - Prevention providers
  - Business partners
  - Other community agencies
  - Harm reduction providers  
syringe exchange, Project DAWN program, Law Enforcement naloxone repository



# What Led to the Development of the Community Overdose Action Team

In late summer of 2016, Montgomery County commissioners approached ADAMHS and Public Health to create and lead a unified county-wide response to organize system partners.



*Community-Wide Collaborative Approach*



**Community Overdose Action Team**  
*Working Together To Combat Opioid Overdoses*



# Goal

**Reduce the number of fatal overdoses**

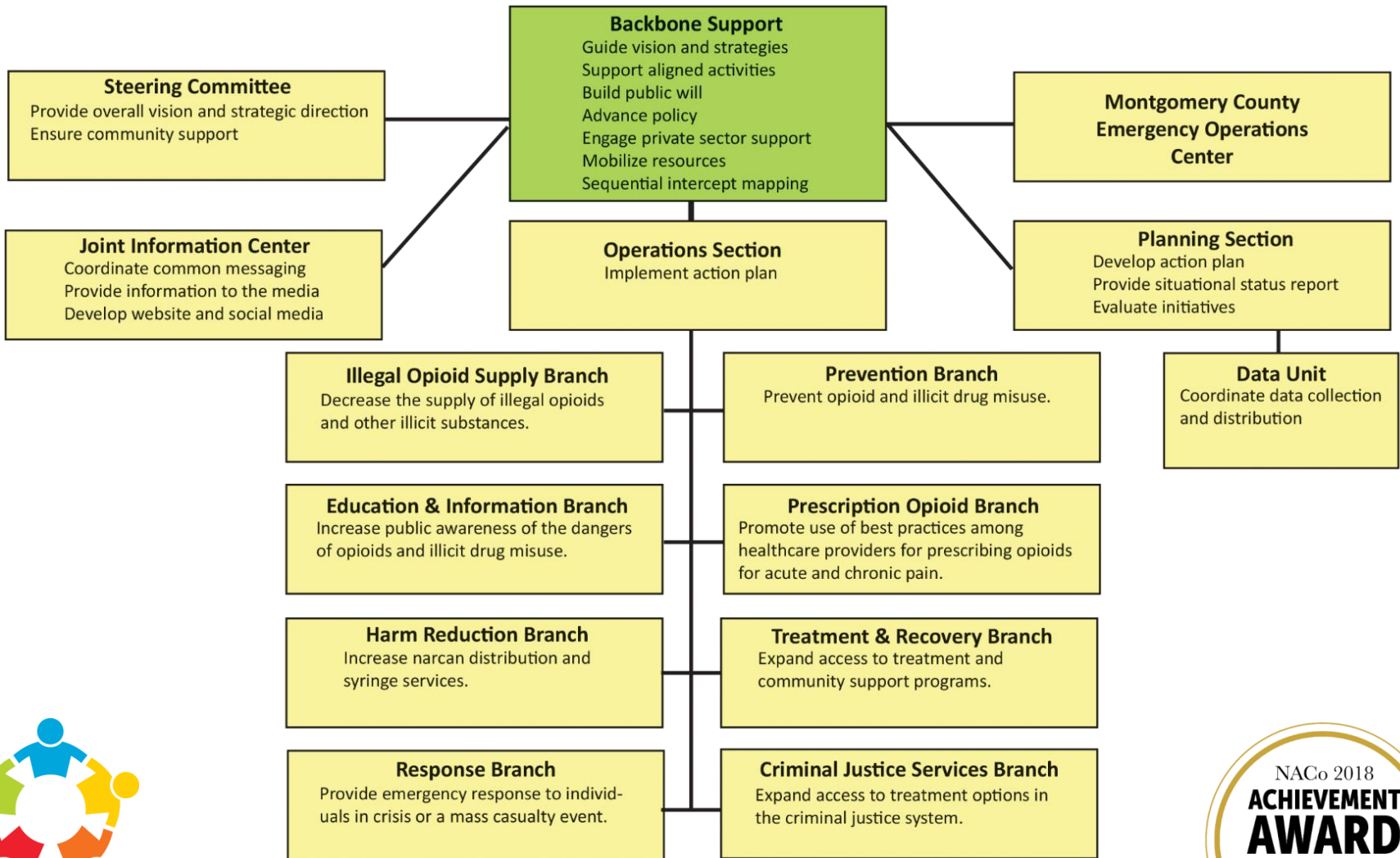
# Response

**Incident Command System**



**Community Overdose Action Team**  
*Working Together To Combat Opioid Overdoses*





**Community Overdose  
Action Team**



# Incident Action Plan

## Community Overdose Action Team (COAT)

Operational Period: April 1, 2018 to April 30, 2018



**Community Overdose Action Team**  
*Working Together To Combat Opioid Overdoses*

*Our goals are to stabilize the number of people dying from drug overdoses; then reduce the number of fatal overdoses.*

Incident Action Plan (IAP)

Community Overdose Action Team

Montgomery County

## Situational Status Report

### Community Overdose Action Team (COAT)

#### 1. Situation to date

- Per the Montgomery County Coroner's Office, there were 566 accidental overdose deaths for calendar year 2017.
- Per the Montgomery County Coroner's Office, there have been 66 accidental overdose deaths as of April 5, 2018.
- Emergency Determination for the opioid crisis has put together a plan that includes cutting opioids by 1/3 in the next three years. This includes the expansion of treatment and recovery, support services, and decreasing the supply of illicit drugs.
- The annual COAT Progress report was disseminated on April 5, 2018.
- The Data Unit 2017 data was disseminated on April 5, 2018.
- National Association of City and County Officials (NACCHO) is providing training in Academic Detailing to individuals from Public Health and Cedarville School of Pharmacy on April 3, 4 and 5, 2018. The mobile syringe unit will be available for use starting this month (April 2018).
- Monthly Media Briefings are scheduled with the Joint Information Center.

#### 2. Actions to date

- Steering Committee
  - Last meeting held October 24
  - Will meet quarterly.
  - Provided feedback to the Backbone Support and Operations Branches.
- Backbone Support
  - Last meeting held March 6.
  - Provided feedback on the Operations Branches.
- Operations Section
  - Met on March 26.
  - Branch leads provided a verbal update on progress to date, actions and shared information among members.
  - Discussed the need to annotate completed actions for Branches.
- Operations Branches

# National Public Health Emergency

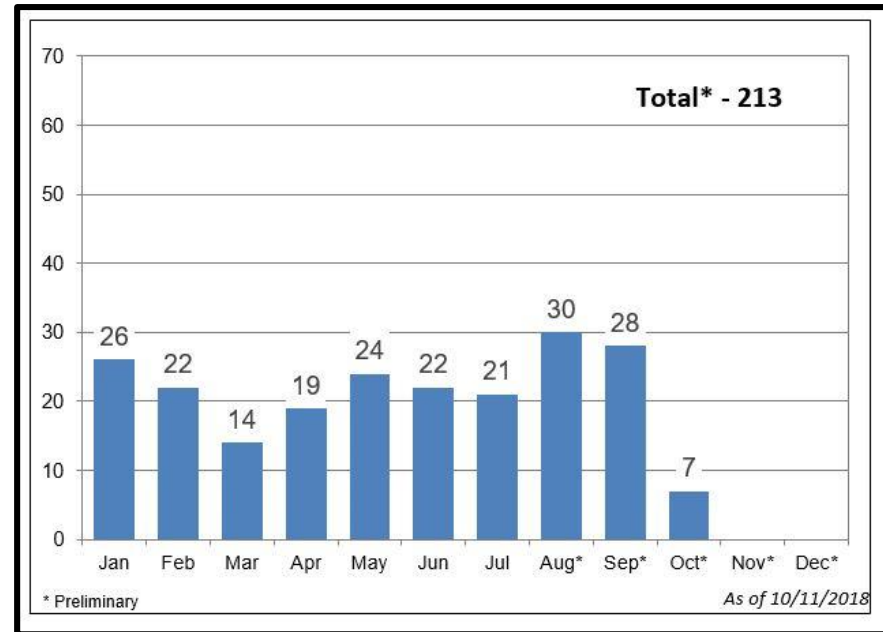
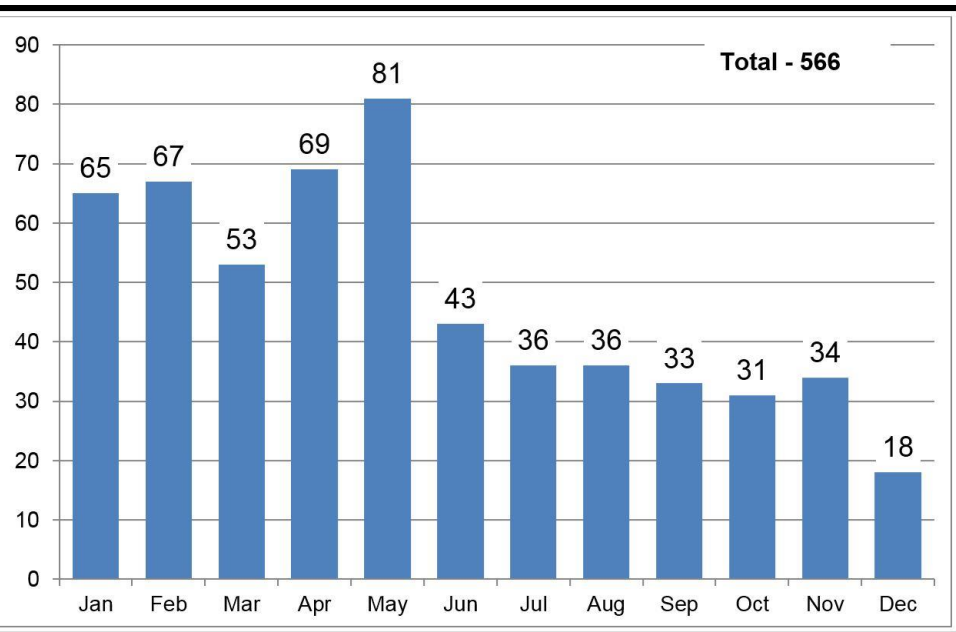


# COAT Success Highlights

- Re-allocation of local funding and new funding
- Increase in data sharing
- Community education
- Outreach efforts
- Naloxone distribution
- Expansion of syringe exchange services
- Increase coordination of law enforcement and fire/EMS
- Increase in training opportunities
- CDC guidelines implemented in hospitals
- Increase in Certified Peer Supporters
- Increase in treatment services
- Development of school prevention curriculum
- Working with businesses to adopt drug-free workplace and second-chance policies



# Unintentional Drug Overdose Deaths Montgomery County, Ohio



# Overdoses Are Declining Between January–June 2017 and January–June 2018

Overdose emergency department visits	↓73% (2,590 to 705)
EMS overdose runs	↓68% (1,383 to 438)
Law enforcement overdose calls	↓66% (2,239 to 761)
Drug overdose deaths	↓65% (379 to 132)
Naloxone doses administered by EMS	↓60% (1,790 to 715)

# Where Are We Going Next?

- Increase naloxone distribution
- Expand and enhance syringe services
- Improve coordination of recovery club organizations
- Continue to seek federal and state funding that align with collaborative initiatives
- Increase media campaigning to reduce stigma of mental illness and addiction
- Increase partnerships with businesses to increase employment opportunities for those in recovery
- Increase treatment options available
- Continue to use data to establish COAT strategic directions

# New Challenges

- How to maximize progress made in addressing the opioid epidemic to the larger population health issue of addiction of all kinds
- Response to changing drug trends (meth, cocaine)
- Will the current structure sustain over time?

The COAT Incident Action Plan and other documents:

<http://www.phdmc.org/coat>



## Questions?

You have two options to ask questions today:

1. Email us at: [communities@stls.frb.org](mailto:communities@stls.frb.org)
2. Click the “Ask Question” button in the webinar

# Wrap-Up/Closing

Thank you to today's presenters and to all participants for joining this session.

## Next steps:

- All session materials are available on our website, and in the next few days, we will post an audio file of today's session.
- If you have topical suggestions for future sessions or any questions about this program, please feel free to contact us at [communities@stls.frb.org](mailto:communities@stls.frb.org).
- Information about future sessions will be posted on our website along with archived materials from past sessions: <https://bsr.stlouisfed.org/connectingCommunities>

# Related Resources



In connection with this session, you can find a variety of additional resources on this topic, available at **[www.fedcommunities.org](http://www.fedcommunities.org)**.

It provides an array of practical resources to help you in your role as a community development professional, whether your work involves supporting people, places, the policy and practice of community development, or small business development.