

Health Policy Fact Sheet

Taking action to strengthen Ohio's addiction response

Insights on addiction and race

Ohio has taken many steps to prevent addiction and improve treatment access for people with substance use disorder (see a summary of Ohio's strengths on page 3 of [Taking Action to Strengthen Ohio's Addiction Response](#)). However, addiction remains a concern across the state, affecting people from every community and inequitably impacting Ohioans of color. Unjustly punitive and unfair policies, practices and beliefs about addiction have led to large racial and ethnic differences in addiction-related outcomes and have made it more difficult for Ohioans of color to begin and sustain recovery.

This fact sheet provides data and information on differences in addiction outcomes by race, and the factors that drive those differences, with a focus on Black Ohioans. (And while other Ohioans of color may also be disparately impacted by unjustly punitive and unfair policies, practices and beliefs, a lack of data prevents these differences from being fully explored.) This fact sheet also presents opportunities to improve outcomes through criminal justice reform, supports for child health and well-being and better access to addiction treatment.

What factors drive differences in addiction outcomes by race?

There are many factors that drive differences in outcomes by race, including:

Racism and the criminal justice system

Historical and modern-day criminal justice policies continue to negatively and disproportionately impact people of color.¹ The War on Drugs, a "tough on crime" approach to drug policy, started in the 1960s and focused on incarceration as the solution to drug use and addiction. For example, harsher drug sentencing laws led to longer prison sentences for people convicted of drug possession, use or sale. Enforcement of these laws has been centered on urban areas, low-income communities and communities of color.² Although there has been interest among Ohio policymakers in re-classifying non-violent drug possession offenses from felonies to misdemeanors, recent efforts have been unsuccessful.³

Beyond drug sentencing, racial biases in overall criminal justice policies and practices lead to poor outcomes for people of color. Research finds that Black people are more likely to be stopped by the police, detained pretrial, charged with more serious crimes and sentenced more harshly than white people.⁴ Not only do these biases lead to disproportionate incarceration for Black Ohioans (in 2020, Black Ohioans were 5.4 times more likely to be incarcerated than white Ohioans⁵), but formerly incarcerated people experience greater barriers to addiction treatment and recovery once they return to the community.⁶

In 2020...

Black Ohioans were **5.4 times more likely to be incarcerated** than white Ohioans



Black children were **1.8 times more likely to experience an ACE** than white children

Childhood adversity and trauma

Adverse childhood experiences (ACEs)⁷, including the incarceration of a family member, increase a child's risk of experiencing negative health outcomes, including substance use and addiction, later in life.⁸ The high incarceration rate of Black Ohioans increases the risk that Black children will be exposed to ACEs; and while every child can experience adversity, Black children were 1.8 times more likely to experience an ACE than white children in 2020.⁹

Access to harm reduction, treatment and recovery services

Treatment services, such as Medication-Assisted Treatment (MAT)¹⁰ and specialized dockets (i.e., drug treatment courts)¹¹, and harm reduction tools, such as fentanyl test strips, are evidence-based methods to reduce addiction-related harms. However, not all Ohioans have access to these life-saving tools.

For example, Black Ohioans are less likely to be enrolled in drug treatment court programs. Analysis by HPIO found that, in 2020, Black Ohioans represented 27% of drug arrests, but accounted for only 17% of Ohioans participating in drug treatment courts. Conversely, white Ohioans, represented 71% of drug arrests and accounted for 79% of drug treatment court participants.¹²

Housing instability, poverty and stigma also drive differences in addiction outcomes in communities of color and other Ohio communities across the state. See the [Insights on Addiction and Geography](#) fact sheet to learn more.

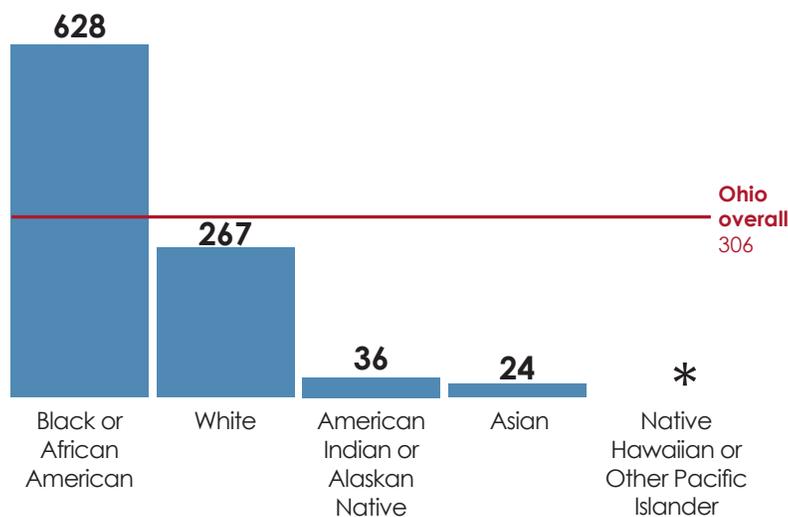
How has addiction affected Black Ohioans?

Due to the factors outlined above, and other community conditions that inequitably impact people of color, Black Ohioans are more likely to experience the downstream harms of addiction than Ohioans overall. Figures 1 and 2 below provide examples of disparities in two addiction-related downstream harms: drug crime arrests and drug overdose.

Drug crime arrests

The drug crime arrest rate for Black Ohioans was 2.4 times higher than that of white Ohioans in 2020.

Figure 1. **Drug crime arrest rate, by race, per 100,000 population, Ohio, 2020**



*Suppressed due to arrest count <10.

Note: Population counts for each race group estimated based on the percent of the population in law enforcement jurisdictions that report to the Ohio Incident-Based Reporting System.

Source: HPIO analysis of data from the Ohio Incident-Based Reporting System provided by the Ohio Department of Public Safety, 2019 population estimates from the U.S. Census Bureau.

Overdose deaths

In 2019, the overdose death rate for Black Ohioans surpassed the rate for white Ohioans and has continued to increase.

Figure 2. **Unintentional drug overdose death rate (age-adjusted), by race/ethnicity, per 100,000 population, Ohio, 2010-2019**



Source: Ohio Department of Health, Ohio Public Health Information Warehouse. Accessed May 20, 2021.

How can Ohio improve outcomes?

To ensure Black Ohioans and other Ohioans of color have the supports they need to access and sustain treatment and recovery, prevent ACEs and achieve optimal health, Ohio policymakers can:

- 1) Reform and revise criminal justice policies to support addiction recovery.** Acknowledge the legacy of the War on Drugs and continue to change policies and practices, such as lack of treatment court and diversion program enrollment, that make it difficult for Ohioans of color to sustain recovery.
- 2) Reduce childhood adversity and trauma.** Work with communities of color to implement evidence-based strategies identified in HPIO's "[A Strategic Approach to Prevent ACEs in Ohio](#)," including early childhood home visiting, behavioral health treatment and parent/caregiver and family skills training. Promote protective factors, such as large social support networks, that can further protect children of color from the effects of ACEs.¹³
- 3) Increase access to treatment and harm reduction services.** Maintain the telehealth policies developed during the COVID-19 pandemic that expanded access to virtual health care. Increase the number of Black Ohioans with access to treatment courts and pretrial diversion programs, such as [drug and mental health courts](#), [Targeted Community Alternatives to Prison \(T-CAP\)](#) and [Interventions in Lieu of Conviction \(ILC\)](#), and reduce the number of factors that make offenders ineligible for diversion programs. Implement harm reduction services, such as [fentanyl test strip](#) distribution, in every Ohio community.

Ohio policymakers can also tailor the recommendations from [Addiction Evidence Project: Taking Action to Strengthen Ohio's Addiction Response](#) to meet the needs of Ohioans of color and other groups most at-risk for experiencing poor outcomes.

Notes

1. "A Brief History of the Drug War." Drug Policy Alliance. Accessed August 20, 2021. <https://drugpolicy.org/issues/brief-history-drug-war>; see also *Public Policy Statement on Advancing Racial Justice in Addiction Medicine*. Rockville, MD: American Society of Addiction Medicine, 2021. <https://www.asam.org/docs/default-source/public-policy-statements/asam-policy-statement-on-racial-justiced7a33a9472bc604ca5b7f000030b21a.pdf>

2. Mann, Brian. "After 50 Years Of The War On Drugs, 'What Good Is It Doing For Us?'" NPR, June 17, 2021. <https://www.npr.org/2021/06/17/1006495476/after-50-years-of-the-war-on-drugs-what-good-is-it-doing-for-us>

3. Chow, Andy. "Ohio Lawmakers Who Want Sentencing Reform Also Increase Penalties for Crime." WOSU, August 10, 2021. <https://news.wosu.org/politics/2021-08-10/ohio-lawmakers-who-want-sentencing-reform-also-increase-penalties-for-crime>

4. *An Unjust Burden: The Disparate Treatment of Black Americans in the Criminal Justice*

System. New York, NY: Vera Institute of Justice, 2018. <https://www.vera.org/downloads/publications/for-the-record-unjust-burden-racial-disparities.pdf>

5. Health Policy Institute of Ohio. *2021 Health Value Dashboard Equity Profiles*. April 2021.

6. Health Policy Institute of Ohio. "Connections Between Criminal Justice and Health," June 2021.

7. Health Policy Institute of Ohio. "Adverse Childhood Experiences (ACEs): Health Impacts of ACEs in Ohio," August 2020.

8. *Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health*. Washington, DC: US Department of Health and Human Services, Office of the Surgeon General, 2016. <https://addiction.surgeongeneral.gov/>; see also *Drugs, Brains, and Behavior: The Science of Addiction*. Rockville, MD: National Institute on Drug Abuse, 2021. <https://www.drugabuse.gov/publications/drugs-brains-behavior-science-addiction/preface>

9. Health Policy Institute of Ohio. *2021 Health Value Dashboard Equity Profiles*. April 2021.

10. *Public Policy Statement on Advancing Racial Justice in Addiction Medicine*. Rockville, MD: American Society of Addiction Medicine, 2021. <https://www.asam.org/docs/default-source/public-policy-statements/asam-policy-statement-on-racial-justiced7a33a9472bc604ca5b7f000030b21a.pdf>

11. Health Policy Institute of Ohio. "Connections between Criminal Justice and Health," June 2021.

12. Health Policy Institute of Ohio. "Connections between Criminal Justice and Health," June 2021; additional analysis by HPIO on data provided by the Ohio Department of Public Safety. Drug arrests by race spreadsheet. Provided August 13, 2021.

13. Brown, Danice L. "African American Resiliency: Examining Racial Socialization and Social Support as Protective Factors." *Journal of Black Psychology* 34, no. 1 (2008): 32-48. doi: 10.1177/0095798407310538

Addiction Evidence Project

HPIO launched the **Addiction Evidence Project** in 2017 to provide policymakers and other stakeholders with information needed to evaluate and improve Ohio's policy response to addiction. Drawing upon guidance from a **multi-sector Advisory Group**, this project has explored a comprehensive range of topics (see figure 3) to produce:

- Policy scorecard reports that identify 30 opportunities for improvement
- Policy inventories that document 463 policy changes enacted from 2013 to 2019
- Evidence resource pages that provide links to 299 credible sources on what works to address addiction

Figure 3. **Key elements of a comprehensive policy response to addiction**



Source: Health Policy Institute of Ohio adapted from Addiction Policy Forum (2017).



See full brief, *Addiction Evidence Project: Taking Action to Strengthen Ohio's Addiction Response*, at

<https://bit.ly/3nYmFiU>