

Poverty Fact Sheet: Wisconsin's Opioid Crisis

no. 17, 2018–2019, prepared by Will Maher

INTRODUCTION

Like the rest of the United States, Wisconsin has experienced a rapid rise in opioid-related deaths. While death rates due to other major causes have fallen in the last 10 years, opioid deaths have skyrocketed and now kill more Wisconsinites than car crashes.¹ For many, this crisis has meant losing a child, sibling, parent, or friend, but the state as a whole has seen significant social costs due to the opioid crisis. These include increased mortality rates, hospitalizations related to overdoses, and increases in child welfare cases.

THE OPIOID CRISIS IN WISCONSIN IS GROWING

The number of opioid overdose deaths in Wisconsin has risen dramatically since 2000, as shown in Figure 1, and doubled between 2011 and 2017. In 2017 alone, Wisconsin lost 916 people due to opioid overdose, far more than any other type of drug.² Wisconsin policymakers have made efforts to contain the problem, including increasing access to Naloxone, a drug that can reverse the effects of an overdose. Yet, the dramatic rise in opioid deaths continues. The factors behind the opioid crisis in Wisconsin are complicated. Increases in opioid use have been tied to changes to Wisconsin's economy and labor market and a steady supply of illicit opioids. Risk factors also include childhood trauma, which is strongly correlated with later opioid use. The factors that lead to addiction and worsen the crisis are complex and personal, preventing a simple solution to this crisis.

WISCONSIN'S OPIOID CRISIS AFFECTS BOTH URBAN AND RURAL COUNTIES

Opioids affect both rural and urban Wisconsin. While it is difficult to draw strong geographic patterns in opioid abuse, recent national evidence has shown that in cities, opioid supply is a key factor in opioid usage and overdose rates whereas levels of economic distress are more important in rural areas.³ Ultimately, the counties with both a high supply of opioids and economic challenges face the largest opioid problem.⁴ Across Wisconsin, the counties with the highest overdose rates are in economically distressed rural areas (Marquette, Menominee) or urban areas (Kenosha, Milwaukee, Racine, Rock), which have seen major declines in manufacturing jobs as well as a steady supply of fentanyl and heroin. All of these counties also report populations with high levels of childhood trauma, a fact closely correlated with opioid abuse.⁵ Yet, as shown in Figure 2, counties across the state and particularly in southern and central Wisconsin have been affected by the crisis.

WISCONSIN

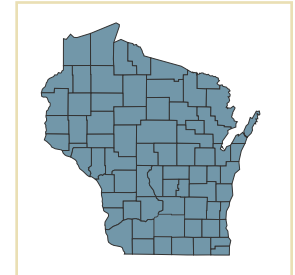
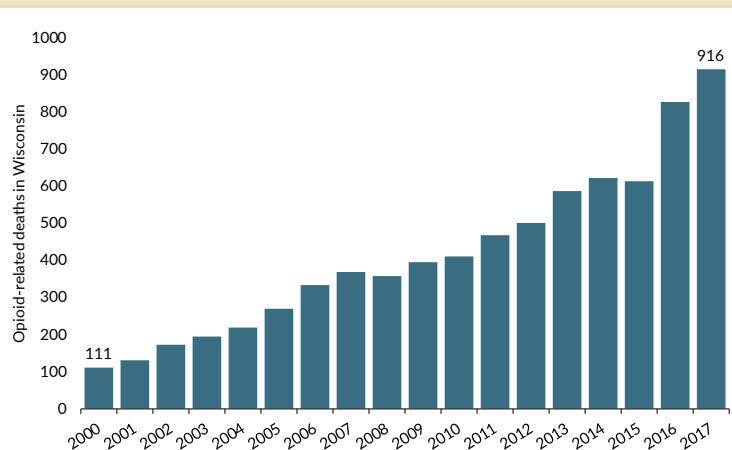
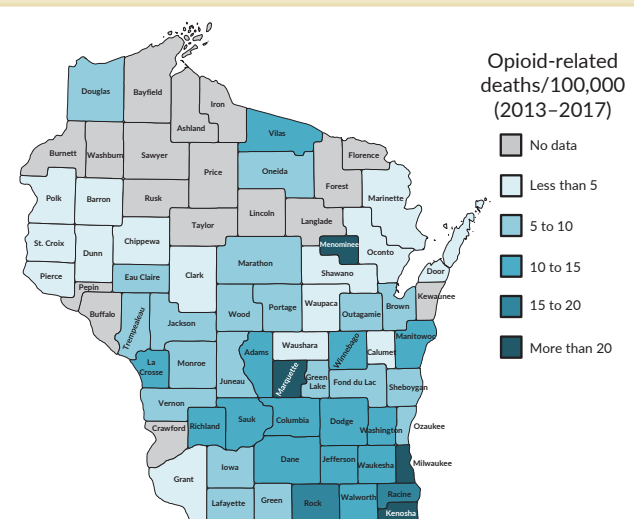


Figure 1. Opioid overdose deaths have grown rapidly since 2000.



Source: Wisconsin Department of Health Services, WISH Query.

Figure 2. The crisis has hit southern and central counties hardest.

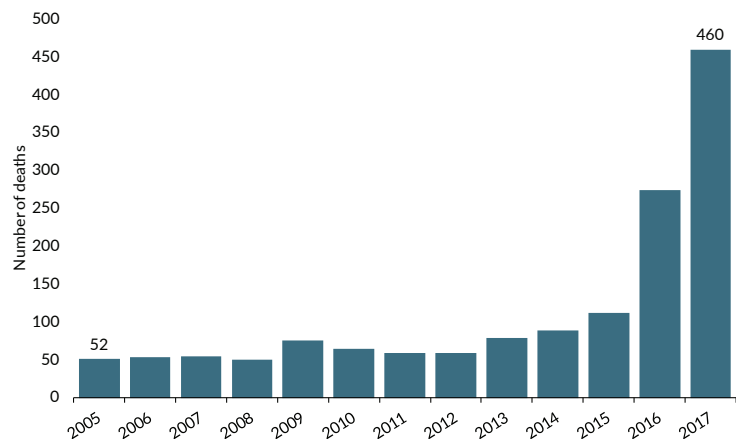


SYNTHETIC AND PRESCRIPTION OPIOIDS CONTRIBUTE TO THE SEVERITY OF WISCONSIN'S OPIOID CRISIS

Researchers point to a nationwide uptick in fentanyl abuse as a major development in the opioid crisis and a factor in the 2016 increase in Wisconsin opioid deaths, as shown in Figure 3.⁶ Fentanyl is an extremely potent synthetic opioid. When heroin is laced with fentanyl, it increases its strength and the risk of overdose. Many buyers do not know the heroin they are buying contains fentanyl and misjudge the dosage, with lethal results.⁷ In 2016, 41.5 percent of overdose fatalities in Wisconsin were due to a combination of drugs, often heroin and fentanyl.⁸

Legal prescription opioids are also a major factor in Wisconsin's opioid crisis. Prescription opioids are involved in 40 percent of overdose deaths in Wisconsin, either by themselves or mixed with other drugs.⁹ This percentage roughly mirrors national trends and is slowly declining as the number of deaths due to prescription drugs stays constant and deaths due to heroin and fentanyl increase.¹⁰ There is also a well-established link between prescription opioid abuse and later use of illegal and more lethal drugs like heroin and fentanyl.¹¹ Nationwide, approximately 75 percent of heroin users report previous use of prescription opioids, while a 2013–2015 survey of heroin overdose patients in Wisconsin found nearly 92 percent had previously been prescribed opioids.¹²

Figure 3. Deaths involving synthetic opioids have surged.



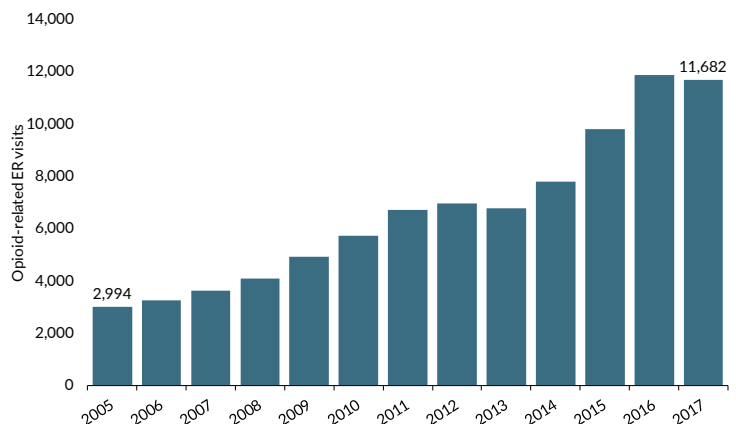
Source: Wisconsin Department of Health Services, WISH Query.

THE OPIOID CRISIS PLACES A TREMENDOUS COST ON COMMUNITIES IN WISCONSIN

Researchers estimated that the 2015 cost of Wisconsin's opioid crisis was around \$9.8 billion, or \$1,700 per capita.¹³ The cost is likely higher today as Wisconsin has seen a dramatic increase in rates of addiction and overdose in just the last four years. Studies show that an increase in opioid use leads to more emergency room visits and a greater strain on emergency services. In 2017, there were almost 12,000 opioid-related emergency room visits in Wisconsin, up from less than 3,000 in 2005, as shown in Figure 4.¹⁴ Nationally, the average cost per ICU overdose admission is more than \$92,000.¹⁵

Researchers have tied the opioid crisis to increased child protective services caseloads. Caseloads in Wisconsin went through a long-term decline from 2002 to 2012, but then began rising after 2012. That rise is associated with an increase in substance use. In 2017, Wisconsin saw a 33 percent increase in the rate of children entering foster care due to parental drug abuse, one of the largest increases in the country.¹⁶ Caseworkers report that child welfare cases involving drug use are often more complex and often require longer stays in out-of-home placement.¹⁷ The additional and more complex child welfare caseloads are straining the capacities of child welfare agencies in the state.¹⁸

Figure 4. Opioid-related ER visits have nearly quadrupled since 2005.



Source: Wisconsin Department of Health Services, WISH Query.

CONCLUSION

In 2000, 111 Wisconsinites died due to opioid-related overdose. By 2017, that number had grown to 916.¹⁹ This crisis already affects communities across the state and will likely get worse if not combatted more aggressively. The arrival of fentanyl and issues related to the supply of opioids present enormous challenges, yet the causes of this crisis go deeper. Individuals with significant childhood trauma are at risk of an opioid addiction later in life and communities that have seen economic declines are more likely to have a population that struggles with opioid abuse.²⁰ Despite the complexity of this problem, there are reasons to be optimistic. The percentage of adolescents who have abused opioids declined from 15 percent in 2013 to 11 percent in 2017 and there has been increased accessibility for medication-assisted treatment, especially for people on Medicaid.²¹ These successes suggest that the problem is not intractable and that policy efforts can be useful, but effective solutions will require the investment of significant amounts of time and resources, even just to prevent the problem from getting worse.

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ENDNOTES

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- ²Wisconsin Department of Health Services, [WISH Query: Drug Overdose Deaths](#), accessed February 2019.
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- ¹⁶K. Sepulveda and S. C. Williams, "[One in Three Children Entered Foster Care in 2017 Because of Parental Drug Abuse](#)," *Child Trends*, February 26, 2019.
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- ¹⁹WI DHS, "[WISH Query: Drug Overdose Deaths](#)"
- ²⁰K. M. Lawson, et al., "[A Comparison of Trauma Profiles](#)."
- ²¹"[Opioids](#)" in *Wisconsin State Health Assessment and Health Improvement Plan*.