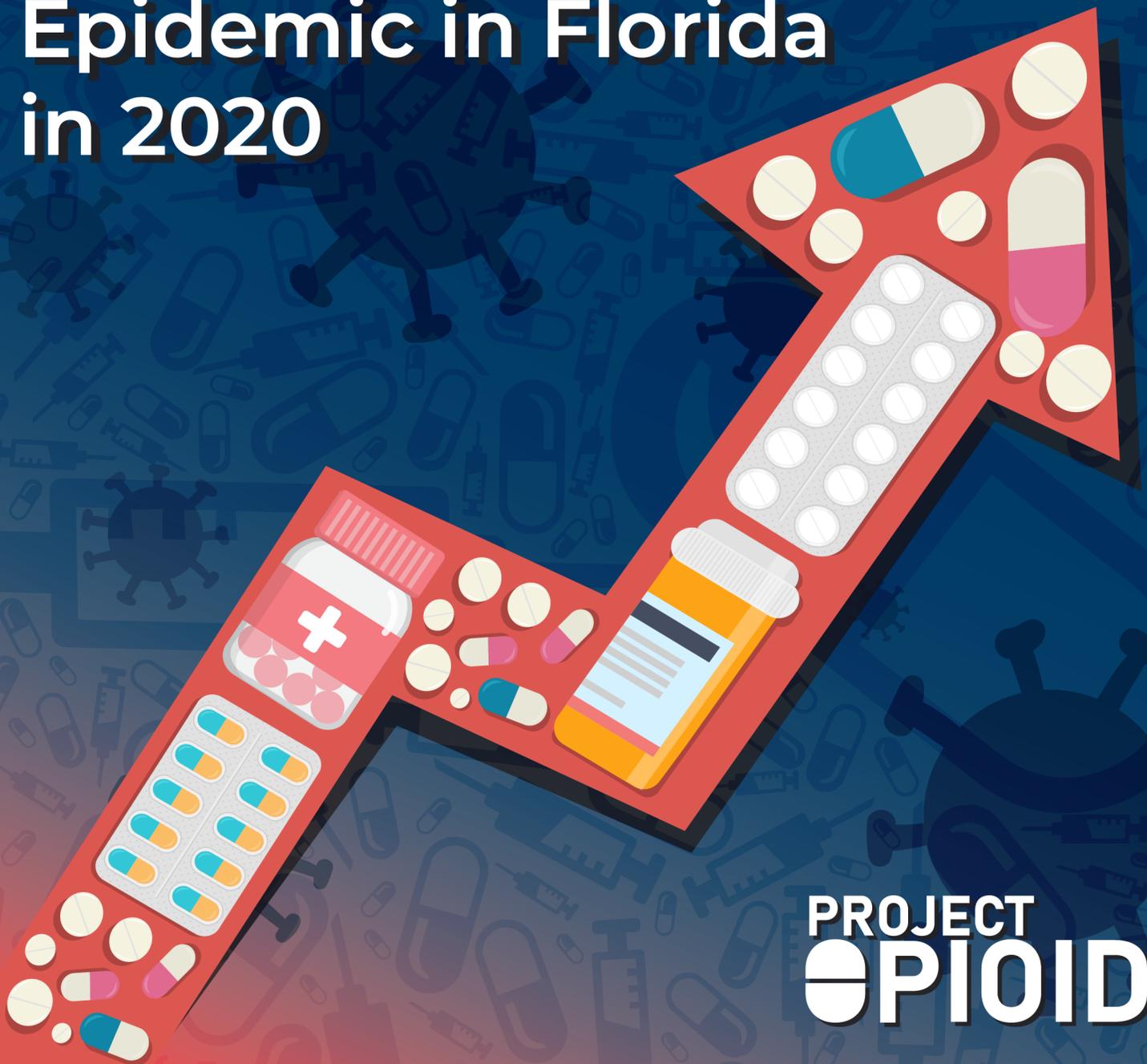


# The COVID-19 Overdose Crisis:

A Pandemic Fueling an  
Epidemic in Florida  
in 2020



PROJECT  
OPIOID

# EXECUTIVE SUMMARY

Based on the data from the Florida Department of Health, all drug overdose deaths (provisional) are up 43% from 2019, 55% from 2018, and overdose deaths are projected (based on FDOH trend analysis) to be 60% higher by the end of 2020.

- Deaths from overdose in 2018 were 54 per 100,000
- Deaths from overdose deaths in 2019 were 56 per 100,000
- Projected deaths from opioid overdose in 2020 are 94 per 100,000
- The number of people that died in the state of Florida daily in 2018 from drug overdose was 33.
- The number of people that died in the state of Florida daily in 2019 from drug overdose was 35.
- The projected number of people that will have died in the state of Florida daily by the end of 2020 due to drug overdose is a staggering 55 per day.
- Fentanyl caused the most drug overdose deaths in Florida in 2019 (3,244), which represented a 38% increase over the previous year (2,348)
- When fentanyl is present in a decedent's body, it is the cause of death 89% of the time, and the death is ruled accidental 93% of the time.
- When comparing January-August of 2019 to the same time period in 2020, the EMS administered 5,769 more units of Naloxone in 2020, a 28% increase over the same timeframe in 2019.



# OPIOID OVERDOSE in 2020

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# About the Authors



**Andrae Bailey**  
Founder,  
Project Opioid

Andrae Bailey is founder and president of Change Everything, an organization committed to creating catalytic transformation for society's most impactful and seemingly unsolvable problems. His work focuses on solving important issues like poverty and homelessness, bringing together leaders to find solutions that combine compassion with common sense. Andrae is also the founder of Rethinking Homelessness, a national initiative modeled after the work Bailey did for the cause in Central Florida. Recently, Bailey launched Project Opioid, a new business-led collaboration on the regional opioid crisis. In 2015, Andrae Bailey was named Orlando Sentinel's Central Floridian of the Year.

Andrae is the founder of Project Opioid, a regional initiative in Orange, Osceola, and Seminole Counties seeking to create a "new frontline" on the opioid crisis by utilizing community, business and faith leaders from around Central Florida to make institutional change through new policies and legislation and to de-stigmatize Opioid Use Disorder (OUD). More than 300 leaders from the public and private sectors of Central Florida convened in January of 2019 to launch an initiative designed to address the regional opioid crisis. By using business and faith leaders, Project Opioid will make a lasting and impactful change within our community and save the lives of those forever changed by these powerful drugs.



**Dr. Kendall Cortelyou-Ward**  
Associate Professor,  
University of Central Florida

Kendall Cortelyou-Ward, PhD is an Associate Professor and Program Director of the Healthcare Informatics Master's Program in the Department of Health Management and Informatics at the University of Central Florida (UCF). Dr. Cortelyou-Ward also serves as the CoChair of the UCF Population Health Collaborative, focusing on population health research. She teaches health informatics and information systems courses to graduate and undergraduate students and conducts research in these areas.

Dr. Cortelyou-Ward has over 15 years of professional and academic experience in healthcare management and informatics, including serving as the Workforce Director for the UCF Regional Extension Center and as a Research Analyst for the HIMSS Value Suite project. Some previous projects include an evaluation of the use of mobile apps to improve patient outcomes and determination of financial impact of hospitals on the local community. Her current research interests include patient engagement, privacy and security, mixed methods research and the value of health information technology. Dr. Cortelyou-Ward holds a PhD in public affairs with a specialization in health management research and a master's in health administration from the University of Central Florida. She earned her Bachelor of Science in human resources from the University of Florida.

# A Letter From Andrae Bailey



The scope of Central Florida's opioid crisis, as it is throughout much of the state and America is staggering. It is killing our residents at historical rates and as a man-made epidemic, this drug crisis is unprecedented. I know we throw around words like "unprecedented" very casually, so let me give you a dictionary definition of the word: "Unprecedented: adjective 1: without previous instance; never before known or experienced; unexampled or unparalleled: an unprecedented event."

Quite simply, this is the largest public health crisis in our nation's history, and its roots and impact are very much a Florida story. On the verge of death, is inconceivable. The number of individuals who die every day, or are on the verge of death, is inconceivable. Opioids, nearly by themselves, have driven life expectancy down in America, Florida, and yes, in Greater Orlando. And in our region those under the age of 39 make up the majority of the death toll.

These are not people who wanted to die. They are just like us, our friends, family members, and neighbors who, for a variety of reasons, were introduced to our nation's favorite painkiller: opioids. Many, especially teens and young adults, are being introduced to prescription opioids as "party drugs," and finding their pathway to addiction through the medicine cabinets of their families and friends.

This playful experimentation often brings tragic long-term consequences with addiction rates reaching astonishing heights for those casually taking opioids. If you, yourself, take a 30-day prescription of opioids for any reason, you have a 1 in 3 chance of becoming fully dependent on the drug: addiction.

Others begin their drug addiction journey at their local doctor's office, looking for relief from long-term or even short-term pain. This might be one of the greatest tragedies of the crisis; thousands of Central Floridians who sought help for a medical problem from their trusted physician were given highly dangerous and addictive opioids with little instruction or warning. As these individuals began their usage, they also began to develop a growing tolerance.

The stories need to be heard, they need to be told. These were not "bad" people or criminals who society can simply write off as "people who make bad choices." They are those we sit next to in the office, worship next to in church, and walk by on the street every day. They are Central Floridians who simply started on a path that can have a deadly consequence. Our hope is that this report will serve as the foundation, or simply a first step, for Central Florida to end our opioid crisis.

A handwritten signature in black ink that reads "Andrae Bailey". The signature is fluid and cursive, with a large, sweeping flourish at the end.

Andrae Bailey  
Founder,  
Project Opioid

# Overdoses in Florida (2019-2020)

For years, the opioid epidemic in America has been growing in intensity and scope. Fueled by increasingly powerful drugs and by combining both legal and illegal substances, the opioid epidemic has led to a steady and alarming rise in the number of overdoses and overdose deaths in the United States. Florida, as well, has been directly and adversely affected by this epidemic.

Because of the concerted effort of business, government, and the medical and non-profit sectors of our society, it appeared as recently as two years ago that we might be collectively turning the corner on this crisis. However, that temporary decline in the number of overdoses and overdose deaths in the recent past has proved to be an isolated incident. However, what is of more concern is the fact that the rate of growth in overdoses and overdose deaths since the onset of COVID-19 has been alarming. In fact, it has been more prolific than any stakeholder in this crisis could have imagined or predicted. The “perfect storm” arising from the unprecedented availability of legal and illegal substances, the devastating societal effects of COVID-19, and the ensuing mental health issues that have been exacerbated by the rising health concerns in our country have created conditions that have caused our overdose crisis to become much worse than any prognosticator could have imagined.

In the report that follows, we offer an abundance of data that shows an unmistakable alignment between our state’s (and our nation’s) responses to COVID-19 and the ensuing rise in the frequency of substance use, overdose, and overdose deaths in Florida and beyond. Where applicable, we also offer explanations for these outcomes, and, in a separate report we will offer a series of carefully crafted recommendations that can enable us as a society to effectively address the pandemic while simultaneously protecting those among us who may be susceptible to the pressures that our public health measures have spawned.

The Florida Department of Health has provided Project Opioid with the following data on November 11, 2020, which depicts the total number of all 2019 and 2020 fatal and nonfatal drug overdoses in Florida of unintentional or undetermined intent. This data, to be rightly interpreted, should be regarded as “provisional.” In other words, the data from the Department of Health is continually being updated as new reports come to them from the 25 medical examiner districts across the state.

In Florida, when a person dies of a suspected drug overdose, an autopsy by the medical examiner within that district is required. However, the medical examiners in Florida operate independently of one another, and that means that some of them may utilize processes that can be quite different from the processes of other medical examiners.

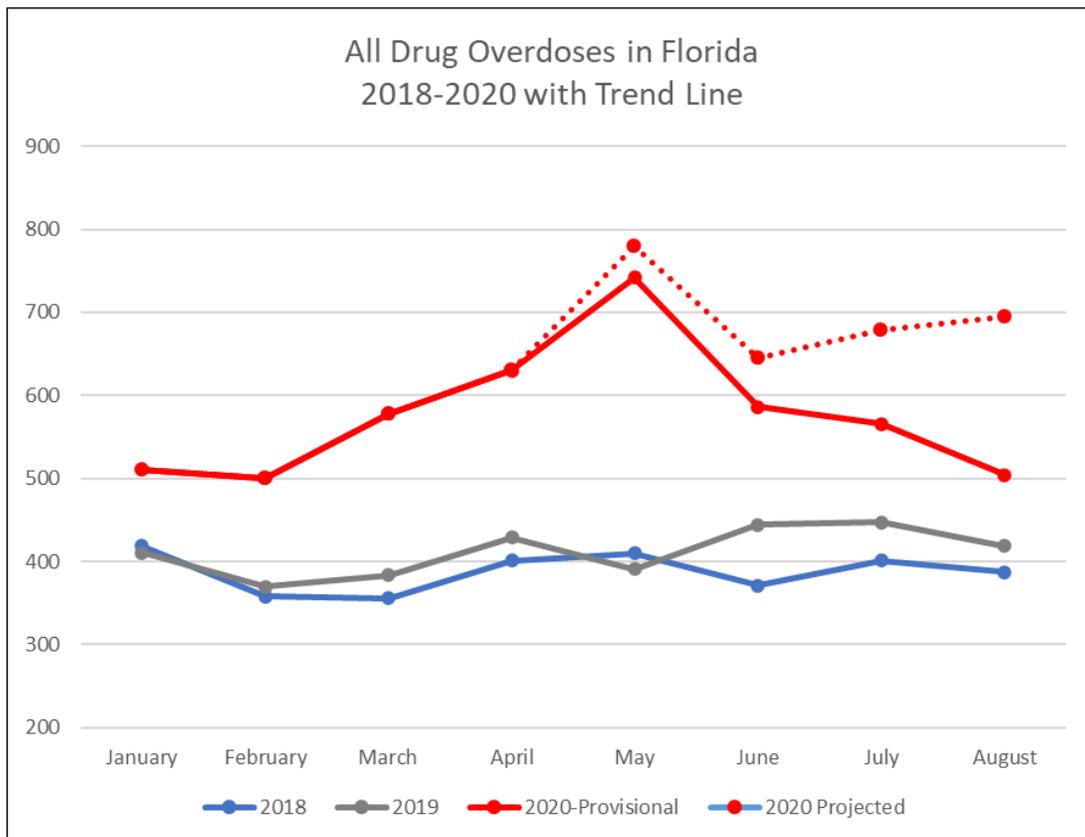
# Overdoses in Florida (2019-2020)

For example, when examining a potential overdose death in Florida, a medical examiner is required by the state to conduct an autopsy and to produce a toxicology report. Then this information is submitted, along with the medical examiner's report, to the Department of Health. Depending on the workload of each medical examiner and the kinds of processes that the medical examiner might utilize in his or her office, this process can take several weeks or even several months to complete. There is no state requirement involving the timeliness of these reports. In addition, 2020 data has been further delayed in some districts because of the reduced hours that some medical examiners and their staffs are working considering COVID-19 workplace restrictions.

What we have done, therefore, in light of this situation is to offer the following data chart (see Chart A below) that contains two red lines representing the data compiled to date regarding overdose deaths in the state of Florida during the calendar year 2020. The solid red line represents the hard data that has been officially reported to the Florida Department of State thus far this year by the state's 25 medical examiners. The dotted red line is the projected data that the Department of Health expects to receive from autopsies and toxicology reports that have not yet been submitted by medical examiners.

## CHART A

(Supplied by Florida Department of Health October 29, 2020)



# Overdoses in Florida (2019-2020)

## **This means that:**

- The data represented by the solid red line prior to the introduction of the dotted red line (January through April) are more likely to be exact than the data that follow (April through August). The vast majority of the medical examiner reports for this time period have been submitted to the state.
- The data's probability of precision increases with each passing month, because fewer and fewer "overdue" reports remain outstanding. As each month passes, more and more reports are received in Tallahassee.
- The gap between the two lines will have a tendency to close and the lines will have a tendency to converge as time passes and as more data reports are received from the state's 25 medical examiners by the Florida Department of Health.
- The solid red line (the hard data) cannot go down; it can only remain the same or go up as time passes and as more reports are received from the state's medical examiners. Consequently, the solid red line represents the minimum number of overdose deaths for each specified month. The dotted red line represents the best projection by the state (based on the state's experience and their communications with the medical examiners) of the numbers they can expect to see once all medical examiner reports are received.

# 2020 IN CONTEXT

The drug overdose statistics from the current year (2020) make more sense when analyzed in the context of the trends that existed in the two previous years (2018 and 2019).

In 2018 it appeared that government leaders and medical officials might have been witnessing the beginning of the decline of drug overdoses and overdose deaths in both Florida and the United States, and new hope emerged as a result of that year's improvement in statistical trends. In fact, many state and federal officials articulated their belief that America seemed to be on the right path toward finding real solutions for the accelerated use of fentanyl and other addictive substances. There was also a heightened sense of optimism because Narcan was being distributed and used more than ever before, and many people pointed to this action as the source of the improvements. So, the consensus at the end of 2018 was that Florida and the United States were on the right course toward winning the war against drug overdose.

In 2019, however, the state saw an overall increase of 15% in opioid-related deaths, and this was a surprise for many who had thought we were making significant headway toward a resolution to the opioid epidemic. In 2019, for example:

- There was a total of 12,574 drug-related deaths in Florida (meaning that drugs were present at the time of death). Therefore, total drug-related deaths increased by 4% (494 people) in the state between 2018 and 2019.
- There were 6,128 opioid-related deaths, meaning that opioids were identified as either the cause of death or they were present in the tissues of the decedent at the time of death. This represented an increase of 10% (552 people) over 2018.
- Fentanyl caused the most drug overdose deaths in Florida in 2019 (3,244), which represented a 38% increase over the previous year (2,348).
- Fentanyl analog, oxycodone, heroin, hydrocodone, morphine, and methadone caused deaths all declined in 2019.
- In 2019, deaths caused by buprenorphine increased by 46% (16 more) over 2018. However, buprenorphine was present in less than 1% of all decedents.

# 2020 IN CONTEXT

In 2019, fentanyl occurrences increased by 35% over the previous year (2018), and fentanyl-caused deaths increased by 38% during this same time period. (NOTE: When fentanyl is present in a decedent's body, it is the cause of death 89% of the time, and the death is ruled accidental 93% of the time.)

- Of the 3,244 people killed by fentanyl in 2019:
  - o 41% of them (1,348) were between the ages of 35 and 50
  - o 28% of them were between the ages of 26 and 34
  - o 21% were 50 and older
  - o 9% were between the ages of 18 and 25.

Consequently, when 2020 arrived and the pandemic started to impact the lives of all Floridians, the state was already dealing with a disappointing rise in overdose deaths. Consequently, it is the data from 2020—particularly the data from March through August—that is the focal point of our report. Between March and August of 2020, when the pandemic was causing shutdowns and lockdowns and when our most current data was being compiled, there were 3,606 actual deaths from drug overdose in the state (a baseline figure that could possibly increase, but cannot possibly decrease once all medical examiner reports are filed). This represents a 43% increase over 2019, as well as a 55% increase over 2018, and an unprecedented rise in drug-related deaths in the state.

However, if you look at the numbers that are projected (pending the receipt of all final reports from the state's 25 medical examiners), there could be as much as a 59% increase in the number of drug overdose deaths in Florida over the same period last year and a 72% increase over the entirety of 2018.

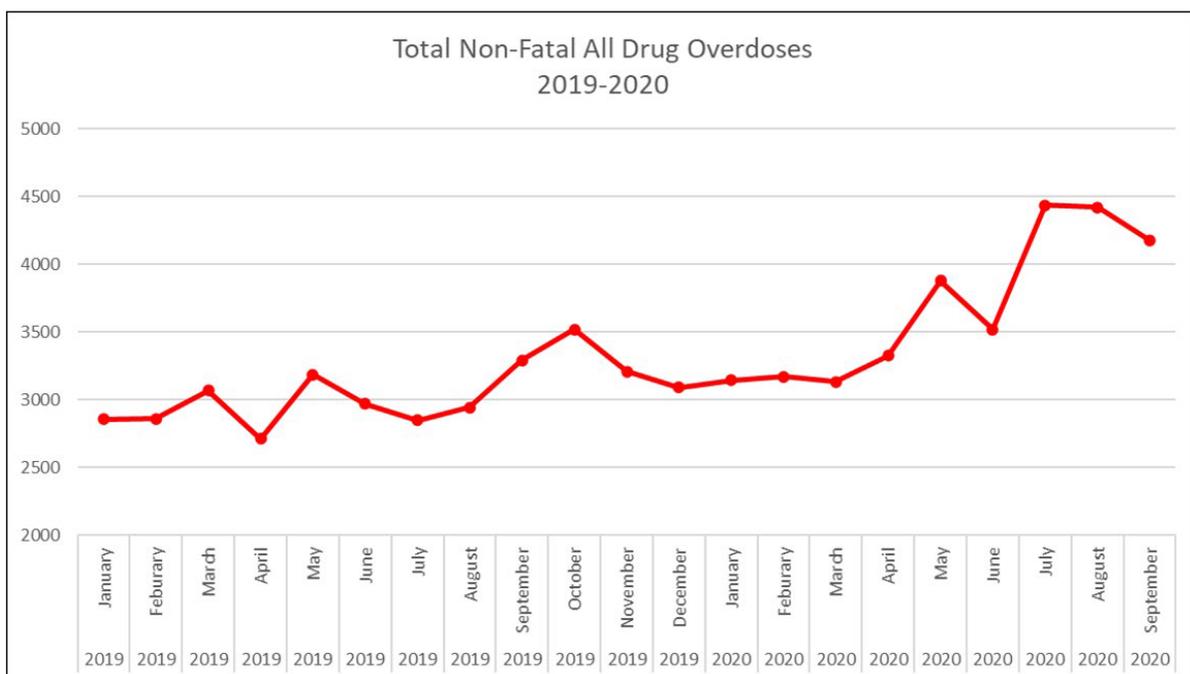


# 2020 IN CONTEXT

During the pandemic, therefore, there has been an unprecedented rise in the number of drug overdose deaths in Florida. And during the month of May (right in the middle of the period of heightened restrictions), there was a significant spike in the number of drug overdose deaths (742 actual deaths and 779 projected deaths in the state of Florida), a projected 99% increase over May 2019 (when 391 people died). In fact, during the entirety of this period (March through June of 2020), a total of 2,536 people died of a drug overdose in Florida, compared to 1,648 people during the same 3-month period in 2019 (at least a 54% increase in deaths and a 60% projected increase). It is possible, therefore, that the pandemic and specifically the most restrictive months will eventually produce an increase in the number of drug overdose deaths of at 60% or more once the final reports are submitted and the final numbers are tabulated, a statistical surge that is difficult to comprehend.

During the same period, however, Florida has also seen a significant uptick in the number of non-fatal drug overdoses. Since the beginning of the year, there have been a total of 36,101 non-fatal overdoses in the state, and 29,790 of them occurred between March and October, when the pandemic was leading to emergency measures and isolation (as compared to 24,525 non-fatal overdoses between March and October of 2019). This represents a 21% increase in the number of non-fatal overdoses between these two time periods. Interestingly, there was a spike in non-fatal overdoses in July 2020, when 4,437 Floridians overdosed, as compared to 2,848 the previous year (a 56% increase).

**CHART B**



# EMERGENCY RESPONSE DATA

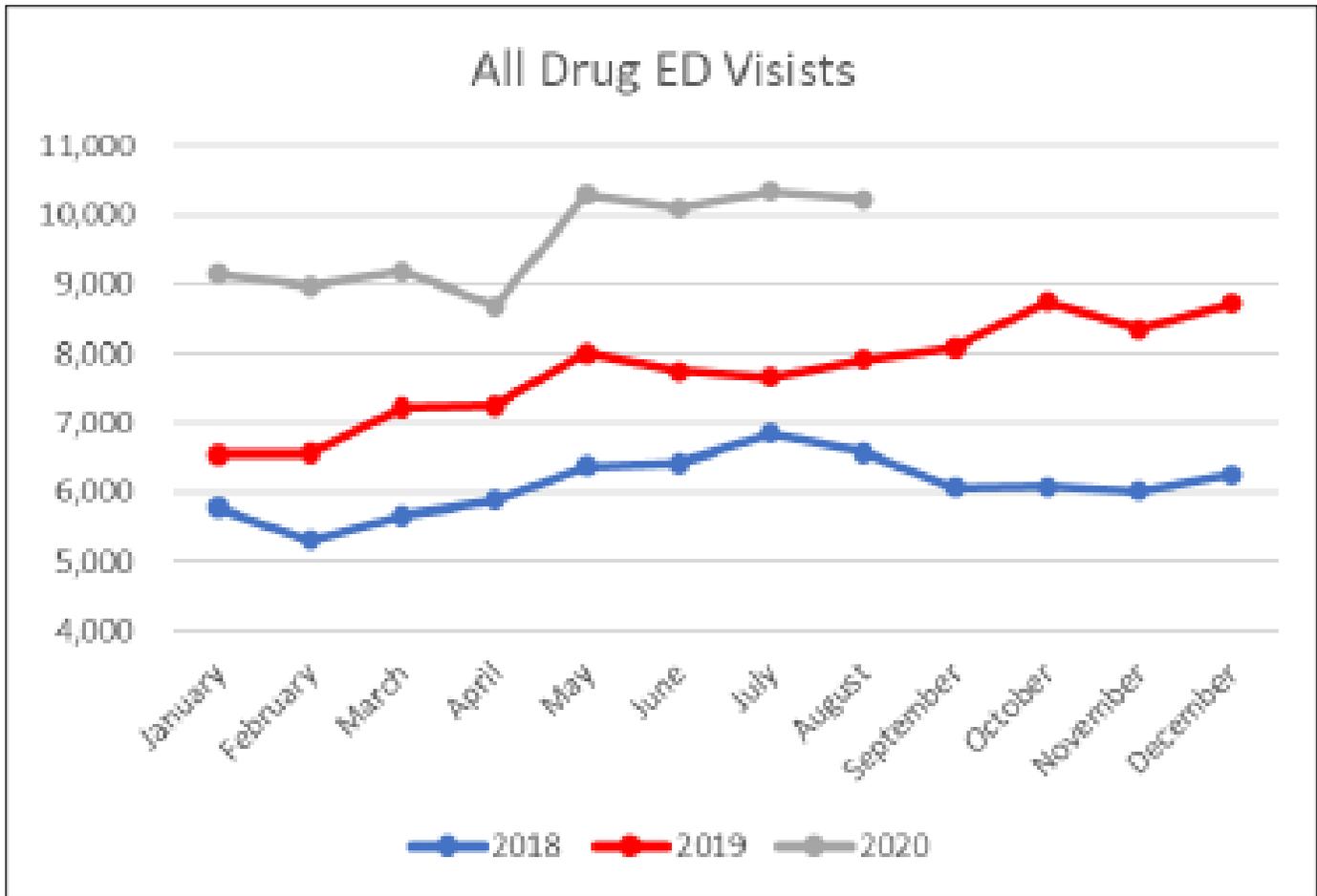
Data from the Florida Emergency Department, which measures the number of emergency visits made by first responders across the state, is remarkably similar to the data provided by the Florida Department of Health, with the exception that Emergency Department data has no lag time. The number of emergency visits are reported and compiled relatively quickly. This data, however, demonstrates from another perspective just how dramatically drug overdoses and drug overdose deaths have increased in Florida over the past 2 years.

In Chart C below, obtained from Florida Emergency Department data, it is clear that, from January to August 2018, there were a total of 48,841 emergency visits for drug overdose in the state of Florida. However, during the same period in 2019, that number increased to 55,918. And in that same period in 2020, the number grew even larger to 76,978. Therefore, between January-August 2019 and January-August 2020, the number of drug overdoses throughout the state increased by 21,060 (a 27% increase). In addition, there was a significant spike in emergency visits for all drug overdoses in July 2020, when there were a total of 10,351 drug-related emergency responses within Florida. The grey trend line on the chart below, which conveys these numbers in a visual format, mirrors the projected trend line provided by the Florida Department of Health for drug overdoses in 2020.

- From January to August of 2018, there were 48,841 emergency department visits for drug overdose in the state of Florida.
- From January to August of 2019, there were 55,918 emergency department visits for drug overdose in the state of Florida.
- From January to August of 2020, there were 76,978 emergency department visits for drug overdose in the state of Florida.
- The number of all drug overdoses increased by 21,060 between 2019 and 2020 (January to August) this represents a 27% increase.
- There was a significant spike in ED visits for all drug overdoses in July of 2020 when there were 10,351 visits in the state of Florida.

# NALOXONE DISTRIBUTION

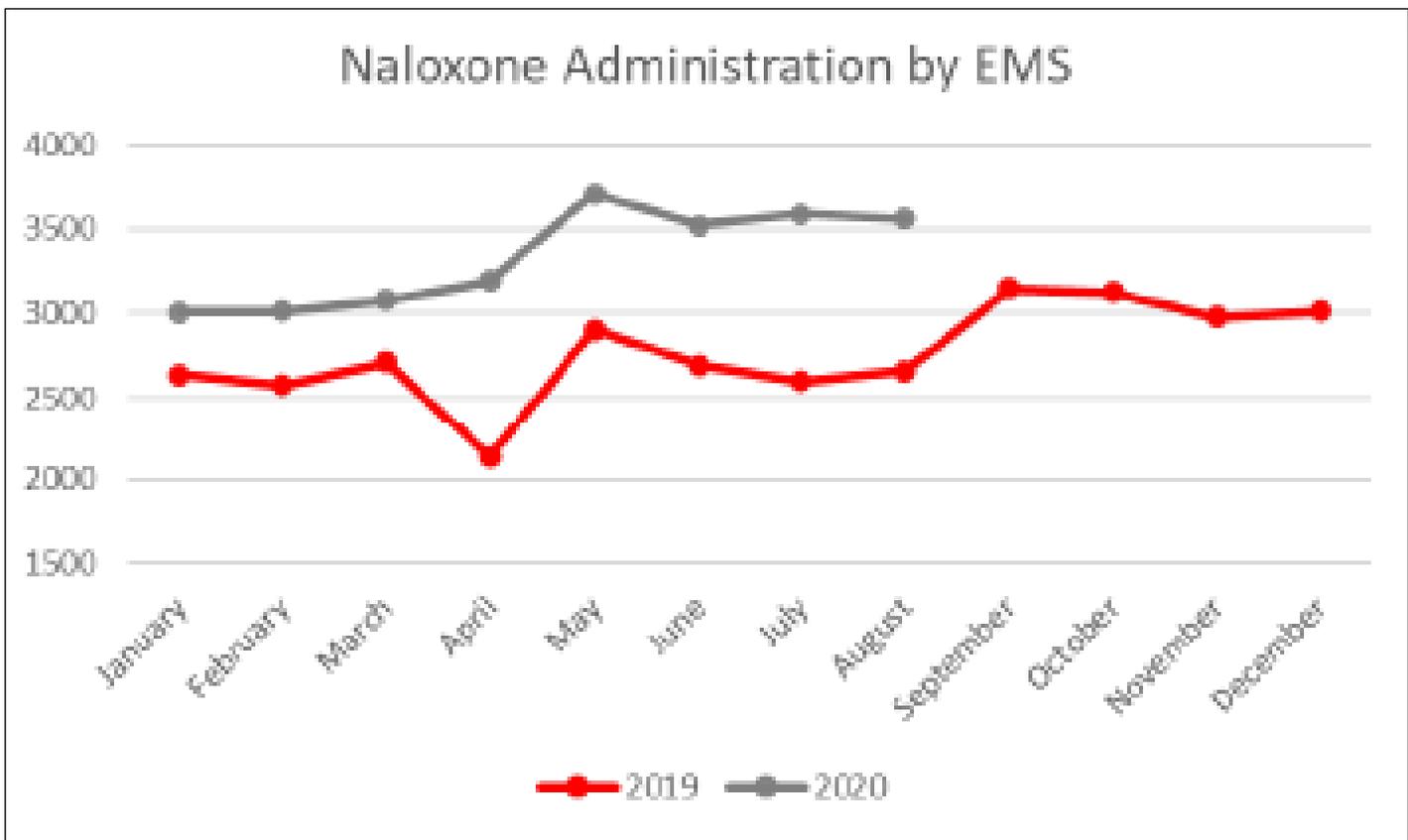
CHART C



Florida's Emergency Medical Services (EMS) is responsible for administering Naloxone throughout the state. Naloxone is a medication designed to rapidly reverse opioid overdose, and this medication can be easily administered by a non-professional. Naloxone is an opioid "antagonist," meaning that the drug binds to opioid receptors and can reverse and block the effects of opioids. It can very quickly restore normal respiration to a person whose breathing has slowed or stopped as a result of overdosing with heroin or a prescription opioid pain reliever.

# NALOXONE DISTRIBUTION

CHART D



Like the data on drug overdoses and drug overdose deaths provided by the Florida Department of Health and the emergency response data provided by the Florida Emergency Department, the data on Naloxone distribution provided by the Emergency Medical Services (also a part of the Florida Department of Health) points to the same significant rise in overdose-related incidents:

- In 2019, EMS administered Naloxone a total of 33,184 times, with 10,443 of those administrations coming during the months of March to June.
- Between January and August 2020, EMS administered Naloxone 26,685 times, with 13,511 of those administrations coming during the months of March to June (when COVID-related restrictions were most common).
- When comparing January-August of 2019 to the same time period in 2020, the EMS administered 5,769 more units of Naloxone in 2020, a 28% increase over the same timeframe in 2019.

# CONCLUSIONS

In light of the data made available to us through the Florida Department of Health and the Florida Emergency Department and in light of the trends that are evident in that data, the conclusion we must draw regarding drug overdoses and overdose-related deaths, both actual and projected, is that a clear relationship exists between the rise in drug overdoses and overdose deaths and the onset of COVID-19. Particularly during those months when public health measures (like involuntary business closures and mandated quarantines) and self-imposed and socially imposed restrictions (like voluntary business closures and self-imposed quarantines) were most prominent in Florida, drug-related incidents increased significantly.

When joined with the equally convincing evidence made available to us through the Advanced Recovery Systems survey (see Page XX), there is no doubt that the dramatic lifestyle changes and other factors associated with COVID-19 have led to a surge in substance use, drug overdoses, and related deaths. In fact, according to Shatterproof, a national nonprofit organization dedicated to transforming addiction treatment, overdose deaths have risen 42% nationwide during the COVID-19 pandemic. And the American Medical Association reports that more than 40 states have registered increases in opioid-related mortalities in recent months.

Therefore, because COVID-19 cases are again on the rise, it behooves leaders at all levels of government to consider the ramifications of imposing additional public health measures without giving commensurate consideration to the provision of appropriate mental health and substance abuse services for those who are most vulnerable to addiction, overdose, and death. In other words, any plan for protecting our citizens from COVID-19 must contain an equally aggressive plan for defending them from the drug abuse and mental health traumas that our society's protective measures can spawn.



Between November 9<sup>th</sup> and 13<sup>th</sup>, Project Opioid partnered with Advanced Recovery Systems, a national network of addiction treatment centers, survey 785 Florida residents who had admitted to using drugs and/or alcohol during the previous 30 days. These 785 people were located through Pollfish, an online platform that surveys people on a global scale. Pollfish originally provided researchers with a total of 1,636 people who were interested in participating in the Advanced Recovery Systems project. However, after Advanced Recovery Systems screened participants to find those Florida residents who had used drugs and/or alcohol in the previous 30 days and who would be willing to participate in a substance use survey, a total of 785 remained.

Once identified, however, Advanced Recovery Systems sent a series of 25 survey questions to these 785 Florida-based drug and alcohol users in order to discern any patterns that might exist in their substance use habits and their mental health challenges. The objective of this research was to determine any impact that COVID-19 might be having on the substance use habits of Floridians who consume drugs and/or alcohol and any impact that COVID-19 might be having on the mental health of drug and alcohol users in Florida. All 785 subjects responded to the questions in the survey.

Unlike other data in this report, which is provided by the Florida Department of Health and other government institutions, the data in this portion of the report is based on primary information acquired directly from substance users. Following is a summary of the survey, which as provided to Project Opioid by The Recovery Village of Umatilla, Florida, part of the Advanced Recovery Systems network.

## GENERAL SUBSTANCE USE

When the 785 people who participated in the survey were given a list of substances from which to choose, alcohol was the substance that participants reported misusing most often. From a list that contained “alcohol, prescription opioids, heroin/fentanyl, cocaine, methamphetamines, marijuana, benzodiazepines, prescription stimulants, and other”:

- 82% of the survey respondents reported “using or misusing” alcohol.
- And, among those who reported that they are not currently using drugs, 92% reported using alcohol.

## GENERAL SUBSTANCE USE

However, the survey also showed that:

- A respondent who reported misusing alcohol was less likely to misuse multiple substances,
- While respondents who selected any other substance on the list as their preferred substance for misuse were more likely to use one or more additional substances.

When alcohol was removed from the equation, 49% of the respondents reported using one or more other substances on a daily basis during the pandemic. And, when pre-COVID drug use was compared to current drug use, the percentage of people who answered, “I don’t use drugs” barely changed (moving from 33% to 35%). But the share of people who answered, “daily use” and “multiple times a day” increased. In other words, people across the board reported that they had increased their usage of substances (other than alcohol) during the pandemic.

Participants were also asked to give their reasons for misusing drugs during the previous month. They were given a choice of eight responses to this question and were asked to select all the responses that applied to them.

The responses were:

- To cope with stress
- To cope with mental health symptoms like anxiety and depression
- Boredom
- To treat pain
- Recreational or social
- I’m physically dependent
- It’s part of my daily routine (example: a drink with dinner nightly)
- Other

## GENERAL SUBSTANCE USE

Three of the top four responses to this question were associated with relief from some type of pain (physical or mental):

- To cope with stress (62%)
- Recreational or social (42%)
- To cope with mental health issues like anxiety and depression (36%)
- To treat pain (31%)

## MENTAL HEALTH ISSUES

When asked, “Do you think your mental health has been impacted by COVID-19?” a total of 601 respondents (76.56% of the participants in the survey) reported that their mental health had been affected by the COVID-19 pandemic. More than half of these respondents (50.25%) said the impact was significant.

When asked, “What symptoms have you noticed?” the most common symptom reported by survey participants was anxiety/nervousness, with 75.12% of the respondents reporting that they had experienced anxiety/nervousness during the pandemic. 69.47% of participants reported experiencing depression and/or loneliness. Consequently, COVID-19 proved to be a major driver of these symptoms, as 63.33% of the respondents reported that their symptoms had appeared since the start of the pandemic, and, among the people who said that they had experienced these symptoms prior to the pandemic, 58.33% reported that their symptoms had grown worse.

Among participants who reported depression/loneliness in their lives:

- 75.81% were also anxious/nervous, and 62.56% said the depression/loneliness was a new factor in their lives, emerging for the first time during the pandemic.
- People who reported depression/loneliness also reported that their mental health was significantly impacted by COVID-19 at a much higher rate than the overall sample of participants (56.28% depressed/lonely versus 38.47% overall).

## MENTAL HEALTH ISSUES

When asked, “Do you think your mental health has been impacted by COVID-19?” a total of 601 respondents (77% of the participants in the survey) reported that their mental health had been affected by the COVID-19 pandemic. More than half of these respondents (50%) said the impact was significant.

When asked, “What symptoms have you noticed?” the most common symptom reported by survey participants was anxiety/nervousness, with 75% of the respondents reporting that they had experienced anxiety/nervousness during the pandemic. 69% of participants reported experiencing depression and/or loneliness. Consequently, COVID-19 proved to be a major driver of these symptoms, as 63% of the respondents reported that their symptoms had appeared since the start of the pandemic, and, among the people who said that they had experienced these symptoms prior to the pandemic, 58% reported that their symptoms had grown worse.

Among participants who reported depression/loneliness in their lives:

76% were also anxious/nervous, and 63% said the depression/loneliness was a new factor in their lives, emerging for the first time during the pandemic.

People who reported depression/loneliness also reported that their mental health was significantly impacted by COVID-19 at a much higher rate than the overall sample of participants (56% depressed/lonely versus 38% overall).

People who said that they were not considering therapy (31%) reported lower rates of:

- Depression/loneliness (57% versus 69% overall)
- Anxiety/nervousness (70% versus 75% overall)
- Sleep problems (34% versus 44% overall)

Self-reported anger was almost identical (42% among those not considering therapy versus 41% overall).

## MENTAL HEALTH ISSUES

A total of 17% of participants said that fear of a loved one getting sick was their top concern during the pandemic, the second most common reply among survey respondents (financial stress was the top concern). Among the people in that group, depression/loneliness, anxiety/nervousness, sleep problems and anger were higher than they were in the overall population of respondents.

**TABLE A**

Symptom	Overall	Fear for a Loved One	DIFFERENCE
Depression	69.47%	74.31%	+ 4.84%
Anxiety	75.12%	75.23%	+ 0.11%
Anger	40.71%	47.71%	+ 7.00%
Sleep	43.62%	45.87%	+ 2.15%

Not surprisingly, the top concerns of people who said that another stay-at-home order would help their mental health improve were:

- The fear of getting sick (21%)
- The fear of a loved one getting sick (21%).

On the flip side, however, respondents who cited the financial impact of COVID-19 as their most consequential aspect of the pandemic proved more likely to conclude that a stay-at-home order would adversely affect their mental health (47% of those with a top impact of finances versus 41% overall).

The stress associated with strained relationships also was evident from the research. 26% of people reported significantly more arguments in in their households since COVID-19 started, and they reported more depression, anxiety, anger, and sleep issues. However, when isolating these factors, the researchers working on this project found that anger, more than any other symptom, was most likely to cause the respondent to become susceptible to the other symptoms that were studied. For example, those reporting problems with anger also reported increased sleep problems.

In addition, depressed and lonely people who had experienced these symptoms prior to COVID-19 widely reported a worsening of their symptoms, with 65% of the respondents reporting that the symptoms had worsened as compared to 2% who reported that they had improved.

## ACCESS TO MENTAL HEALTH TREATMENT DURING THE PANDEMIC

Survey results reveal that almost half (49%) of the respondents believed that the pandemic had made it more difficult to seek professional mental health services. However, the 31% of overall respondents who said they were not seeking treatment believed, by a margin of 79% to 21%, that the pandemic had not made it more difficult to seek professional mental health services. Consequently, the number of people experiencing access problems is probably much higher than the 49% that is reflected in the table below.

**TABLE B**

	Answers	More Difficult or Not		
		YES	NO	YES %
<b>Prior</b>	114	85	29	75%
<b>Currently</b>	94	68	26	72%
<b>Considering</b>	234	148	86	63%
<b>Not Considering</b>	242	52	190	21%
<b>Not an option</b>	101	28	73	28%
<b>TOTAL</b>	785	381	404	48.54%

Among those who are currently in treatment, 72% said that it was more difficult to obtain mental health treatment. Among those considering treatment, 63% said that it was more difficult to obtain mental health treatment. And 75% of the people who were in therapy prior to COVID-19 said it was more difficult to obtain treatment as a result of COVID-19.

**TABLE C**

Has it become more difficult to seek mental health care during COVID-19?				
	#	Yes	No	Yes %
Interested in care	442	301	141	68%
Not interested in care	343	80	263	23%

## SUBSTANCE USE AND GENERAL MENTAL HEALTH

A total of 77% of all survey respondents said that COVID-19 had affected their mental health, and 49.43% of current daily drug users reported a significant mental health impact. By contrast, only 26% of respondents who reported no drug use during the pandemic said that their mental health had been significantly affected.

## ANXIETY AND SUBSTANCE USE

Two categories of respondents offered some especially insightful information involving anxiety and substance use during the pandemic:

- Respondents who reported that they had used drugs on a daily basis during that timeframe
- Respondents whose mental health had been most significantly impacted by the fear of getting sick

Those respondents who reported that they had used drugs daily throughout the pandemic were equally likely as all other respondents to report financial problems as a top concern during the pandemic (23% of daily users and 23% overall). However, people in this group were more likely to cite the fear of getting sick as their primary source of anxiety (26% of daily users as compared to 17% overall). In addition, respondents in this group were more likely to report that their mental health symptoms were initially manifested during the pandemic (74% of daily users as compared to 63% overall). They were also more likely to say that they needed treatment for their drug use (63% among current daily users as compared to 43% overall).

Among respondents whose mental health had been most significantly impacted by the fear of getting personally sick, symptoms were more likely to have emerged during the pandemic than prior to the pandemic (74%). However, people in this group were less likely to report anxiety symptoms than the overall population of respondents (75%). Respondents in this group were also more likely to increase the frequency of their drug use (53% weekly or more frequently among those reporting anxiety as compared to 50% weekly or more frequently overall).

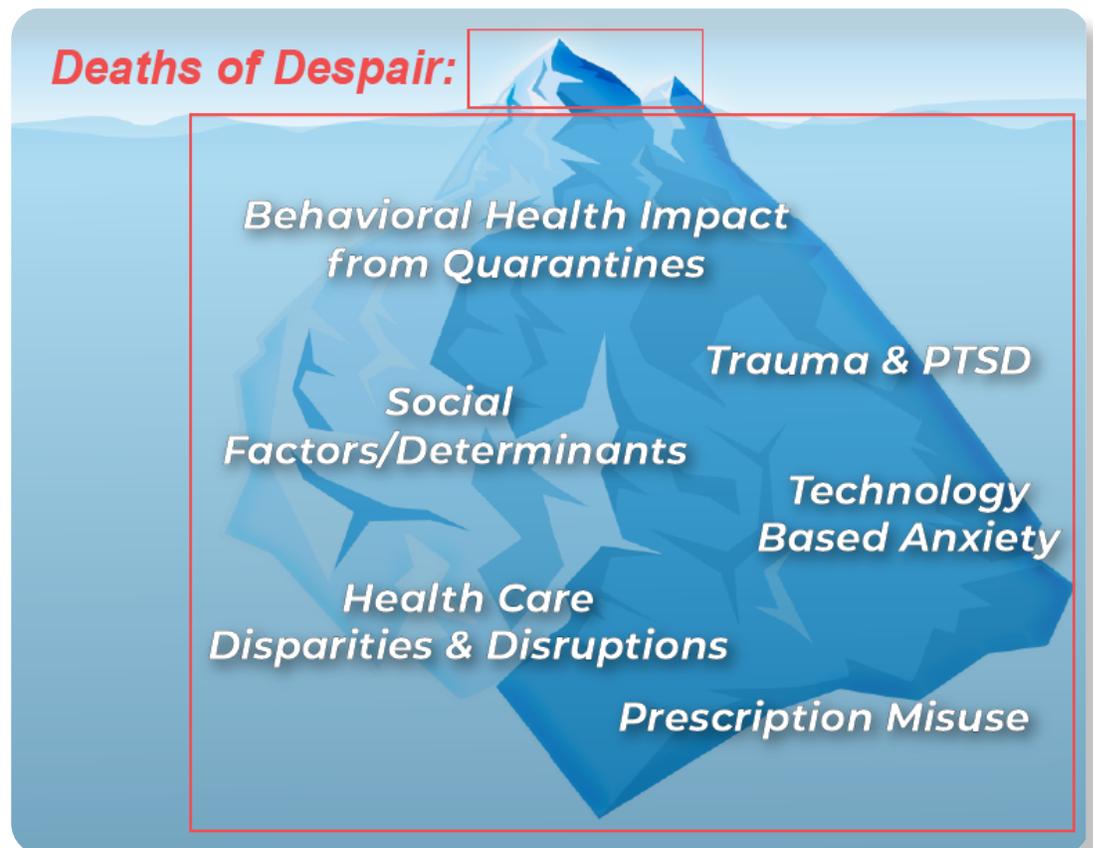
# DEPRESSION AND SUBSTANCE ABUSE

A significant finding of the research is that people who reported suffering from depression and/or loneliness were more likely to use drugs on a daily basis during the COVID-19 pandemic than people who reported no depression or loneliness.

In addition, the data shows that depressed/lonely people are more likely to be daily users during COVID as compared to pre-COVID than those who did not self-report as depressed/lonely, with the daily use rate rising from 29% pre-COVID to 37% during COVID for the depressed/lonely.

It is apparent, therefore, that people who are suffering from depression during the COVID-19 pandemic are more likely to use drugs to cope with stress (32%) or to cope with anxiety or depression (23%) than they are to use drugs recreationally (32% non-depressed versus 17% depressed).

Therefore, according to the findings of this survey, recreational use is the top reason that non-depressed people use substances. But when looking only at people suffering from depression during COVID-19, recreational use falls to third behind “coping with mental health” and “stress.”



# OPIOID SPECIFIC FINDINGS

## OPIOID USAGE RISING FAST DURING PANDEMIC

We surveyed 785 Florida residents about their substance use pre-COVID compared to now. Note: Some questions asked respondents to select each option that applied, so in a few instances, the total percentage will be greater than one hundred.

Of those who reported opioid use:

- 23% more report using opioids multiple times per day now compared to pre-Covid
- 18% more report daily use now compared to pre-Covid

Not only is their reported usage skyrocketing compared to people who use other drugs, their usage patterns are accelerating even faster. Those who reported opioid use were:

- 101% more likely to report their use has increased to daily use, multiple times per day
- 41% more likely to report their use has increased to daily use
- 49% more likely to report their use increased to several times per week.

## SEEKING TREATMENT

Those who reported opioid use were also more likely to say they are or would consider addiction treatment. Approximately 71% said they are or would consider treatment compared to just 43% of those who report using other drugs.

Unfortunately, opioid users were 41% more likely to report access to health care has been difficult because of the pandemic and 34% more likely to report challenges accessing mental health in the early days of the pandemic than other respondents.

Of those not considering treatment, the majority of all respondents said they didn't believe they needed it. Opioid users significantly over-index the rest of the respondents for giving other reasons for not seeking treatment, including being:

- 74% more likely to cite the ability to pay for treatment
- 32% more likely to not have insurance
- 273% more likely to fear losing their job
- 241% more likely to fear the impact on their family
- 379% more likely to fear the impact on their social circle

# OPIOID SPECIFIC FINDINGS

## HOW THE PANDEMIC INFLUENCED OPIOID USE

We also asked survey participants to identify the reasons why they used substances. Opioid users were:

- 189% more likely to report being physically dependent
- 117% more likely to say treating pain
- 77% more likely to report mental health symptoms like depression and anxiety
- 49% more likely to report boredom
- 18% more likely to report stress

When asked to identify the biggest reason they used a substance, opioid users were:

- 138% more likely to select treating pain
- 198% more likely to report being physically dependent
- 15% more likely to say their use was to cope with mental health symptoms

# OPIOID SPECIFIC FINDINGS

Opioid users reported experiencing common mental health symptoms at a higher frequency than those who reported using other drugs.

- 88% reported anxiety/nervousness, making them 17% more likely to do so
- 78% reported depression/loneliness, making them 12% more likely to do so
- 51% reported anger/agitation, making them 26% more likely to do so
- 47% reported sleep issues, making them 8% more likely to do so

In addition to mental health symptoms, opioids users were 112% more likely to say they tested positive for COVID-19, putting additional strain on not only their mental but physical health as well.

Opioid users were also more likely to report increased tensions at home. Over half said COVID-19 had a negative impact on their relationships within their household and nearly a quarter reported a “significant negative impact.” They were 81% more likely to report “significantly more” arguments within the household since the emergence of COVID-19.



# COUNTY-BY-COUNTY OVERDOSE DEATHS

The chart in the appendix shows the Florida breakdown of overdose deaths by county for both 2019 and 2020. There are several nuances with this data and it is, therefore, important that they be interpreted with care.

For example, there are 67 counties in the state of Florida, but there are 25 medical examiner districts in the state. This means that:

- Some counties also serve as medical examiner districts. For example the Miami-Dade medical examiner district covers the same territory as Miami-Dade County. The Broward medical examiner district covers the same geographical region as Broward County.
- On the other hand, other medical examiner districts cover multiple counties. For instance, medical examiner district #10 covers Polk, Hardee, and Highlands Counties.

Because the medical examiner's office for a designated district may not always align with a particular county's boundaries, there are often inconsistencies from one medical examiner district to another when it comes to the time required to conduct autopsies, produce toxicology reports, and submit overdose information to the State of Florida. Some medical examiner districts complete this process rather quickly, especially those districts that need to coordinate their efforts with only one county. But other medical examiner districts can take longer to complete these processes, especially when those districts are required to coordinate their efforts with multiple county governments. Consequently, some of the county data contained in this chart is relatively up to date while other data from other counties may be lagging. Unfortunately, we have no way of knowing which data sets current, and which data sets are lagging.

Different counties have experienced different kinds of delays in reporting their data, especially in light of the COVID-19 restrictions that have hampered the ability of government and the private sector to deliver routine professional services. Consequently, the numbers in this chart represent the minimum number of deaths that will be reported for the timeframes depicted once all the necessary reports are filed. Some counties may actually show significant increases in their data once all the deaths for that county are certified and all the toxicology reports are filed, but the data that is displayed in this chart represents the minimum number of overdose deaths that a county will ultimately report.

# COUNTY-BY-COUNTY OVERDOSE DEATHS

The chart in the appendix depicts statistical data from January through August of 2020 and, for the sake of comparison, from the same eight-month period in 2019 (January through August). Consequently, when the chart shows a decline in the number of overdose deaths from 2019 to 2020 (for example, the 17% decline in overdose deaths in Polk County in 2020), there could be two different explanations for this inconsistency:

- On the one hand, it is possible that Polk County had a very encouraging year when it comes to overdose deaths. It is possible that overdose deaths dropped in Polk County while they increased in virtually every other county in Florida.
- However, it is much more likely that Polk County (which is part of a three-county medical examiner district) could be behind in the compilation and reporting of its data. When examining this chart, always remember that January thru August of 2020 was a time when many offices were closed, when labs were shut down or overwhelmed, and when the workforce was reduced due to the COVID-19 threat.

Chart D located below, shows the most relevant data from select counties across the state of Florida from March to June of 2020, compared with the same time period in 2019. Any cell with less than 8 decedents was removed from the calculations to ensure validity. This analysis demonstrates the actual deaths for this time period.

**TABLE D**

Year	March-June 2019	March-June 2020	March-June % Change
Alachua	13	15	15%
Brevard	107	126	18%
Broward	183	263	44%
Citrus	9	32	256%
Clay	20	29	45%
Collier	27	33	22%
Miami-Dade	101	144	43%
Duval	124	199	60%
Escambia	26	58	123%
Flagler	4	13	225%
Hernando	9	28	211%
Hillsborough	82	182	122%

Lake	19	33	74%
Lee	70	128	83%
Manatee	39	48	23%
Marion	31	64	106%
Martin	8	16	100%
Orange	84	131	56%
Osceola	20	34	70%
Palm Beach	139	226	63%
Pasco	54	97	80%
Pinellas	111	190	71%
St. Lucie	14	39	179%
Sarasota	30	55	83%
Seminole	23	33	43%
Volusia	56	113	102%

# COUNTY-BY-COUNTY OVERDOSE DEATHS

The chart in the appendix, therefore, is not designed to provide comparisons. What it does provide is a list of all 67 Florida counties with each county's minimum number of overdose deaths for January-August 2019 and January-August 2020. For some of these counties, the final numbers have been reported to Tallahassee, and those final numbers are displayed in the chart. For most counties, however, the numbers will continue to grow for 2020. The numbers will likely increase as more tests are completed, more paperwork is filed, and more reports are submitted to the state.

Despite incompleteness of this data, we offer it in this report because this county-by-county data can be extremely valuable in helping the reader grasp the magnitude of the worsening overdose crisis. This data can also help the reader more fully understand the extent of the growth of this problem throughout Florida. And the data can be helpful to county leaders, who can use the statistics provided here to derive from that county's medical examiner a complete and more accurate picture of the current overdose problem in the county.

In light of a potential resurgence of COVID-19 in the state, this information should serve to sound an alarm for county leaders to partner in advance with their county's behavioral health leaders in a way that can ensure the availability of adequate services for those who might be vulnerable to overdose during any additional market shutdowns or periods of self-isolation.

# GENDER

*NOTE: This analysis compares data from January 2019 through September 2019 (the first nine months of 2019) and from January 2020 through September 2020 (the first nine months of 2020).*

In both 2019 and 2020, there is a significant difference between men and women regarding the total number of drug overdoses, both fatal and nonfatal, from all drugs. During the past two years, men have been involved in nearly two-thirds of all the overdoses in the state of Florida.

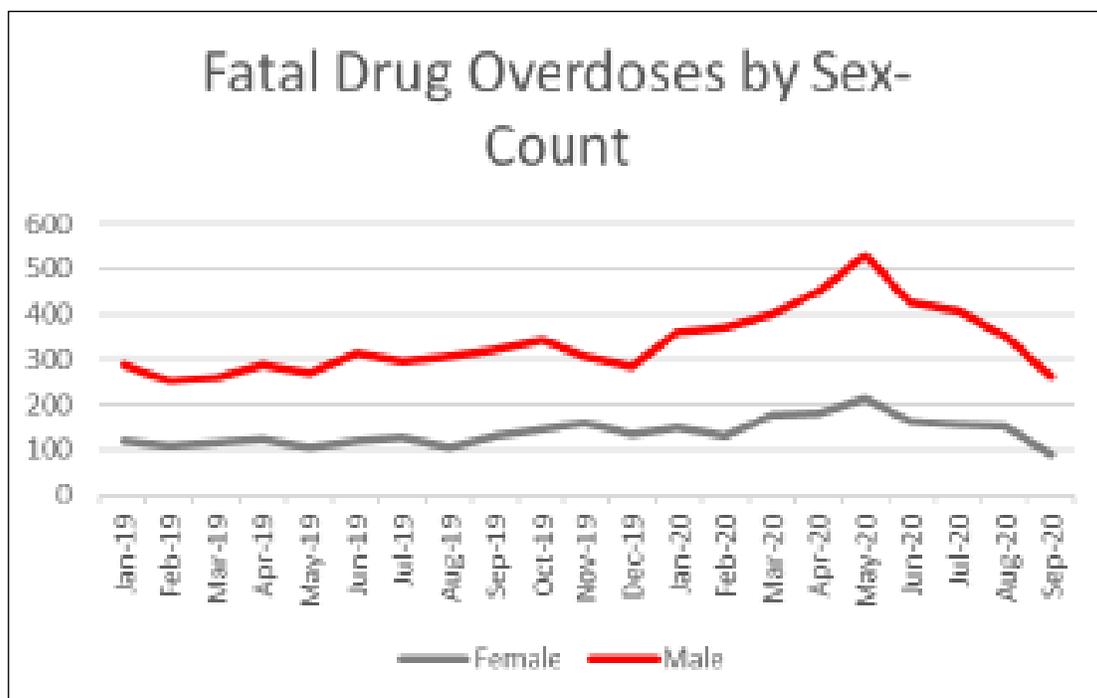
Of the 4,973 fatal drug overdoses in Florida during the first nine months of 2020 (the pandemic months):

- 28% (1,407) of the decedents were women
- 72% (3,566) were men

These statistics are consistent with those from the first nine months of 2019 (before the pandemic), when:

- 29% (1,052) of the decedents were women
- 71% (2,596) were men

**CHART D**



Between men and women, the gulf narrows when analyzing nonfatal overdoses from the same two periods. Nevertheless, men surpass women in this statistical category, as well. Of the 36,101 nonfatal overdoses in Florida during the first nine months of 2020:

- 37% were attributed to women
- 63% were attributed to men

And in 2019, when there was a total of 36,533 nonfatal overdoses from all drugs:

- 40% of these overdoses involved women
- 60% involved men

As a point of reference, the state's population is 51% women and 49% men.

Many theories have been posited to explain this statistical discrepancy. Some theorize that men may be more prone to overdose because they tend to take more risks than women. Others hypothesize that, because men tend to commit suicide at a higher rate than women, they may also be willing to “push the envelope” more readily with drugs.

These and other hypotheses are not addressed in this report. Nevertheless, the two clear takeaways from the data we have presented are:

- A significant discrepancy in overdoses between men and women, for whatever reason, does exist in the state of Florida.
- This discrepancy has remained consistent from year after year, including during the pandemic months of 2020.

Florida is a large state with a large elderly population. Consequently, if age were no factor in the number of drug overdoses and overdose-related deaths in the state, we would expect to see annual overdoses and overdose deaths spread proportionately across the various age brackets, with a significant number of them occurring within Florida's elderly population. However, the opposite is true. The vast majority of drug overdoses and overdose deaths in Florida are found within a specific age group, the 25-44 age group. In fact, more than half of Florida's drug overdoses and overdose deaths occur within this 20-year age span, which represents only 25% of the state's population.

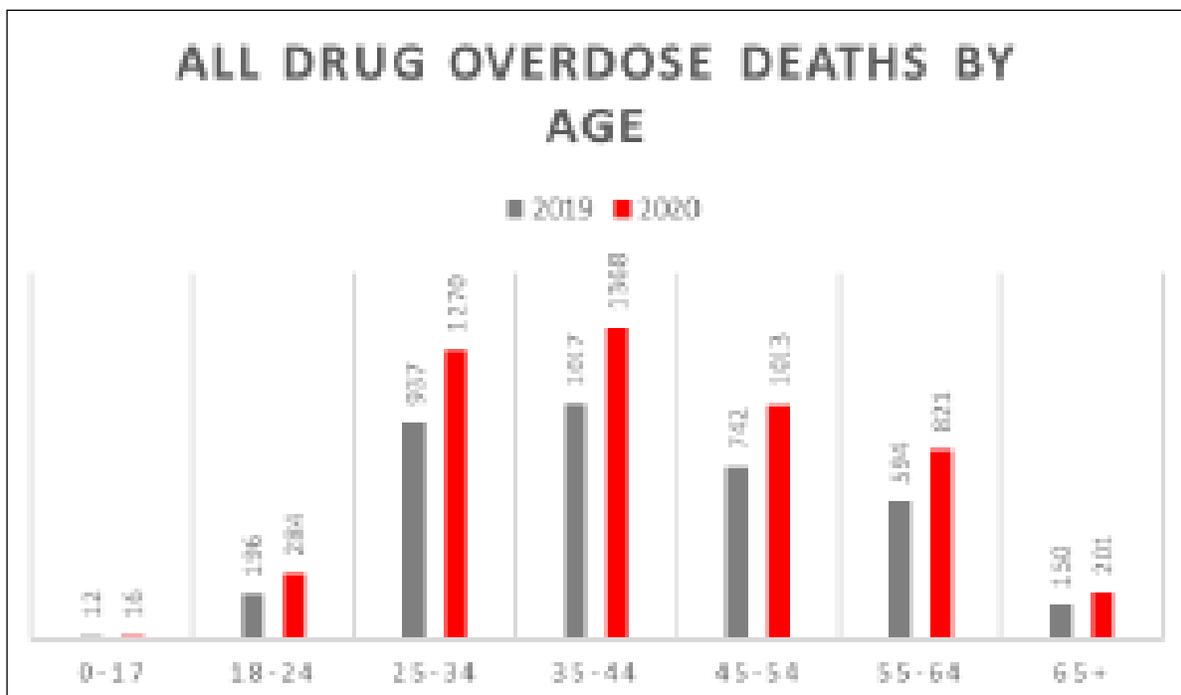
In 2020:

- The majority of drug overdose deaths in Florida occurred in the 35-44 age group (27% of all drug overdoses in the state).
- The 25-34 age group followed closely behind (26% of all drug overdose deaths).

The 2019 statistics for overdose deaths were almost identical:

- 27% for people 35-44
- 25% for people 25-34

**CHART F**



Statistics on non-fatal drug overdoses are strikingly similar. In 2020:

- Floridians between the ages of 25 and 34 suffered 30% of the non-fatal overdoses in the state
- Floridians between the ages of 35 and 44 experienced 25% of the non-fatal overdoses.

This means that the 35-44 age group was responsible for 55% of the total drug overdoses in Florida in 2020. This age group is comprised mostly of Millennials (officially defined in 2020 as those between the ages of 24 and 39).

Research shows that prescription opioids play an integral role in drug initiation sequencing for Millennials, and generational differences exist in treatment characteristics, as well. Using a longitudinal dataset, Rezai-Zadeh (2019) and colleagues found that Millennials are more likely to be readmitted for treatment than their Gen X or Baby Boomer counterparts, despite most often receiving opioid maintenance therapy as their initial treatment option. Millennial clients also showed more treatment avoidance than others in the study.

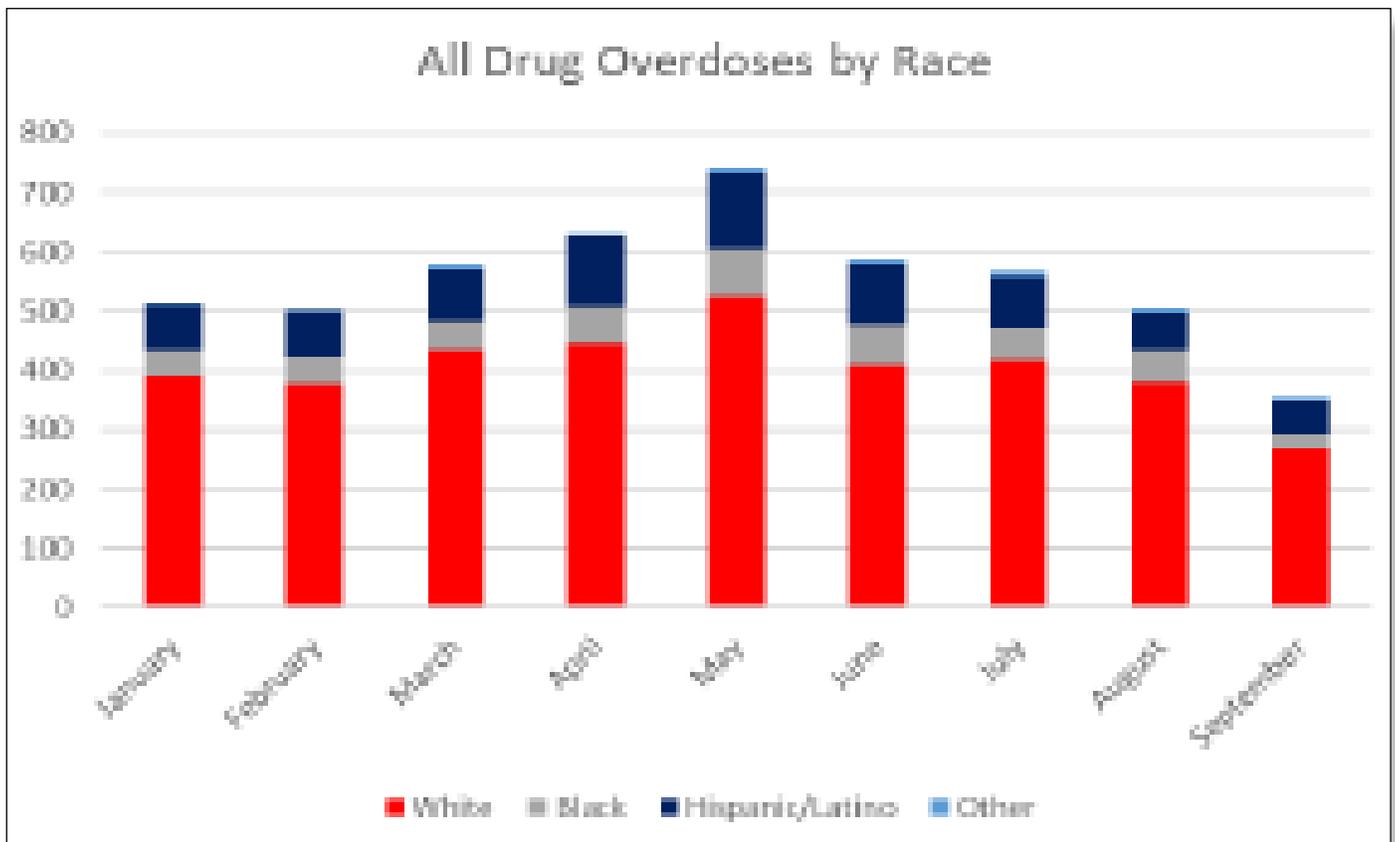


# RACE

When analyzing data from January-September 2019 and comparing it to data from January-September 2020, we discover the following facts about the racial makeup of people experiencing drug overdoses in Florida:

- In 2020, the majority (73% or 3,645 people) who died from all drug overdoses in the state of Florida were white, non-Hispanic. This number is slightly down from 2019, when 75% (2,727) of the decedents were white, non-Hispanic.
- In 2020, 10% of the deaths resulting from drug overdoses were among blacks, which represents a small increase over the 2019 statistics (when 8% of the fatalities were black). However, this difference of 193 people (297 in 2019 vs 490 in 2020) represents a 35% increase between 2019 and 2020 in the number of fatalities among black Floridians.
- Drug overdoses among the Hispanic/Latino population in Florida has remained consistent from 2019 to 2020, with Hispanics comprising 16% of all drug overdoses in the state in both of those years.

**CHART F**



# RACE

But during those pivotal months when COVID-19 restrictions were being utilized (March to June 2020), 1,813 white, non-Hispanic Floridians died of a drug overdose. This number was up from 1,196 during the same period in 2019 (a year-over-year increase of 52%). And during this same timeframe:

- 263 black Floridians died of a drug overdose, a 110% increase from the previous year, when 125 black Floridians died of drug overdose.
- But Hispanic/Latino Floridians were also impacted by the public health measures associated with COVID-19. The overdose numbers for Hispanic/Latino Floridians increased 67% during this period.

The category of “other” ethnicities saw a dramatic increase, as well (100%). However, this categorical statistic should be considered with caution due to the low numbers associated with this statistical category (14 deaths in 2019 and 28 deaths in 2020). The general population in Florida is:

The general population in Florida is:

- 53% white
- 17% black
- 26% Hispanic/Latino



In consideration of the significance of these findings, Project Opioid will be offering several common-sense recommendations that can help communities throughout our state respond to the COVID-19 outbreak while simultaneously protecting Floridians who may be susceptible to drug overdose or adverse mental health implications. Those recommendations will be forthcoming in a separate document.

## APPENDIX: ALL DRUG OVERDOSE DEATHS BY COUNTY

County	2019	2020	% Change	Population	Overdose Rate Per 100,000
Alachua	28	30	7%	269,043	11.15
Baker	1	3	200%	29,210	10.27
Bay	42	21	-50%	174,705	12.02
Bradford	2	1	-50%	28,201	3.55
Brevard	214	231	8%	601,942	38.38
Broward	394	542	38%	1,952,778	27.76
Calhoun	2	1	-50%	14,105	7.09
Charlotte	16	24	50%	188,910	12.70
Citrus	27	56	107%	149,657	37.42
Clay	47	55	17%	219,252	25.09

**APPENDIX: ALL DRUG OVERDOSE DEATHS BY COUNTY**

<b>County</b>	<b>2019</b>	<b>2020</b>	<b>% Change</b>	<b>Population</b>	<b>Overdose Rate Per 100,000</b>
<b>Collier</b>	63	60	-5%	384,902	15.59
<b>Columbia</b>	6	4	-33%	71,686	5.58
<b>Desoto</b>	3	2	-33%	38,001	5.26
<b>Dixie</b>	0	3		16,826	17.83
<b>Duval</b>	294	417	42%	957,755	43.54
<b>Escambia</b>	73	111	52%	318,316	34.87
<b>Flagler</b>	16	34	113%	115,081	29.54
<b>Franklin</b>	1	6	500%	12,125	49.48
<b>Gadsden</b>	2	2	0%	45,660	4.38
<b>Gilchrist</b>	2	0	-100%	18,582	-
<b>Glades</b>	0	2		13,811	14.48
<b>Gulf</b>	0	1		13,639	7.33
<b>Hamilton</b>	1	2	100%	14,428	13.86

**APPENDIX: ALL DRUG OVERDOSE DEATHS BY COUNTY**

<b>County</b>	<b>2019</b>	<b>2020</b>	<b>% Change</b>	<b>Population</b>	<b>Overdose Rate Per 100,000</b>
<b>Hardee</b>	1	3	200%	26,937	11.14
<b>Hendry</b>	4	7	75%	42,022	16.66
<b>Hernando</b>	23	43	87%	193,920	22.17
<b>Highlands</b>	16	14	-13%	98,955	14.15
<b>Hillsborough</b>	194	303	56%	1,471,968	20.58
<b>Holmes</b>	1	3	200%	19,617	15.29
<b>Indian River</b>	19	22	16%	159,923	13.76
<b>Jackson</b>	8	4	-50%	46,414	8.62
<b>Jefferson</b>	2	4	100%	14,246	28.08
<b>Lafayette</b>	2	0	-100%	8,422	-
<b>Lake</b>	53	67	26%	367,118	18.25
<b>Lee</b>	156	237	52%	770,577	30.76
<b>Leon</b>	22	25	14%	293,582	8.52

**APPENDIX: ALL DRUG OVERDOSE DEATHS BY COUNTY**

<b>County</b>	<b>2019</b>	<b>2020</b>	<b>% Change</b>	<b>Population</b>	<b>Overdose Rate Per 100,000</b>
<b>Levy</b>	0	4		41,503	9.64
<b>Liberty</b>	0	1		8,354	11.97
<b>Madison</b>	0	2		18,493	10.81
<b>Manatee</b>	96	89	-7%	403,253	22.07
<b>Marion</b>	69	139	101%	365,579	38.02
<b>Martin</b>	21	33	57%	161,000	20.50
<b>Miami-Dade</b>	209	239	14%	2,716,940	8.80
<b>Monroe</b>	12	7	-42%	74,228	9.43
<b>Nassau</b>	6	21	250%	88,625	23.70
<b>Okaloosa</b>	49	40	-18%	210,738	18.98
<b>Okeechobee</b>	8	14	75%	42,168	33.20
<b>Orange</b>	211	280	33%	1,393,452	20.09

**APPENDIX: ALL DRUG OVERDOSE DEATHS BY COUNTY**

<b>County</b>	<b>2019</b>	<b>2020</b>	<b>% Change</b>	<b>Population</b>	<b>Overdose Rate Per 100,000</b>
<b>Osceola</b>	49	78	59%	375,751	20.76
<b>Palm Beach</b>	343	450	31%	1,496,770	30.06
<b>Pasco</b>	139	193	39%	553,947	34.84
<b>Pinellas</b>	274	384	40%	974,996	39.38
<b>Polk</b>	86	71	-17%	724,777	9.80
<b>Putnam</b>	6	11	83%	74,521	14.76
<b>Santa Rosa</b>	14	28	100%	184,313	15.19
<b>Sarasota</b>	61	87	43%	433,742	20.06
<b>Seminole</b>	52	79	52%	471,826	16.74
<b>St. Johns</b>	13	28	115%	264,672	10.58
<b>St. Lucie</b>	39	69	77%	328,297	21.02
<b>Sumter</b>	10	26	160%	132,420	19.63
<b>Suwannee</b>	5	4	-20%	44,417	9.01

**APPENDIX: ALL DRUG OVERDOSE DEATHS BY COUNTY**

<b>County</b>	<b>2019</b>	<b>2020</b>	<b>% Change</b>	<b>Population</b>	<b>Overdose Rate Per 100,000</b>
<b>Taylor</b>	4	0	-100%	21,569	-
<b>Union</b>	1	2	100%	15,237	13.13
<b>Volusia</b>	120	241	101%	553,284	43.56
<b>Wakulla</b>				33,739	-
<b>Walton</b>				74,071	-
<b>Washington</b>				25,473	-