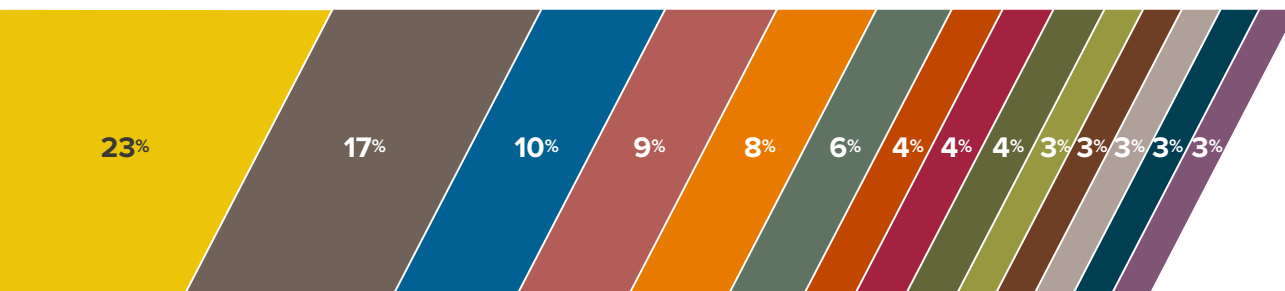


OPIOIDS AND THE CONSTRUCTION INDUSTRY

Opioids have commonly been prescribed to construction workers to treat the pain caused by occupational injuries. Since use of opioids can lead to addiction and overdose deaths, it is important for employers to understand the facts about addiction and for workers to understand the risks and alternatives.



CONSTRUCTION WORKERS ARE SIX TO SEVEN TIMES MORE LIKELY TO DIE of an opioid overdose than workers in other professions.



- CONSTRUCTION
- NONE*
- INSTALLATION, MAINTENANCE, REPAIR
- PERSONAL CARE
- FOOD SERVICE
- SALES
- MANAGEMENT
- ALL OTHERS
- MISSING/UNKNOWN
- TRANSPORTATION
- OFFICE SUPPORT
- HEALTHCARE
- SOCIAL SERVICE
- PRODUCTION

DATA SOURCE: Delaware Department of Health and Social Services, Division of Public Health, Health Statistics Center.

*Includes persons who were unemployed, students, disabled, homemakers, or retired.
Notes: Occupation was categorized using the federal 2018 Standard Occupational Classification system. Industry of occupation was utilized when applicable.



The workplace is a key environment to prevent opioid misuse, addiction, and overdose.

You can create a safe and healthy workplace environment in which both employees and businesses thrive, through:

- » Strong workplace policies
- » Robust employee education
- » Strong health benefit programs
- » A healthy workplace culture
- » Well-trained managers

What businesses can do to reduce stigma.

Stigma persists around not only opioids but also prevention, treatment, and recovery services. Studies show that only about one in 10 people with a substance use disorder receives treatment, and that stigma is a key barrier. The belief that addiction is a moral failing and fueled by personal choice has been widespread and long held, and it keeps individuals from accessing services that are essential to their recovery. Understanding addiction as a chronic disease requires compassion and evidence-based medical intervention.

THE WORDS YOU USE MATTER.



DO SAY

(NON-STIGMATIZING LANGUAGE):

Person with a substance use disorder
Substance use disorder or addiction
Use, misuse
Risky, unhealthy, or heavy use
Person in recovery
Abstinent
Not drinking or taking drugs
Treatment or education for addiction
Medication for addiction treatment
Positive, negative (toxicology screen results)



DON'T SAY

(STIGMATIZING LANGUAGE):

Substance user or drug abuser
Alcoholic
Addict
User
Abuser
Drunk
Junkie
Drug habit
Abuse
Problem
Clean
Substitution or replacement therapy
Medication-assisted treatment
Clean, dirty



What businesses can do to encourage treatment.

Only a small percentage of people with an opioid use disorder (OUD) actually receive treatment. Employers can dramatically increase accessibility by ensuring their health care plans cover all possible options — methadone, buprenorphine, and naltrexone, as well as behavioral therapy.

- » Data shows that employer-initiated treatment is more effective than treatment initiated by friends and family.
- » Employees should not be required to use any one specific form of treatment, and specific treatment types should not be mandated in a workplace policy.
- » Though OUD is a long-term disease, it has an exceptionally good prognosis for recovery — more than 10% of Americans live in recovery today.
- » As with any long-term disease, relapse is a normal part of the recovery process. Treatment of long-term and chronic diseases often involves addressing deeply rooted behaviors that can take a long time to change. Relapse rates for substance use disorder are similar to rates for other chronic medical illnesses.
- » If you or someone you know is struggling with substance use and would like information on available treatment and recovery services, call the 24/7 Crisis Information and Referral hotline at 1-800-345-6785 (Kent and Sussex counties) or 1-800-652-2929 (New Castle County), or visit [HelpsHereDE.com/Get-Help](https://www.HelpsHereDE.com/Get-Help).



View the entire 49-page Construction Workplace Toolkit document [here](#).



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health
Office of Health Crisis Response