Stopping the Opioid Crisis Begins at Home
The role of home visiting programs in addiction prevention
Acknowledgements

Council for a Strong America is a national, bipartisan nonprofit that unites five organizations comprised of law enforcement leaders, retired admirals and generals, business executives, pastors, and prominent coaches and athletes who promote solutions that ensure our next generation of Americans will be citizen-ready.

Fight Crime: Invest in Kids
Thousands of police chiefs, sheriffs, prosecutors and violence survivors protecting public safety by promoting solutions that steer kids away from crime.

Supported by tax-deductible contributions from foundations, individuals, and corporations.

Major funders:
Council for a Strong America and Fight Crime: Invest in Kids thank the Irving Harris Foundation, Robert R. McCormick Foundation, Dr. Scholl Foundation, and W. Clement and Jessie V. Stone Foundation for their generous support.

Council for a Strong America also receives support for the issues addressed in this report from, among others, the Alliance for Early Success, Heising-Simons Foundation, Kresge Foundation, David and Lucile Packard Foundation, and Pritzker Children’s Initiative.

The views expressed here do not necessarily reflect the views of these funders.

Authors:
Sarah Baizer, Research Associate Director
David Isaacson, Illinois Policy Associate
Tim Carpenter, Illinois Director

Contributors:
Sandra Bishop-Josef, Ph.D., Research Director
Sean Noble, Fight Crime: Invest in Kids Illinois Senior Policy Associate
Kara Kempski, Federal Policy Associate Director
Mariana Galloway, Senior Graphic Designer
Joshua Spaulding, Fight Crime: Invest in Kids Director
David Kass, President

April 2018
©2018 Council For A Strong America. All Rights Reserved.
Summary

Opioid abuse and addiction are exacting a grave and growing toll from communities in Illinois and across the country. The death rate from overdoses increases every year, as does the number of babies born with drug dependency.¹ As parents become addicted to prescription painkillers and then—all too often—to cheaper, illegal opioids such as heroin, our foster care system is becoming overburdened.² When the costs of this drug scourge to employers and to the health and criminal justice systems are factored in, the estimated annual hit to the U.S. economy has reached an astonishing $504 billion.³

Local law enforcement is making herculean efforts to save lives, educate the public, and direct afflicted individuals to proven treatment methods. Yet, there need to be greater public resources targeted at

>We’re taking measures to address this crisis through law enforcement and action in the courts. It’s prevention, though—starting in early childhood—that is the missing piece of the puzzle.

State’s Attorney
Michael Nerheim
Lake County
prevention efforts, too. By providing a strong foundation in early childhood, we can decrease the likelihood of drug abuse and addiction later in life. Specifically, voluntary home visiting programs for new and expectant parents are proven to reduce child abuse and neglect, and research shows that fewer incidences of such Adverse Childhood Experiences (ACEs) can decrease the likelihood of subsequent opioid use.

The opioid crisis’ toll on Illinois

On average, 91 Americans die each day from an opioid overdose. Illinois is no stranger to the epidemic, as the state reported a 76 percent increase in opioid overdose deaths from 2013 to 2016. Beyond the death toll, opioid misuse and addiction have entered the very bloodstream of American life, with horrendous consequences. According to the 2016 National Survey on Drug Use and Health, 11.8 million Americans—including 891,000 aged 12-27—misuse opioids. Opioid analgesic use often leads to abuse of cheaper, illegal opioids such as heroin. Heroin use has increased 135 percent since 2002, and related deaths have skyrocketed—a 533 percent increase—during that time period.

The epidemic has had a devastating effect on children: Every 25 minutes a baby is born in the U.S. suffering from opioid withdrawal, also known as Neonatal Abstinence Syndrome (NAS). Between 2000 and 2012, the number of babies born with NAS increased five-fold nationwide, and Illinois recorded a 42 percent increase in its NAS rate between 2011 and 2015. In addition, parental opioid addiction has likely contributed to a growing number of children in foster care, as there were over 437,000 children in foster care in the U.S. in 2016, which is the highest number since 2008. For 34 percent of children removed from their homes, parental drug abuse was listed as a
Despite all our efforts, opioid-related deaths continue to rise. Opioid addiction knows no boundaries. Every economic sector and every community has been hit hard by this epidemic. We are even seeing babies born with chemical dependencies. It’s time to open a new front in our fight to save lives.

Adverse Childhood Experiences (ACEs) contribute to the opioid crisis
Prevention of opioid abuse and addiction can—and should—begin at, and even before, children’s birth. There is a correlation between early adversity and opioid use later in life. In the past few decades, researchers have documented the effects of Adverse Childhood Experiences on health and well-being throughout life. During the early years of life, rapid physical and mental development occurs. For example, during early childhood, more than one million new neural connections are formed per second. But ACEs, such as abuse, neglect, or experiencing parental drug abuse, can induce toxic stress, which impairs brain development.

Adults in Illinois reporting four or more ACEs as children
Among adults in Illinois, 14 percent report having experienced four or more ACEs as a child. Among patients seeking opioid treatment, however, a recent study found that 49 percent reported having experienced four or more ACEs.

The effects of early adversity carry into adulthood, as experiencing ACEs as a child significantly impacts a person’s likelihood of opioid use later in life. Among adults in Illinois, 14 percent report having experienced 4 or more ACEs as a child; among patients seeking opioid treatment, however, a recent study found that nearly half (49 percent) reported having experienced four or more ACEs—more than three times the percentage of adults in Illinois’ general population. Additionally, patients in this study who had experienced more ACEs started using opioids at a younger age and had a higher likelihood of overdosing from opioids. Another study found that children who experienced more than four childhood traumas were three times more likely to abuse prescription pain relievers, and five times more likely to engage in injection drug use in adulthood, than their counterparts who did not experience any traumas.
The opioid epidemic, therefore, creates a vicious cycle for children. Parental opioid use creates adverse experiences for a child, and such adverse experiences in turn increase the likelihood of that child misusing opioids later in life. Fortunately, home visiting presents a solution that works to both help halt parents’ use of opioids and also provides them with training to be effective caregivers.

**Early childhood home visiting programs can help prevent ACEs and later substance abuse**

Home visiting programs have been proven to prevent children’s exposure to ACEs such as abuse and neglect, which in turn can reduce the likelihood of opioid abuse later in life. Moreover, these programs can help addicted parents achieve sobriety through connecting them with much-needed treatment.\(^{18}\)

Home visiting services offer home-based coaching on a voluntary basis to vulnerable parents who are expecting or have a child younger than 5. Families receiving services gain access to a trained educator—often a nurse, other health professional, or social worker—who visits their home on a weekly or monthly basis.\(^{19}\)

The educator works with parents to establish positive parenting practices that help reduce toxic stress and ACEs. *National studies of the Nurse-Family Partnership found that families who participated had half as many verified incidents of child abuse and neglect compared with the control group.*\(^ {20}\)

Because a positive relationship with a caregiver is the most important ingredient in children’s development, adult behavior often is the reason behind toxic stress;
changes in that behavior, however, can serve as a remedy. When parents alter their responses from “unreliable, inappropriate, or simply absent” to “sensitive and responsive,” that can make the difference.21 Supportive parents can also buffer children from the effects of negative environmental factors that create toxic stress. Home visitors help parents make these changes, building positive interactions between mom and baby, and addressing problems such as financial stress, mental health issues, and substance abuse that put them at risk of poor parenting.22

Illinois provides home visiting services through four program models: the Nurse-Family Partnership, Healthy Families Illinois, Parents as Teachers, and Early Head Start. These programs are supported through four different funding streams: the federal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Act, the Illinois Department of Human Services, the Illinois State Board of Education, and federal Early Head Start. In all, there are more than 300 local programs in Illinois, serving approximately 17,000 families a year.23

These, however, serve less than 10 percent of low-income families with infants and toddlers, leaving a tremendous unmet need.24 Additional funding for quality home visiting would provide myriad beneficial outcomes for at-risk families: lower rates of infant mortality, higher birth weights, and fewer emergency-room visits.25 Home visiting also impacts children’s later life outcomes by reducing the number of ACEs they experience, which in turn, can decrease the likelihood of them engaging in criminal activity and, ultimately, of misusing opioids and becoming addicted.26
**Home visiting programs can help reduce the costs of the opioid crisis**

The societal and economic costs of the opioid epidemic are staggering. Recently, the White House Council of Economic Advisors found that previous fiscal analyses had dramatically under-estimated the costs of the crisis. When taking into account the expense of fatal overdoses, of non-fatal opioid use on the health care and criminal justice systems, and of absenteeism and lost productivity for businesses, the annual cost to the U.S. economy is estimated at $504 billion. Home visiting, which can help reduce opioid abuse, addictions, and deaths, has also been shown to increase incomes, as mothers who participated in the Early Head Start home visiting program boosted their average annual earnings by $3,600 following participation. Meanwhile, a Nurse-Family Partnership study found that the average participating family reduced their welfare use by 10 percent each year compared to the control group, which added up to $14,500 in the decade following the program. Thus, home visiting plays a crucial role in mitigating the expenses our society incurs from the opioid epidemic, while also increasing participants’ incomes.

**Conclusion**

**Focusing on prevention is essential if we are going to win the battle against the opioid epidemic in the United States.** Quality, voluntary home visiting programs are a proven prevention program, reducing ACEs such as child abuse and neglect. Since there is a link between exposure to ACEs and later misuse of prescription and illicit drugs, these home visiting programs have an important role to play in preventing opioid abuse.

In order to meet the opioid challenge, the federal government should maintain its commitment to MIECHV and Early Head Start, which fund home visiting programs across the country. The State of Illinois should increase home visiting funding, which will in turn help address the affliction of opioids, prove cost effective for the state, and result in a more stable and sober Illinois.

> If we can get struggling parents the services they need now, maybe my officers won’t have to save their kids from an overdose in the future.

Chief Brian Fengel
Bartonville Police Department
Endnotes


9 See Endnote 2; 437,000 is a preliminary estimate for 2016, which is subject to change.

10 See Endnote 2.


27 See Endnote 3


Fight Crime: Invest in Kids
Thousands of police chiefs, sheriffs, prosecutors and violence survivors protecting public safety by promoting solutions that steer kids away from crime.

70 E. Lake Street / Suite 1116 / Chicago, IL 60601 / 312.265.2260

Council for a Strong America is a national, bipartisan nonprofit that unites five organizations comprised of law enforcement leaders, retired admirals and generals, business executives, pastors, and prominent coaches and athletes who promote solutions that ensure our next generation of Americans will be citizen-ready.

1212 New York Avenue NW / Suite 300 / Washington, DC 20005 / 202.464.7005