



February 2020 Report: Rhode Island Review of Overdose Accidental Deaths (ROAD) Team

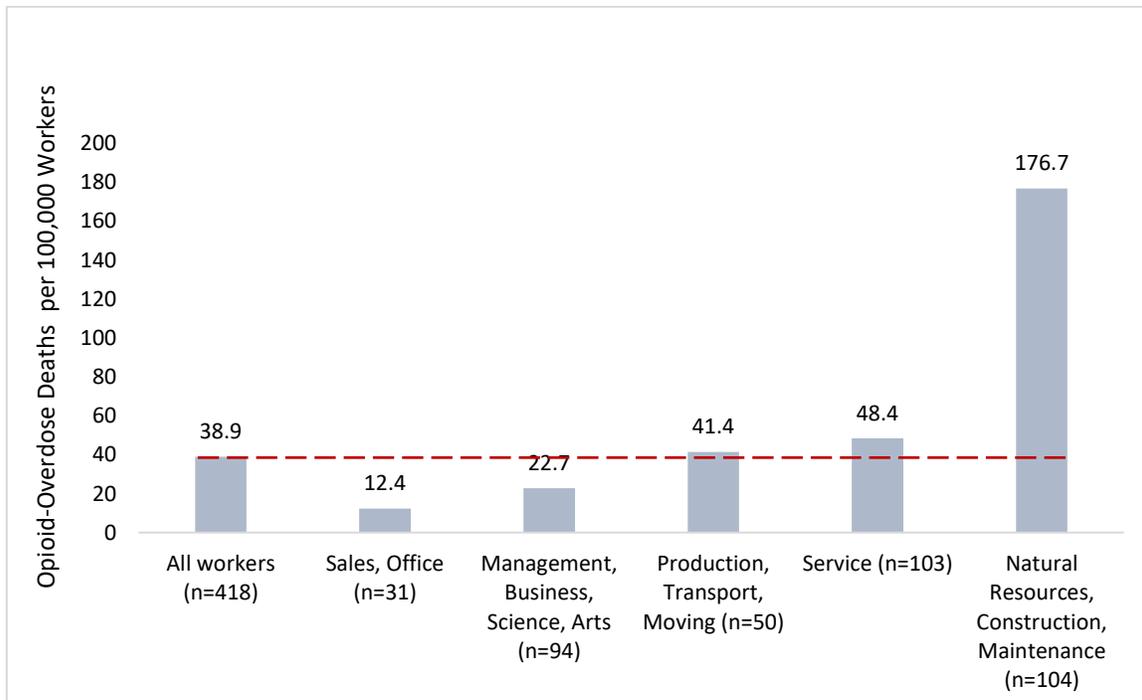
The ROAD Team at the Rhode Island Department of Health (RIDOH) convened in February 2020 to conduct an overdose fatality review to examine and understand the circumstances surrounding fatal overdoses. Data findings from Rhode Island’s State Unintentional Drug Overdose Reporting System (SUDORS) offered insights into emerging drug overdose death trends and themes.

The ROAD Team recommends several community and systemic initiatives that can be implemented by state and local partners to prevent the incidence of drug overdose in Rhode Island.

Data Trends

- Nationally and regionally, analyses of multiple data sources have found higher proportional mortality ratios and higher rates of fatal opioid overdoses among specific occupations, including those working in Service occupations.^{1,2} Service occupations include protection services, personal care and service, building and grounds, cleaning and maintenance, healthcare support, and food preparation and serving.
- Using Rhode Island SUDORS data from July 2016 to June 2018, RIDOH analyzed rates of accidental or undetermined, fatal opioid-involved overdoses by usual occupation category and found that individuals who work in Service occupations had the second-highest rate of opioid-involved accidental or undetermined fatal overdoses: **48.4 per 100,000 workers compared to 38.9 per 100,000 workers among all workers.**³ (For information on fatal opioid overdoses among the Natural Resources, Construction, or Maintenance occupations, view the [October 2019 ROAD Report](#)).

Figure 1. Rate of Opioid-Involved Accidental or Undetermined Drug Overdose Deaths in Rhode Island by Standard Occupation Category



Sources: SUDORS, RIDOH; Updated as of March 2019; Population Denominator from the American Community Survey, 2017.

Notes: Rates for 151 victims with occupations outside of the Standard Occupation Categories could not be calculated. Data reflect accidental or undetermined opioid-involved drug overdose deaths occurring in Rhode Island and do not necessarily reflect all Rhode Island residents. Categories of substances contributing to the cause of death are not mutually exclusive. All deaths were opioid-involved and other substances may have also contributed to the cause death.

Emergent Theme: The ROAD Team identified a higher rate of fatal opioid-involved overdose among individuals who work in service-related occupations.

- From July 2016 to June 2018, almost one out of five fatal opioid-involved overdose victims worked in Service occupations. Four out of ten individuals were specifically employed in Food Preparation and Serving occupations.
- In comparison to victims in other occupation categories, victims who were employed in Service occupations were:
 - More likely to have had alcohol contribute to the cause of death (27% compared to 23%), cocaine contribute to cause of death (41% compared to 37%), and fentanyl contribute to cause of death (78% compared to 75%). These individuals were less likely to have antidepressant(s) contribute to the cause of death (11% compared to 15%);
 - More likely to have a known mental health condition (54% compared to 49%);
 - More likely to have a mental health diagnosis of anxiety (36% compared to 26%), depression (36% compared to 31%), or diagnoses of both anxiety and depression (21% compared to 15%); and/or
 - More likely to have three or more substances contribute to cause of death (66% compared to 59%) compared to victims in other occupations.

ROAD Team Recommendations for Community Overdose Prevention

- Support and promote recovery-friendly environments within the service industry, including solution-focused interventions that address alcohol use in the workplace.
- Provide trauma-informed services for children and youth who are experiencing grief after a loss of a family member. Direct these services to children and youth who were present during an overdose.
- Expand the Safe Stations model to all fire stations in Rhode Island.
- Identify a champion within the local restaurant and service industries who can promote the importance of naloxone administration training and recovery friendly workplace initiatives.
- Develop messaging for high school and college students about the risks associated with counterfeit pills, specifically stimulants (e.g., Adderall).
- Establish an Employee Assistance Program for Rhode Island Hospitality Association members.
- Develop a resource guide to educate local service industry employers about substance use disorder and the Rhode Island Recovery Friendly Workplace Initiative.

ROAD Team Recommendations for Structural Overdose Prevention

- Increase residential treatment options including family residential options.
- Explore additional options and potential improvements for data collection of independent and co-occurring alcohol toxicity.

References:

1. Massachusetts Department of Public Health, Occupational Health Surveillance Program (2018); Opioid-Related Overdose Deaths in Massachusetts by Industry and Occupation, 2011-2015.
2. Harduar Morano, Laurel et al. "Occupational Patterns in Unintentional and Undetermined Drug-Involved and Opioid-Involved Overdose Deaths - United States, 2007-2012." *MMWR. Morbidity and Mortality Weekly Report*, vol. 67, 33 925-930. 24 Aug. 2018, doi:10.15585/mmwr.mm6733a3
3. Scagos R, Lasher L, Viner-Brown S. "Accidental or Undetermined Opioid-Involved Drug Overdose Deaths in Rhode Island and Usual Occupation – Higher Rates Observed in Natural Resources, Construction, and Maintenance Occupations". *Rhode Island Medical Journal*. Oct 2019. 03 Dec 2019. <http://www.rimed.org/rimedicaljournal/2019/10/2019-10-46-health-scagos.pdf>