CPWR

OPIOIDS AND MENTAL HEALTH

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Industry sectors with opioid-related overdose death rates significantly higher than the average rate for all workers, Massachusetts workers, 2011-2015, n=4,302
Suicide rates among male U.S. workers, by major occupation group, 2015

- Construction and Extraction: 53.2
- Arts, Design, Entertainment, Sports, and Media: 39.7
- Installation, Maintenance, and Repair: 39.1
- Transportation and Material Moving: 30.9
- Production: 30.5
- Protective Service: 28.2
- Building and Grounds Cleaning/Maintenance: 26.8
- Health Care Practitioners and Technical: 25.6
- Farming, Fishing, and Forestry: 22.8
- Sales and Related: 21.5
- Food Preparation and Serving Related: 20.9
- Health Care Support: 19.5
- Architecture and Engineering: 19.4

Source: CDC MMWR – Suicide rates by major occupation group –17 states, 2012 and 2015
What has the construction industry done about it?
NABTU Opioid Task Force

NABTU President Sean McGarvey established

• 14 international union reps
• Employers and employer reps
• BTCs, Insurers, and Government partners

Adopted a public health model to address the problem
Public Health Model

- **Primary Prevention**
  - Prevent Injuries
  - Prevent Pain

- **Secondary Prevention**
  - Treatment Alternatives to Opioids

- **Tertiary Prevention**
  - SUD Treatment and Recovery
NABTU 2020 Resolution

“Support for Efforts to Reduce Pain, Opioid Use, Opioid Overdose and the Number of Deaths by Suicide in the Construction Industry”

Resolution No. 4
Re: Support for Efforts to Reduce Pain, Opioid Use, Opioid Overdose and the Number of Deaths by Suicide in the Construction Industry

Submitted by: Governing Board of Presidents

WHEREAS, in the United States, the combined number of deaths among Americans from suicide and unintentional overdose increased from 1,466 in 2000 to 25,761 in 2017. Among occupations, the construction industry has the second highest rate of both deaths by suicide and opioid overdoses; and

WHEREAS, among all workers, unintentional overdoses have increased 420% between 2011 and 2018 and have increased 930% for construction workers during the same time period; and

WHEREAS, the injury rate for construction workers is 77 percent higher than the national average for other occupations; and

WHEREAS, injured construction workers are not likely to be offered modified duty, more likely to suffer pain and job loss and/or pressure to return to work quickly, and experience financial stress, all of which contribute to depression and increased opioid usage; and

WHEREAS, studies in Ohio and Massachusetts, both high-vision density states, found that construction workers had a disproportionate number of opioid overdose deaths; and

WHEREAS, chronic pain, depression, and opioid use are associated with increased risk of suicide and construction ranks as the industry with the second greatest number of suicides; and

WHEREAS, injured workers receiving workers’ compensation have been more likely to receive opioid prescriptions for general pain and to recover from medical procedures than those with non-work-related injuries undergoing the same procedure;

THEREFORE, BE IT RESOLVED, that North America’s Building Trades Unions and all Building Trades Councils fully endorse combating opioid-related deaths and deaths by suicide in the construction industry by taking these measures to prevent pain, educate the industry, and provide support to members:

- Promote programs and ergonomics equipment on job sites that reduce musculoskeletal disorders and traumatic injuries—work shouldn’t hurt.

- Work to designate substance use and mental health disorders through culturally and linguistically appropriate services, education and awareness, with members, leadership, and owners.

- Educate members about the problems and limitations of opioids for long term treatment of injuries and chronic pain resulting from construction work—and informing them about non-opioid alternatives to pain management treatment.

- Mandate all apprentice and/or trainer members to complete a training program designed to increase awareness of work-related injuries associated with opioid use.

- Design, international and local health/hygiene funds to provide members with best in class benefits to promote behavioral health and substance use disorder benefits and alternative treatment for pain. For example, evaluate benefit designs to ensure compliance with the Mental Health Parity Act and promote medication-assisted treatment (MAT), including opioid treatment programs (OTPs), that are combined with behavioral therapy and medications to treat substance use disorders. Consider covering services that are non-traditional but effective for pain management such as acupuncture, massage, and physical therapy. Ensure that pharmacy benefit managers are offering clinical management programs such as step-therapy, quantity limits, and clinical prior-authorization to ensure that best practices are followed.

- Support education/training for members.

- Develop peer education programs to connect affected workers with substance use disorder treatment and mental health support.

- Publicize available behavioral health resources, inclusive of members/employee assistance programs, peer programs, and counseling and treatment resources, available through building trades unions and health and welfare funds.

- Support members at all steps in their path to recovery from substance use disorder or behavioral health issues. This includes pre-treatment, treatment and long-term recovery.

- Educate members and provide resources on suicide prevention and awareness.

- Encourage organizations to help develop and support workplace policies and programs that promote rehabilitation and return-to-work opportunities.
CPWR Resources
Projects to Prevent Opioid Use

- Communications Report on Primary Prevention
- Training Programs
- Peer Advocacy Report
- Data Reports
- Physicians Alert
- Aids to Reduce Stigma

FrameWorks Communication Solutions

• Link **causes** and **consequences** to build support for structural solutions.
• Use the **Upstream/Downstream metaphor** to explain prevention.
• Appeal to the **Value of Investment** in messages to construction industry.
• Choose **concrete examples** to illustrate what effective interventions look like.
• Provide the **context** needed to interpret unfamiliar concepts and data.
• Explicitly **name who or what is responsible** for the problem or taking action to fix it.
• Emphasize **systemic** solutions to expand thinking beyond **individual-level** interventions.
Opioid Awareness Training

- Created an opioid hazard awareness training on behalf of North America’s Building Trades Unions
  - Improve knowledge about opioids and related substance use and mental health
  - Inspire and motivate trainees to act

- Piloted and Evaluated
- Shortened and digitally-optimized training in 2020, updated 2022
- Free for download: www.cpwr.com
Suicide Training/Mental Health Program

9 discussion-based activities to be used in training curricula:

1. Understanding Member Assistance Programs
2. NABTU Resolution: Support for Efforts to Reduce Pain, Opioid Use, Opioid Overdose and the Number of Deaths by Suicide in the Construction Industry
3. Motivational Interviewing
4. Understanding Upstream Prevention
5. Basic Suicide Prevention
6. Health Maintenance
7. Drug Testing Debate
8. A Suicide on Site: Getting the Story Right
9. Roach Coach Health Conversation
Peer Advocacy in the Construction Industry

- Interviewed Key Informants from the NABTU Opioid Task Force
  - Union Response to Opioid Crisis
- 7 of 13 Interviewees Discussed Peer Advocacy
  - Themes about Peer Advocacy Included:
    - Barriers – Stigma, Buy-In, Trust
    - Planning
    - Design
    - Recovery

Source: https://www.cpwr.com/wp-content/uploads/Peer_Advocacy_Construction_Workers_Struggling_Substance Use.pdf
Data Center Reports

- Overdoses
- Opioid Use
- Mental Health during COVID

Source: https://www.cpwr.com/research/data-center/data-reports/
LEVEL 2 Prevention: Avoid Opioids

Avoid long-term opioid prescriptions

Avoid combined prescriptions (tranquilizers + muscle relaxants + painkillers)

Advocate for good care, including non-opioid treatment

Tips for Talking with Your Doctor: What You Need to Know Before Accepting an Opioid Prescription

- Avoid long-term opioid prescriptions.
- Avoid combined prescriptions (tranquilizers + muscle relaxants + painkillers).
- Advocate for good care, including non-opioid treatment.

Jobsite Opioid Resources

Opioid Deaths in Construction

Construction work can result in painful injuries that are sometimes treated with prescription opioids. One in four people prescribed opioids for long-term pain become addicted and opioid-related deaths are on the rise.

Chris Story
Chris strained his back after lifting heavy materials. He tried to ignore the pain, but it wouldn’t go away. Chris went to the doctor and was prescribed an opioid to help with the pain. The pills made him feel better, but his back never got better. Chris found that he needed the pills to make it through the day.

Ultimately, his doctor refused to give him another prescription. Chris went to another doctor and got a new prescription. Over time his job performance and family life began to suffer. Chris went back to his doctor and asked for help. The doctor helped him to find treatment for his opioid addiction.

Chris is now in recovery and using a non-addictive treatment for his pain.

How can we stay safe today?
What will we do at the worksite to prevent an injury?

1. _______________________
2. _______________________

Remember This
> Your employer must provide a safe work environment to prevent injuries. If you see a hazard on the job, report it to your supervisor or foreman.
> Follow safe work practices to prevent injuries, such as getting help when lifting heavy materials.
> If you are injured, talk to your doctor about non-addictive medications or physical therapy to treat the pain.
> Opioids should be the last option, and if prescribed used for the shortest time possible.
> Addiction is an illness that can be treated. Get help if you find yourself dependent on pain medications to get through the day.
> Check with your union or employer to find out if they have a program to help, such as an employee assistance program (EAP) or member assistance program (MAP).
> Call this confidential national hotline to find out about treatment options near you: 1-800-662-4357 (EAP) or go online at https://resources=http://www.narcotic.org.

Source: https://www.cpwr.com/research/research-to-practice-r2p/r2p-library/other-resources-for-stakeholders/mental-health-addiction/opioid-resources/
Infographic

Construction work can result in painful injuries that are often treated with prescription opioids.

Opioids are addictive and should be the last option to treat your pain. Talk to your doctor about non-addictive medications.

REMEMBER: Addiction is an illness that can be treated.

Call this confidential national hotline:
1-800-662-HELP (4357)

Visit: Facing Addiction — https://resources.facingaddiction.org/

Source: https://www.cpwr.com/research/research-to-practice-r2p/r2p-library/other-resources-for-stakeholders/mental-health-addiction/opioid-resources/dont-be-a-statistic-protect-yourself-from-an-opioid-overdose/
Infographic

Together, we can help prevent Suicide in Construction.

Reach Out
Respond
Connect

If you or someone you know needs immediate help, contact the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) or text “HELLO” to 741741 to connect with a crisis counselor.

The construction industry has one of the highest suicide rates.

Learn about the warning signs and how to start a conversation at tinyurl.com/cpwsuicideprevention.

Remember,
You are not alone.

If you or someone you know needs immediate help, contact the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) or text “HELLO” to 741741 to connect with a crisis counselor.

Source: https://www.cpwr.com/research/research-to-practice-r2p/r2p-library/other-resources-for-stakeholders/mental-health-addiction/suicide-prevention-resources/suicide-prevention-infographics/
Ongoing Work
Bullying Survey

• Apprentices

• In partnership with:
  • International Union,
  • National Employer Association, and
  • National Training Fund
CPWR August 2022 Opioids/Suicide Workshop

Map
- Map organizations and programs focused on preventing opioid overdose and suicide in construction, and relationships among them.

Identify
- Identify opportunities for innovation, incubation, collaboration, and increased investment.

Create
- Highlight actions for targeted data collection, evaluation, research, and learning. Create Topic Area Work Groups.
Workshop Outcome

Four Ongoing Workgroups

• Training and Education
• Changing the Culture and Stigma Reduction
• Injury Prevention and Workplace Stress
• Peer Support

CPWR will support the workgroups and coordinate with the NABTU Opioid Task Force moving forward.
• All CPWR free resources and more
  • SAMHSA Treatment Locator
  • National Suicide & Crisis Lifeline
  • CIASP Website Links
  • NIOSH
  • CDC