Promoting Community Mobilization for Harm Reduction
Webinar Series

Racial Equity in Overdose Prevention Part 1: Using Data
Thursday November 5, 2020 | 2:00pm - 3:30pm
Agenda

Welcome and Introductions

Marco Pugliese, MS—Lead Technical Consultant, Community Health Initiatives
University of Pittsburgh, School of Pharmacy, Program Evaluation and Research Unit

Tracy Pugh, MHS—Senior Manager, Overdose Prevention Program, Vital Strategies

Racial Equity in Overdose Prevention Part 1: Using Data

Dr. Eric Hulsey—Senior Technical Advisor: Drug Use Epidemiology and Data, Vital Strategies

Carrie Thomas Goetz, PhD—Senior Epidemiologist, Prescription Drug Monitoring Program Office,
Pennsylvania Department of Health

Upcoming Sessions

Racial Equity in Overdose Prevention Part 2: Strategies and Practices
December 3, 2020

Dr. David Saunders, Director of the Office of Health Equity for Pennsylvania Department
of Health

Dr. Kima Taylor, Founder of Anka Consulting
Housekeeping

- Webinar is being recorded.
- Please stay muted.
- Questions? Please put them in the chat or Q&A Box.
- Please fill out the evaluation.
Welcome and Introductions

Marco Pugliese, MS– Lead Technical Consultant, Community Health Initiatives, Pitt PERU
Webinar Objectives

Objectives of this webinar are to learn and discuss:

1. The history of racism/racial bias in drug policy and the importance of a racial equity lens
2. General strategies for collecting and understanding data
3. Identifying and leveraging data sources across sectors
4. Using data to identify inequities and targeting interventions
5. Strategies for using data to drive action
Four guiding principles for our work

• Harm reduction
• Support, don’t punish
• Racial justice
• Health equity
What are our goals and values?

- Prevent death
- Community
- Opportunity
- Justice
- Equity

"Racial equity is about applying justice and a little bit of common sense to a system that’s been out of balance. When a system is out of balance, people of color feel the impacts most acutely, but, to be clear, an imbalanced system makes all of us pay."

~ Center for Social Inclusion President Glenn Harris
HISTORY OF RACE IN THE WAR ON DRUGS

- 1914 Harrison Narcotic Act
- 1924 Heroin Act
- 1937 Marijuana Tax Act
- 1951 Boggs Act
- 1956 Narcotics Control Act
- 1970 Controlled Substance Act
- 1971 President Nixon declares ‘War on Drugs’
- 1973 NY Rockefeller Drug Laws
- 1986/88 Anti-Drug Abuse Act

“The use of cocaine by the negroes of the South is one of the most elusive and troublesome questions which confront the enforcement of the law in most of the Southern states“. He went on that the drug "is often the direct incentive to the crime of rape by the negroes of the South and other sections of the country". (1910)

-Hamilton Wright, appointed by U.S. President Theodore Roosevelt as United States Opium Commissioner
HISTORY OF RACE IN THE WAR ON DRUGS

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- 1930 Federal Bureau of Narcotics
- 1937 Marijuana Tax Act
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- 1986/88 Anti-Drug Abuse Act

Narcotics Commissioner Harry J. Anslinger announces a series of raids in the nation’s big cities aimed at crippling the narcotics traffic in New York on Jan. 4, 1958. (AP Images)
HISTORY OF RACE IN THE WAR ON DRUGS

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- 1971 President Nixon declares ‘War on Drugs’
- 1973 NY Rockefeller Drug Laws
- 1986/88 Anti-Drug Abuse Act

“You want to know what this was really all about. The Nixon campaign in 1968, and the Nixon White House after that, had two enemies: the antiwar left and black people. You understand what I’m saying. We knew we couldn’t make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities. We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did.” - https://harpers.org/archive/2016/04/legalize-it-all/
HISTORY OF RACE IN THE WAR ON DRUGS

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- 1924 Heroin Act
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HISTORY OF RACE IN THE WAR ON DRUGS

Rate of Drug Abuse Violations in the US by Race, 1980-2014

- 1986/88 Anti-Drug Abuse Act

Racial equity is both an outcome and a process.

As an outcome, we achieve racial equity when race no longer determines one’s socioeconomic outcomes; when everyone has what they need to thrive, no matter where they live. As a process, we apply racial equity when those most impacted by structural racial inequity are meaningfully involved in the creation and implementation of the institutional policies and practices that impact their lives.

When we achieve racial equity:

- People, including people of color, are owners, planners, and decision-makers in the systems that govern their lives.
- We acknowledge and account for past and current inequities, and provide all people, particularly those most impacted by racial inequities, the infrastructure needed to thrive.
- Everyone benefits from a more just, equitable system.

https://www.centerforsocialinclusion.org/our-work/what-is-racial-equity/
Better epidemiology – Better equity

Eric G Hulsey, DrPH, MA
Senior Technical Advisor: Drug Use Epidemiology and Data
Overview

• Why is it important to ask questions of your data?
• Data isn’t something separate from the work
• Examples from Allegheny County
Overdose Epidemic in Allegheny County
Use your data to help you target your efforts!
Who is dying?
“Up/Down” Epidemiology

# Opioid-related Overdose Deaths in Allegheny County

Source: Allegheny County Fatal Overdose Surveillance Dashboard: https://public.tableau.com/profile/earl.hord#!/vizhome/RFPDashboard_15839432593890/FatalOverdoseSurveillance
Fatal overdoses: counts vs rates

**TABLE 1: Opioid-Related Overdose Deaths by Age, Race and Legal Sex: 2015-2016 (n=910)**

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>FEMALE</th>
<th></th>
<th></th>
<th></th>
<th>MALE</th>
<th></th>
<th></th>
<th></th>
<th>GRAND TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>WHITE</td>
<td>BLACK</td>
<td>OTHER</td>
<td>TOTAL</td>
<td>WHITE</td>
<td>BLACK</td>
<td>OTHER</td>
<td>TOTAL</td>
<td></td>
</tr>
<tr>
<td>Under 15</td>
<td>236</td>
<td>28</td>
<td>2</td>
<td>266</td>
<td>554</td>
<td>85</td>
<td>5</td>
<td>644</td>
<td>910</td>
</tr>
<tr>
<td>15 to 24</td>
<td>27</td>
<td>1</td>
<td></td>
<td>28</td>
<td>38</td>
<td>2</td>
<td></td>
<td>40</td>
<td>68</td>
</tr>
<tr>
<td>25 to 34 years</td>
<td>64</td>
<td>6</td>
<td></td>
<td>70</td>
<td>177</td>
<td>12</td>
<td></td>
<td>192</td>
<td>262</td>
</tr>
<tr>
<td>35 to 44 years</td>
<td>46</td>
<td>6</td>
<td></td>
<td>52</td>
<td>143</td>
<td>16</td>
<td></td>
<td>159</td>
<td>211</td>
</tr>
<tr>
<td>45 to 54 years</td>
<td>55</td>
<td>7</td>
<td>1</td>
<td>63</td>
<td>115</td>
<td>27</td>
<td>1</td>
<td>143</td>
<td>206</td>
</tr>
<tr>
<td>55 to 64 years</td>
<td>34</td>
<td>7</td>
<td>1</td>
<td>42</td>
<td>73</td>
<td>22</td>
<td>1</td>
<td>96</td>
<td>138</td>
</tr>
<tr>
<td>65+</td>
<td>10</td>
<td>1</td>
<td></td>
<td>11</td>
<td>8</td>
<td>4</td>
<td></td>
<td>12</td>
<td>23</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>236</td>
<td>28</td>
<td>2</td>
<td>266</td>
<td>554</td>
<td>85</td>
<td>5</td>
<td>644</td>
<td>910</td>
</tr>
</tbody>
</table>

**FIGURE 4: Average Annual Age-, Race-, and Sex-Specific Death Rates for Opioid-Related Overdoses: 2015-2016 (n=910)**

Disproportional death rates

**2015**
Rate per 100,000 by Race and Legal Sex

<table>
<thead>
<tr>
<th>Race</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>26</td>
<td>11</td>
</tr>
<tr>
<td>African American</td>
<td>25</td>
<td>17</td>
</tr>
<tr>
<td>Other</td>
<td>10</td>
<td>3</td>
</tr>
</tbody>
</table>

**2019**
Rate per 100,000 by Race and Legal Sex

<table>
<thead>
<tr>
<th>Race</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>30</td>
<td>17</td>
</tr>
<tr>
<td>African American</td>
<td>43</td>
<td>15</td>
</tr>
<tr>
<td>Other</td>
<td>15</td>
<td>13</td>
</tr>
</tbody>
</table>

**2020***
Rate per 100,000 by Race and Legal Sex

<table>
<thead>
<tr>
<th>Race</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>African American</td>
<td>15</td>
<td>10</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

* Partial year

Source: Allegheny County Fatal Overdose Surveillance Dashboard: https://public.tableau.com/profile/earl.hord#!/vizhome/RFPDashboard_15839432593890/FatalOverdoseSurveillance
Where are overdoses happening?
Fatal overdoses by municipality: 2016-2020*

* Partial year for 2020

Source: Allegheny County Fatal Overdose Surveillance Dashboard: https://public.tableau.com/profile/earl.hord#!/vizhome/RFPDashboard_15839432593890/FatalOverdoseSurveillance
Different groups affected in different areas

Fatal overdoses by municipality: 2016-2020*

* Partial year for 2020

Source: Allegheny County Fatal Overdose Surveillance Dashboard:
https://public.tableau.com/profile/earl.hord#!/vizhome/RFPDashboard_15839432593890/FatalOverdoseSurveillance
Different groups affected in different areas

Overdose ED visits by patient zip code: 2016-2020*

* Partial year for 2020

Source: Allegheny County Fatal Overdose Surveillance Dashboard:
https://public.tableau.com/profile/earl.hord#!/vizhome/RFPDashboard_15839432593890/FatalOverdoseSurveillance
What drugs are involved in overdoses?
Toxicology from Medical Examiner

### TABLE 2: Fentanyl, Fentanyl-Analog and Cocaine Involvement Among Opioid-Related Overdose Deaths: 2015-16 (n=910)\(^9\)

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>%</th>
<th>2016</th>
<th>%</th>
<th>GRAND TOTAL</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>389</td>
<td>90.5%</td>
<td>597</td>
<td>93.5%</td>
<td>986</td>
<td>92.3%</td>
</tr>
<tr>
<td>Opioids</td>
<td>352</td>
<td>90.5%</td>
<td>558</td>
<td>93.5%</td>
<td>910</td>
<td>92.3%</td>
</tr>
<tr>
<td>Fentanyl</td>
<td>127</td>
<td>36.1%</td>
<td>391</td>
<td>70.1%</td>
<td>518</td>
<td>56.9%</td>
</tr>
<tr>
<td>Fentanyl Analogues</td>
<td>28</td>
<td>8.0%</td>
<td>28</td>
<td>5.0%</td>
<td>56</td>
<td>6.2%</td>
</tr>
<tr>
<td>Benzodiazepines</td>
<td>92</td>
<td>26.1%</td>
<td>157</td>
<td>28.1%</td>
<td>249</td>
<td>27.4%</td>
</tr>
<tr>
<td>Cocaine</td>
<td>93</td>
<td>26.4%</td>
<td>175</td>
<td>31.4%</td>
<td>268</td>
<td>29.5%</td>
</tr>
</tbody>
</table>

Is it really prescription opioids?

Street heroin vs prescription opioid medications among opioid-related overdose deaths, 2008-2018: counts

- Street heroin-related overdose deaths increase
- Drop in OD deaths
- Purdue Pharma begins shipments of new 'abuse deterrent' formulation of Oxycontin in August 2010

* street drug is considered fentanyl, fentanyl analog, heroin, or morphine

Vital Strategies

n = 3283
Opioid-related overdoses involve more than just opioids

Different folks used drugs differently

Among opioid-related overdoses 2008-2019

<table>
<thead>
<tr>
<th></th>
<th>Stimulant</th>
<th>Benzodiazapine</th>
<th>Stimulant and Benzodiazapine</th>
<th>Overall Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>270 (30%)</td>
<td>306 (34%)</td>
<td>76 (8.5%)</td>
<td>900</td>
</tr>
<tr>
<td>Male</td>
<td>588 (29%)</td>
<td>527 (26%)</td>
<td>143 (7.1%)</td>
<td>2027</td>
</tr>
<tr>
<td>Black</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>71 (60%)</td>
<td>18 (15%)</td>
<td>11 (9.2%)</td>
<td>119</td>
</tr>
<tr>
<td>Male</td>
<td>145 (52%)</td>
<td>28 (10%)</td>
<td>15 (5.4%)</td>
<td>278</td>
</tr>
</tbody>
</table>

Different intervention approaches

**White females**
- Ages 35-44
- Benzodiazepines

**African American Males**
- Ages 55-64
- Illicit opioids and stimulants

**White Males**
- Ages 35-44
- Illicit opioids and prescription opioids

**Consider**
- Suburban areas
- Behavioral therapy
- SSRIs
- Education
- Naloxone kits

- Greater Pittsburgh
- Education
- Opioid-naïve
- “Speedballing”
- Naloxone kits

- Risks of starting OUD treatment
- Resources for SUD treatment
- Naloxone kits

A few take-aways.....
Targeting interventions

- Use your data to help you plan your activities (whatever you can access)
- Ask critical questions of it.
- Is your coalition:
  - basing decisions on rates or counts?
  - considering how different groups may be using drugs differently?
  - targeting efforts to those experiencing disproportional risks?
Thank you!
How to Find and Use Data to Track Trends

Carrie Thomas Goetz, PhD
Senior Epidemiologist
Prescription Drug Monitoring Program (PDMP)
November 5, 2020
Calculating Proportion

Percent

\[
\left( \frac{\text{Number of Events in Category of Interest}}{\text{Total Number of Events}} \right) \times 100
\]

Example: 2018 Drug overdose deaths

- Total = 4422
- White = 3575
- Black = 591
- Other/Unknown Race = 256

White: \(\frac{3575}{4422} \times 100 = 80.8\%\)

Black: \(\frac{591}{4422} \times 100 = 13.4\%\)

Other/Unknown: \(\frac{256}{4422} \times 100 = 5.8\%\)
Percent of Drug Overdose Deaths by Race, Pennsylvania, 2012-2020*

*preliminary estimates
Calculating Rates

Rate per 10,000 Population

\[
\left( \frac{\text{Number of Events in Category of Interest}}{\text{Total Population in Category of Interest}} \right) \times 10,000
\]

Example: 2018 Drug overdose deaths

- Total = 4422
- White = 3575
- Black = 591
- Other/Unknown Race = 256

Total Population

- PA = 12,807,060
- White = 10,476,085
- Black = 1,531,457
- Other = 799,518

White: \( \frac{3575}{10,476,085} \times 10,000 = 3.4 \)

Black: \( \frac{591}{1,531,457} \times 10,000 = 3.9 \)

Other/Unknown: \( \frac{256}{799,518} \times 10,000 = 3.2 \)
Rate of Drug Overdose Deaths per 10,000 Population by Race, Pennsylvania, 2012-2019*

*preliminary estimates
Calculating Percent Change

\[
\left( \frac{\text{New Value} - \text{Old Value}}{\text{Old Value}} \right) \times 100
\]

Example: 2018 Drug overdose deaths
- Total = 4422
- White = 3575
- Black = 591
- Other/Unknown Race = 256

- 2017 Drug Overdose Deaths
  - Total = 5396
  - White = 4492
  - Black = 620
  - Other/Unknown = 283
Where to get Data

- Census
  - QuickFacts https://www.census.gov/quickfacts/fact/table/US/PST045219
  - County Datasets https://www.census.gov/data/tables/time-series/demo/popest/2010s-counties-detail.html


- Governor’s Opioid Data Dashboard https://data.pa.gov/stories/s/Pennsylvania-Opioids/9q45-nckt/

- PDMP Interactive Data Report https://www.health.pa.gov/topics/programs/PDMP/Pages/Data.aspx

- OverdoseFreePA https://www.overdosefreepa.pitt.edu/
Carrie Thomas Goetz, PhD
Senior Epidemiologist
Prescription Drug Monitoring Program
Pennsylvania Department of Health
cthomasgoe@pa.gov
Upcoming Webinar Series

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Dr. David Saunders, Director of the Office of Health Equity for Pennsylvania Department of Health

Dr. Kima Taylor, Founder of Anka Consulting

Syringe Service Programs
January 2021
Reminders

Please fill out the evaluation.

Webinar Recordings are Available on OverdoseFreePA.pitt.edu