To: Health and Human Services Interim Committee  
From: Bureau of Health Promotion, Violence and Injury Prevention Program  
Subject: 26-7-14. Study on violent incidents and fatalities involving substance abuse -- Report

Violent Incidents and Fatalities Involving Substance Abuse:

Utah Homicides by Year, 2016-2020
2020 – 96  
2019 – 82  
2018 – 67  
2017 – 79  
2016 – 80

Drug and alcohol testing information was available on 85 of the 96 homicide victims in 2020. Of these 85 homicide victims, 57 (67.1%) tested positive for any drug and 14 (16.5%) tested positive for alcohol. Eleven (12.9%) victims were positive for both drugs and alcohol.

It is important to keep in mind the following when looking at positive drug tests:
- Drug presence does not necessarily imply impairment. For many drug types, drug presence can be detected long after any impairment has passed. Also, whereas the impairment effects for various concentration levels of alcohol is well understood, little evidence is available to link concentrations of other drug types to impairment.

There is currently no statewide data source that contains suspects of violent incidents and substance use test data. Additional funding or staffing would be required to complete this request. Many of the suspects of these crimes are not arrested until days, weeks, even years after the crime was committed making any test data irrelevant.

More information on homicides can be found at: https://ibis.health.utah.gov/ibisph-view/indicator/view/Homicide.UT_USYear.html.
Drug Overdose Events:

Utah Drug Overdose Deaths by Year, 2016-2020
2020 – 545
2019 – 507
2018 – 558
2017 – 548
2016 – 555

Of the 545 drug overdose deaths during 2020, 511 deaths were unintentional drug overdose and 34 deaths were undetermined intent drug overdose.

More information on drug overdose deaths can be found at: https://ibis.health.utah.gov/ibisph-view/indicator/view/PoiDth.UT_US.html.

Recommendations for Legislation to Prevent Violent Incidents Involving Substance Abuse and Drug Overdose Events:

• Removing “testing equipment” as part of drug paraphernalia (58-37a-3). This would make clear the legality of fentanyl test strips and pave the way for more advanced drug testing technologies that could be implemented as a harm reduction tool to help people know what is in the drugs they are using.
• Funding to develop needed infrastructure for critical substance abuse and mental health interventions and treatments, especially in rural local health and mental health authority districts.
• Reduce or eliminate legal fees and fines associated with conviction for veterans who participate in treatment programs.
• Require prescribers to perform a review of the Controlled Substance Database (CSD) before prescribing opioids to identify and prevent doctor-shopping and other drug seeking behaviors, and refer to proper treatment.
• Legislation focused on improving/funding substance abuse/mental health treatment in prison and when people are leaving prison.
• Ensure that all incarcerated people with a substance use disorder be provided access to medication for addiction treatment while incarcerated.
• Ensure that, upon release from a correction setting, individuals receiving medication for addiction treatment be provided with a connection for continued care, including a prescription, and the necessary contacts and tools to continue their treatment.
• Reducing access to lethal means such as firearms or substances for those experiencing a crisis has been shown to decrease the likelihood of harm.

Policymakers interested in reducing and preventing substance abuse and violence should focus on larger social issues known to increase risk. Some of these policies include:
• Mental Health “Parity” or Equal Coverage Laws.
• Minimum Mandated Mental Health/Substance Abuse Benefit Laws.
• Mental health professionals “Duty to Warn” legislation.
• Funding for parenting skills and family relationship approaches such as social emotional learning and evidence based healthy relationship education.
• Tax-Related Supports: Increasing the financial solvency of new families is a promising practice for reducing violence and substance use. Examples are State Earned Income Tax Credit and Child tax credits.
• Statutes related to payday lending.
• Benefits to employers to offer family-friendly workplace policies, including paid maternity/paternity leave, flexible schedules, and on-site childcare.
• Funding appropriations to increase availability of home visiting, high quality child care, and preschool enrichment programs.
• Legislative approaches to reduce corporal punishment.
• Enhanced primary care for victim-centered services, treatment to lessen the harms of adverse childhood experiences, treatment to prevent problem behavior and future involvement in violence, and family-centered treatment for substance use disorders.
• Social Services Enrollment Rules and Requirements: Streamlining enrollment processes for social service applications could help alleviate parental stress and increase access to beneficial resources.

26-7-14(3) (b) – Cost to Complete Report:
Funding was eliminated during the legislation session and the Department did not have funding to meet the requirements of the bill to fully develop and provide the requested report.

26-7-14(3) (c) – Recommendations for legislation to facilitate data collection or information sharing:
There is currently no statewide data source that contains suspects of violent incidents and substance use test data. Additional funding or staffing would be required to complete this request.