Opioid Litigation Settlement: *Using Evidence to Lead Action*

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Agenda

- Impact of the Opioid Crisis
- Community Response
- Settlement Agreement Background
- Allowable Uses of Funding
- Guiding Principles
- Using Data to Inform Decisions
- County Framework
- Support to Cities
- Questions



Lifting Up Our Community

- Clackamas County and Cities will receive funding from the National Opioid Settlement to mitigate harms associated with the opioid and other drug crisis.
- New funding provides an opportunity to make strategic investments in evidence-based approaches that strengthen our communities, prevent opioid misuse and stem the rising number of overdose deaths.

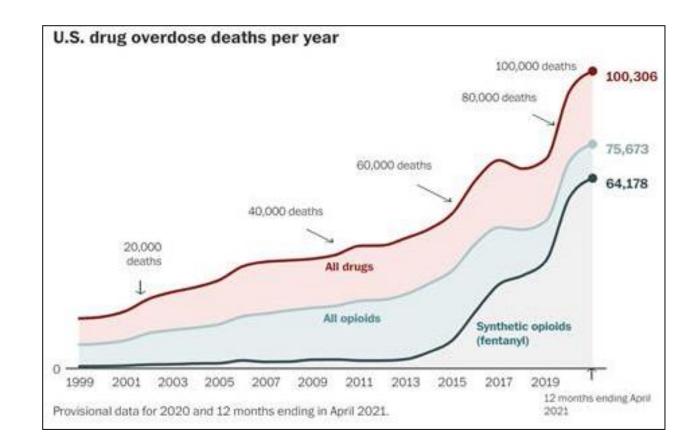




National Opioid Crisis

•Over **100,000** people died as a result of the overdose epidemic from April 2020 to April 2021.

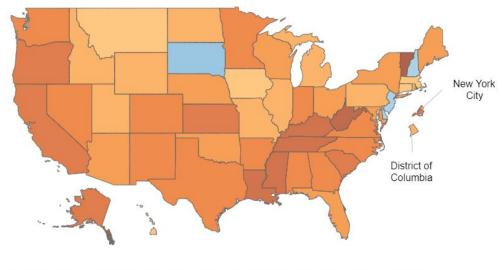
Approximately 75,000 of those deaths involved opioids, most of which were due to synthetic opioids such as fentanyl.





Source: Centers for Disease Control and Prevention, National Center for Health Statistics

Oregon saw a **45.1% increase** in ALL overdose deaths- Apr 2020-Apr 2021.



79.2

Legend for Percent Change in Drug Overdose Deaths Between 12-Month Ending Periods

Alcohol and Drug Addiction Worsens in Oregon-Deaths soar during pandemic

- Oregon now ranks 2nd in the country for substance use disorders
- Oregon fell to 50th in access to treatment,
- Oregon ranks 1st in prescription opioid misuse
- Oregon ranks 1st in methamphetamine use

CDC, Center for Health Statistics, Vital Statistics Rapid Release (VSRR) program: <u>https://emergency.cdc.gov/han/2020/han00438.asp</u>

<u>National Survey on Drug Use and Health</u>, conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA), 2020

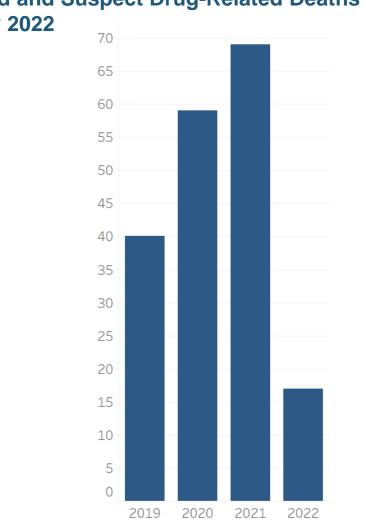


-19.8

- Clackamas County saw a 68% increase in drugrelated deaths from 2019 (41) to 2021 (69).
- The presence of opioids in the results of people who died in association with substance use has increased 168% from 2019 (19) to 2021 (51) in Clackamas County.
- Deaths related to fentanyl have increased more than 5 fold from 2019 (5) to 2021 (40).

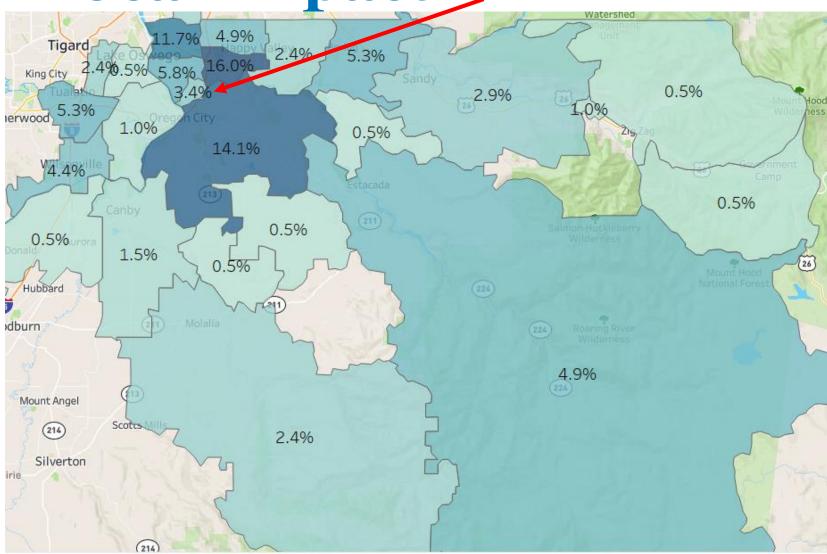
Source: Clackamas County Medical Examiner Created by: Clackamas County Public Health Division Data are preliminary and subject to change

Health. Housing



Confirmed and Suspect Drug-Related Deaths 2019-July 2022

Zip code 97027- 3.4%



Drug-Related Deaths by Location of Death (zip code)

2019-July 2020

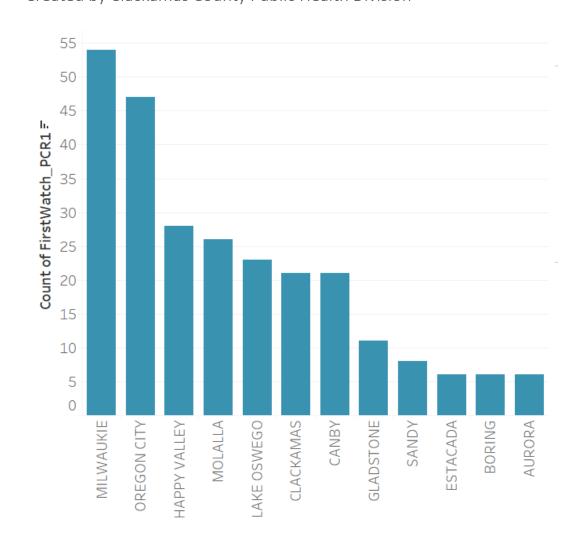
*Data are preliminary and subject to change Source: Clackamas County Medical Examiner Created by Clackamas County Public Health Division



of Calls by Drug (Drugs appearing less than 5 times suppressed)

UNKNOWN	127
fentanyl	39
оху	21
meth	19
heroin	19
antidepressant	15
acetaminophen	9
opioid	7
antihistamine	6
cocaine	5
antianxiety	5

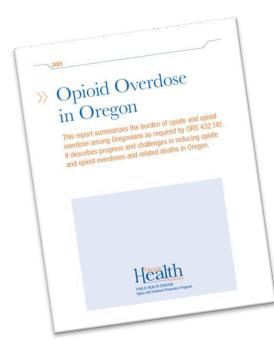
Overdose-Related 911 Calls via FirstWatch By Week and By City February 1– July 30, 2022 Source: FirstWatch Created by Clackamas County Public Health Division





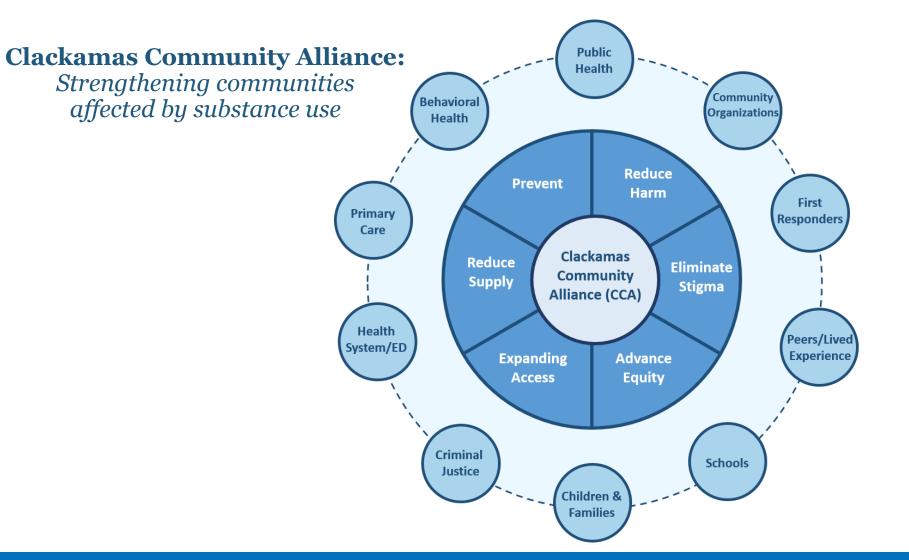
Key Take-Aways from OR Overdose Report:

- Many people who overdosed never touched the health care system
- 70% of people who overdosed were not administered naloxone
- Root causes: lack of community cohesion, mental health issues, and absence of basic needs
- Stigma associated with substance use
- Lack of access to shelters, detox facilities, and treatment centers
- Many don't know what community resources exist





Community Response





Settlement Agreement Background

- Oregon will receive \$333 million as part of two settlements, including Johnson & Johnson (\$5 billion) and the 3 distributors (\$21 billion).
 - Defendants have up to 18 years to complete payments.
 - State funding: 45%
 - Local funding: 55% to counties and cities who signed onto the agreement
- Clackamas County will receive approximately \$13.7 million.
 - Cities will receive lesser amounts depending on population.
 - Expect that payments will be front-loaded with 40% distributed in the first 2-3 years.
 - First payment expected July 2022
 - County Attorney fees paid by national settlement, not county funds



Allowable Uses of Settlement Funding

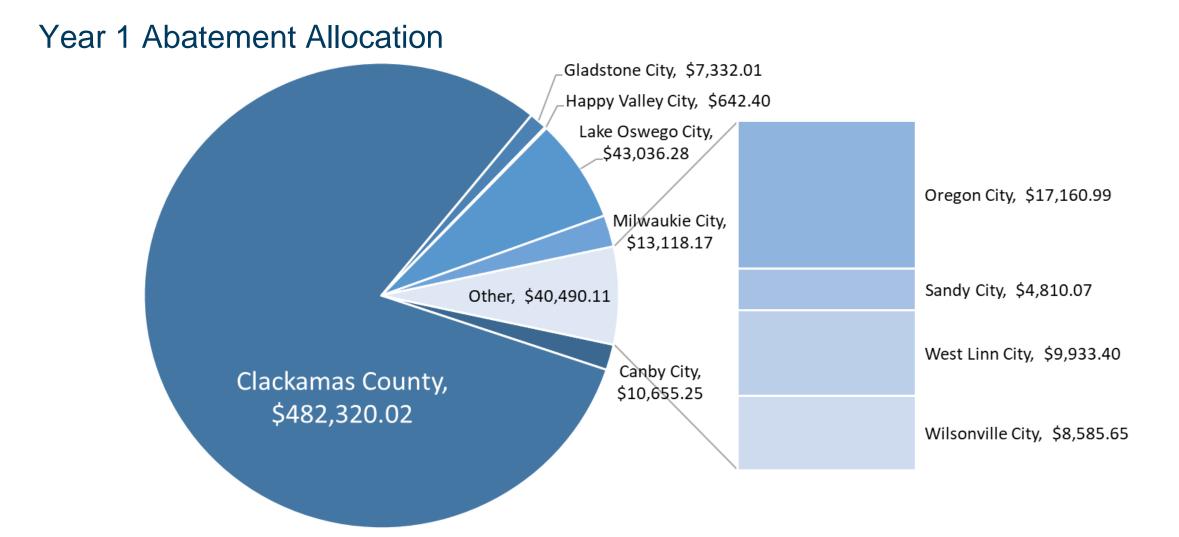
The Exhibit E of the Settlement Agreement identifies **nine core abatement strategies:**

- 1) Targeted naloxone distribution
- 2) Criminal justice interventions
- 3) Medication for Opioid Use Disorder
- 4) Enrich prevention strategies
- 5) Linkage to Syringe Exchange
- programs

- 6) Healthcare system interventions
- 7) Warm hand-off program and recovery
- support
- 8) Data collection and research
- 9) Treatment during pregnancy &
- postpartum period



Settlement Funding for Cities





Guiding Principles

- 1) Spend Money to save lives
- 2) Use evidence to guide spending
- 3) Invest in youth prevention
- 4) Focus on racial equity
- 5) Develop a fair & transparent process

Source: Principles For the Use of Funds from the Opioid Litigation, Johns Hopkins Bloomberg School of Public Health, opioidprinciples.jhsph.edu

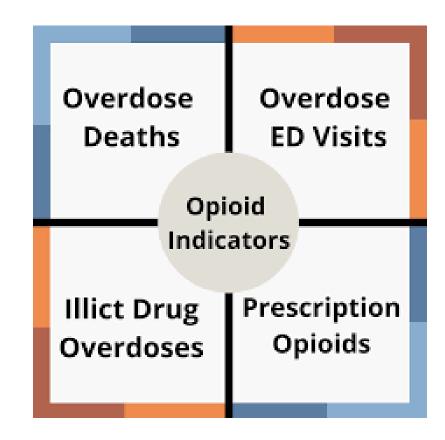


Using Data to Inform Decisions

Public Health staff maintain a substance use data dashboard that includes key indicators of opioid harm. These numbers describe some, but not all, of the impact of opioids on the people of our county.

Data can be used to identify populations and areas of the county most impacted. Data collected includes:

- Overdose deaths involving opioids
- Emergency Department (ED) visits for overdose
- Non-fatal overdoses that involve illicit drugs, such as heroin, fentanyl and meth
- The rate of **prescriptions for opioids**





Opioid Settlement Framework

Evidence	 Assess gaps in prevention, treatment, harm reduction and recovery.
Equity	 Identify populations and those most generally impacted including our communities of color.
Collaboration	 Engage communities to identify priorities and need to inform funding allocations. Bring together multi-disciplinary representation including those with lived experience to advise the process.
Transparency	 Provide annual report on investments and lives saved.



Support to Cities

- Inform investments
 - Assessment findings & data
 - Identify gap & needs
 - Share evidence-based programs/practices
- Maximize investments
 - Coordinate aligned activities to build economies of scale
 - Strengthen local response through collaborative investments



Questions?

