GeMar Neloms: Hi, my name is GeMar Neloms. I'm the director of RETAIN TA and it really is our pleasure today to have with us, Dr. Amanda Lattimore who's an epidemiologist and director of CARES, which stands for the Center for Addiction Research and Effective Solutions at the American Institutes for Research.

GeMar Neloms: And we have Ashley Shaw with us, who is the director of CORE, which stands for Creating Opportunities for Recovery Employment, which is part of the Marshal Health Medical Center in West Virginia, welcome to both of you today, and thank you for joining us.

GeMar Neloms: We do appreciate your time today and for providing us the opportunity to learn from your experiences and expertise related to challenges presented by the opioid crisis and overdose crisis, and the overall challenges it presents for workforce.

GeMar Neloms: In RETAIN, it has implications for the multi-sector partnerships of our state teams. For frame of reference, these partners represent workforce, healthcare, and disability services and others who, through early intervention strategies, coordinate services to help those individuals who have been injured or are ill get back to work.

GeMar Neloms: And so, today we are thankful that you're allowing us an opportunity into what I suspect is going to be an intimate discussion among friends and colleagues where you'll be able to frame the crisis itself and share some reflections from the conversations you've had with employers in West Virginia. And then the work that CORE does and working with employers and getting people back to work and creating recovery friendly workplaces.

GeMar Neloms: Overall, we are looking forward to a perspective on how employment strongly connects to prevention and is an area that we should look to help address, not just in the work that we do with RETAIN, but the overall overdose crisis that our country is facing right now. So with that, I'm going to step out of the conversation and turn it over to both of you, and once again thanking you both in advance for today's conversation.

Amanda Latimore: Well, thanks for having us, I'm excited to have this conversation and excited to be joined by Ashley who you know we've had a lot of really great conversations about employment and substance use disorder. And I know that she's got a lot of great, you know, practical experience that she can share.

Amanda Latimore: My role here is just to kind of share the data. I'm an epidemiologist and so I'm always thinking about the data. And the data really do bear out that the opioid crisis is getting worse and it's not just an opioid crisis, it's an overdose crisis because substance use is important issue for a lot of states.

Amanda Latimore: But today we're talking specifically about opioids. I know this is a major concern for a lot of employers and with the Center that I direct, CARES. We've been thinking about approaching addiction and

people impacted by addiction, supporting them through not just medications, and moving away from you know criminal justice response.

Amanda Latimore: I think there's a growing understanding that we're not going to be able to arrest our way out of this and there's been more of a focus on medications and the medical response and we're taking that one step further. Thinking about social determinants like, employment, housing, transportation, education and how that really intersects in people's lives. Employment is a big part of that, we know that employment not only encourages recovery from substance use disorder, but also is a contributing factor for developing substance use disorder.

Amanda Latimore: Employment can also be a positive measure of success for treatment as people move towards recovery, and so you know, working with organizations like CORE and with Ashley is a big part of addressing the crisis, so we know that there's been a 30% increase since the pandemic in overdose deaths. In states like Kentucky, Kansas, Minnesota, Ohio, and Vermont, they're seeing between 25 and 85% increases.

Amanda Latimore: And so, of course, this is of concern for a lot of public health leaders and employers that are part of the community, part of a broader community, and individuals bring their whole selves to work. And so as they engage with colleagues and their employers, thinking more deeply about the role of the business community is important.

Amanda Latimore: I just want to talk for a few minutes about some work in West Virginia that we did a few years ago.

Amanda Latimore: West Virginia has been affected pretty heavily by substance use disorder and overdose and are facing a workforce gap. The Chamber of Commerce and one of the cities came together and said, look, we have to do something about this, we have a lot of people who are in recovery or have substance use disorder and we have a workforce challenge, so we need to figure out how to solve this.

Amanda Latimore: And so, they got together -- the Huntington Chamber of Commerce got together -- and did a survey with their businesses small, medium, and large.

Amanda Latimore: I came in and worked with them to do some focus groups and interviews. We learned during those conversations that there is a lot of hesitancy to hire people in recovery. They have concerns about liabilities, whether that's financial, human resource, or legal. They really said we need a model of support, maybe similar to other disabilities like mental health, we don't have that for substance use disorder or for people using the employee assistance programs that people are sometimes fearful of using.

Amanda Latimore: We don't know how to identify warning signs. There's a lack of services in the community, so there's a slew of challenges that employers face, and there are solutions for those challenges. Some communities have been able to overcome through various interventions. And Ashley, it would be great if you could talk a little bit about how West Virginia took that information and developed a program.

Ashley Shaw: I just want to say thank you, I think this is just a timely conversation to have at this moment, considering that our rates of substance use disorder are increasing, as a result of the pandemic.

Ashley Shaw: It's really important for employers and individuals in recovery and really just poor communities to have an understanding of the overall impact that substance use has on the workplace.

Ashley Shaw: CORE is a response program, of course, creating opportunities for recovering employment. Really, CORE was birthed out of the need of a community or communities that have underserved populations and need support to navigate the employment experience.

Ashley Shaw: Some folks you know typically say you just go out and get a job, just apply online or go knock on doors and it's easy peasy. If you want to work, you'll find a job. And we found that it's not that easy for any individual, but when you compound that with substance use disorder, it becomes very difficult because often individuals who are in recovery just lack the confidence. They're already feeling like they are pulled away from Community. There's that lack of Community support.

Ashley Shaw: And then you want me to go out and find employment when I've got all these challenges or barriers to employment. So, CORE is really a response program to help individuals in recovery overcome those challenges, help them build that confidence, and help them identify where their strengths are and what work experience they have. This allows them to bring that experience to the table and make them just as employable as the next person.

Amanda Latimore: Absolutely, and there are a lot of myths out there about people in recovery and their ability to contribute to the workforce, they're in some of the conversations I've had with employers. This idea that if I hire someone in recovery that there's going to be a lot of turnover. There's a lack of trust there.

Amanda Latimore: But that really doesn't bear out in the data. If you look at people in recovery, they take fewer days off, they tend to stay in jobs longer and they're less likely to be hospitalized.

Amanda Latimore: That is confirmed by research, and it is just an artifact I think of this stigma in the broader community about people with substance use disorder. Folks with addiction are all around us already.75% of people who have substance use disorder are already in the workforce.

Amanda Latimore: When it's so hard to find a job that when someone finally gives you an opportunity, you take it and excel.

Amanda Latimore: A huge misconception among employers is that they think what's in it for me, why should I take the risk if I don't have to. Well, you already are, first of all.

Ashley Shaw: Misconception already exists when you're hiring someone who's not in recovery, there is this idea about liability that still exists. So that risk is there, regardless of if you are aware that that person's in recovery or not, the liability still exists.

Amanda Latimore: Exactly, and what are some of the other challenges that you've seen for people you're supporting through your program and getting them connected with the appropriate employer?

Ashley Shaw: You know, oftentimes I find with employers that there is this undercurrent, this underlying assumption that individuals who are in recovery don't have experience, that they are individuals who've never worked and don't have any skills.

Ashley Shaw: And we really have to debunk that because we can see, as the stats show, there are people in the workplace who are currently struggling with substance use disorder, so that goes to show that we do have individuals who are skilled. So, I think the assumption often is that individuals just don't have skills if they're in recovery.

Ashley Shaw: And oftentimes employers sort of have these arbitrary feelings about hiring folks who are in recovery, and they make these decisions based on employment, based on these arbitrary feelings. We try to encourage and coach employees to make hiring decisions based on skills and experience and how individuals can clearly tell their story in an interview and demonstrate that story in a resume.

Ashley Shaw: You know, having a connection to an individual certainly is important. You want them to fit into the culture and all of that, but more than that you want to make sure that they have the skills to be able to complete the job tasks. So, we just want to encourage employees to really hone in on training managers and hiring managers to really look at individuals based on their skills and experience versus I like this person or this person recommended them, and I think they'll be good to go in this position.

Amanda Latimore: And sometimes some of the criteria for positions may not be aligned with the actual job duties. There are also unnecessary barriers at times. I know different employers have different criteria and legal requirements, but there are employers who, for example, completely right off the bat take people off the running because they have a criminal record.

Amanda Latimore: Due to the punitive response to the last 50 years for addiction, a lot of people with substance use disorder have been arrested at some point, and come into contact with the law, and so that is often a barrier for folks that leads to some substantial long-term consequences. If you can't get a job, how do you recover, how do you get to a point where you have quality of life? How do you engage in treatments if you don't have a job with insurance? It's just a lot of downstream consequences.

Amanda Latimore: So, having you know ban the box efforts, for example, might be for an employer looking at their policies around box checking. In fact, there's federal change happening this year where if you're receiving federal dollars you have to ban them.

Amanda Latimore: Though it's a wave that's coming whether you want it to or not, so figuring out how to really evaluate candidates with skills is important instead of using an arbitrary criterion. Unfortunately, the research shows that if you have two resumes, one resume with skills and one resume without skills but no criminal record, employers tend to lean towards the people without skills because of this stigma.

Amanda Latimore: But that's a lot of effort to train someone. That's a lot of effort when you have someone who's already got what it takes to do the job well.

Ashley Shaw: Right, exactly! We need to lean, we have to push ourselves to lean sometimes in the opposite direction. Employers have lean into this, for all of us.

Ashley Shaw: But we want to be fair across the board. If you have somebody who has the skills, they should be employed. Just to bring in another example that we've seen, we had one employer that on all of their job postings stated you must have a driver's license. And so, we had an employment specialist have a conversation with this employer about certain positions that they thought required a driver's license. Thankfully, after this conversation, it was discovered that not all these positions required a driver's license. As a result, we've been able to get several people employed at that location.

Ashley Shaw: It just goes to show that sometimes employers have to take an extra step and have those conversations internally to figure out how can we make this less challenging for populations who have the skills.

Amanda Latimore: Absolutely, and it's a necessary consideration when you are having trouble finding people.

Amanda Latimore: Exactly! Something we're hearing throughout the pandemic that finding people for certain industries has been a real challenge. So now maybe is a good time as any to take a hard look at how you can remove barriers for people engaging in your hiring process.

Amanda Latimore: Are there other things that you've seen employers do that improve how recovery friendly their workplaces are?

Ashley Shaw: Sure, and it doesn't have to be an all or none. Businesses can take small, practical steps. I'm always a proponent of small steps equal big wins along the way, and so a couple of things that employees can do to sort of encourage that recovery supportive workplace is to really look if they have a drug free workplace policy and how they execute that drug free workplace policy. Because that sets forth for the employer and for the employees what are our action steps? How do we address substance misuse in the workplace? So, we want to make sure that

[policy] is fair and that it's being applied consistently across the board for all employers. That's one thing employers can do.

Ashley Shaw: Another thing that employers can do is really embrace training for their hiring managers and HR representatives. There are so many resources that are available online and different organizations that are providing support to employers who really want to learn how to build a recovery supportive workplace and what that specifically looks like.

Ashley Shaw: Employees wonder sometimes if employee assistance programs are really worth it. Well, if you don't talk about it, and if the employee doesn't know that it exists, it's probably not fruitful for anyone. So, we just ask that employees to really have conversations with their employees and make sure that HR and hiring managers are not having that conversation just once. I think we're seeing that wellness is becoming more of a conversation in the workplace and so those are a couple of things that employers can really do.

Ashley Shaw: You know we've had some employees that have had meetings on site. They allow their employees, if they have a meeting related to treatment and recovery, to have that time to do that if their performances is as it should be.

Ashley Shaw: And allowing those second chances if the individuals performance has been in good standing prior to maybe a reoccurrence or something of that nature.

Amanda Latimore: You bring up a really important point about wellness in the workplace, and that is something related to the idea of mental health challenges. During the pandemic these challenges have really come up and have really elevated the idea we can't separate out so much. You know what's at the workplace, either we can't compartmentalize as much as we used to because you know the pandemic has created a lot of stressors and isolation. Mental health has emerged as a really important challenge in the workplace, which is related to the to the job, the functions of the job, while you've got your kids running around.

Amanda Latimore: Also, what's happening outside of your employment, so you know that points to one of the things that is a growing area for employers, and you know we've been talking about putting a public health lens on it. We've been talking about secondary prevention and tertiary prevention, so there are three different kinds of prevention such as primary, secondary, tertiary, but stop this before it even becomes a problem before people even have opioid use disorder. Let's think about what we can do to create barriers for that progression if someone's using opioids. Secondary prevention is how do we support people who've already developed opioid use disorder. Tertiary prevention is someone has opioid use disorder, and they are trying to reduce the impact of ongoing disease. Primary prevention is something that deserves a little more attention and that is what can we do in the workplace to reduce hazardous work conditions, to reduce physical injury, to reduce emotional injury.

Amanda Latimore: How do we improve workplace wellness? Connect people to those resources that are already there, but folks just don't know about it.

Amanda Latimore: How can we elevate the importance of talking about mental health because it is a risk factor for substance use disorder. The more you reduce physical and emotional injury in the workplace, the more long-term positive consequences for an employer for dealing with substance use disorder.

Amanda Latimore: And so thinking about providing mental health resources, behavioral health parity, and what you offer for insurance that folks have access to. Mental health services and substance use disorder services are important.

Ashley Shaw: There is so much value for the employee and the employer to have resources that are readily available, and one thing I just want to hit on very quickly was that point you made about employment touching every area of your life. This is why it's so important for employers to really think about the individuals that they're hiring and the support that they provide, because if you've got children it's going to impact employment, if you got some type of physical illness or limitation it's going to impact work, if you are struggling with abuse or something at home it's going to impact employment. And so, we've all got to make a concerted effort to see everything, as this is our community.

Ashley Shaw: And employers are part of the community. We can all support overall wellness for individuals with substance use disorder and we can serve to be preventative in nature as well.

Amanda Latimore: Absolutely, and hopefully this has been helping folks connect the dots.

Amanda Latimore: I'm hoping GeMar can step in and just talk a little bit about what RETAIN grantees have been dealing with and how this might be relevant to their work.

GeMar Neloms: I think both of you have said so much that is relevant to RETAIN.

GeMar Neloms: Amanda, you mentioned all five states that we work with in phase two earlier on, when you were helping us understand the context of all of this.

GeMar Neloms: And I think it's important to note that each of our states are allowed to develop a model that they feel works best for them and getting people back to work. This is why I find this conversation so helpful, because I've heard quite a few things in this short period of time that is relevant to RETAIN. Ashley, you reflected on experiences you all had with a chamber of commerce who said, wait a minute we want to be a part of helping address this and solve the problem, and ultimately has become a champion of the efforts that CORE and others are doing in West Virginia.

GeMar Neloms: In terms of involvement, I heard making sure that we are involving and considering the people that we serve. Our immediate point of contact, the program users who walk into our programs, and recognizing this is something that they may be new for them, or almost traumatic for them, so they're coming with other issues, not just for routine.

GeMar Neloms: What we call their primary prevention or what they primarily present as their health item, but there are other items that go along with that, as well from a mental health, self-esteem, and confidence lens.

GeMar Neloms: And then you also talked about job managers and hiring managers. All of these were people who think about all the different entities that are involved.

GeMar Neloms: When you are trying to address a problem or a solution of this magnitude, especially using work as a way to help do that, and so I heard job managers, hiring managers, making sure that they have the type of professional development and skills that they need in this arena to help support not only the individual that's coming in, but also the organization or the company itself.

GeMar Neloms: Which leads me to something else I heard that I think is beneficial to RETAIN, and that's about educating the employers, educating those of us who are actually providing the point of contact service within RETAIN. So let it be about the skills that are needed to do the job not arbitrary feelings, let it be about reflections on - what we call it in the disability space - job analysis and accommodations and thinking about it from that lens. I love that example of the driver's license and saying well but do they really need it.

GeMar Neloms: When you look at it in this larger context that's about job analysis. In our case with RETAIN, someone has had this role that they had before their injury or their illness. They may not be able to fulfill that role, right now, but let's do a job analysis and let's take a look at where they work and how they work and if there is a way they can be transitioned into another role. Or if they're going to go to a totally different employer, what might be a good fit for them.

GeMar Neloms: I can totally see how that works with CORE as the lever to help employers see the same types of things. Then you also mentioned something that I think was subtle, but I'm not sure that we always talk about it in a way that we should and that's awareness of the policies.

GeMar Neloms: Awareness of it in connection to the different policies that employers have. So, there's my personal favorite, which is the role of wellness, which we have said for decades in the workforce development system that work is part of health.

GeMar Neloms: I think the pandemic has really started to drive that home where people understand how work is a health outcome, right. And I know that all of you in this space work in terms of substance use, especially substance use recovery. I know that you all have known that, but I think understanding what our policies as an employer are in relation to

wellness and how this connects to helping us meet those policies. What is our policy on a drug free workplace, how have we articulated it, and how do we make sure it's implemented? Then also that connection to mental health as part of connecting to the role of wellness, and just the overall wellbeing of the people who work for us at the end of the day.

GeMar Neloms: If we want a workplace where we're supporting a culture of mental health and folks being able to avail themselves of assistance when they need it, but that means we as employers and we as point of contacts in RETIAN have to be aware of what those services are, what those needs are, and what that looks like.

GeMar Neloms: You can tell I've obviously been jotting down so much of this conversation and there's one more thing that I also think was subtle. Both of you reflected early on the role of data and research. So, when we talk about the barriers that are formed because of perception, Amanda, you gave some really excellent information about what we perceive versus what the data actually tells us are not the same thing. So, in this case, folks who are in recovery stay in the workplace longer have less absent days versus what we think.

GeMar Neloms: I think that's where data and research are also really important. The liability piece, for example, which is also something we experience a lot in RETAIN where there is concern from employers regarding perceived liability, even though that perception may be misplaced and serving as a barrier to keeping those people in the pipeline; preventing you from identifying what your work needs are as a business; and preventing participants form getting back in the workforce when they're ready. So that's a very long-winded way of saying yes, I do think this has implications and is a wonderful connection to RETIAN and to what our States are doing, particularly within their engagement with employers and businesses who want to be a part of what RETIAN stands for.

GeMar Neloms: These are some of the areas that may feel tenuous to them because they don't necessarily have the base of knowledge that you all have been able to provide from your experiences.

Amanda Latimore: Great, thank you. I appreciate the framing with the folks that you work with in RETIAN. You know CARES is available to support this kind of work, and Ashley and her program with CORE provides a really great example of how the behavioral health community can come together with the business community and work with employers, which is often not done in recovery supports. Not only working with employers to get individuals recovery support, but also the employers supported. I think this is innovative and happy to be on this podcast with you all.

Ashley Shaw: Likewise, I echo everything that's been said, and I look forward to continuing these conversations around this topic.

GeMar Neloms: Absolutely, wonderful! And we really do appreciate your time today and we'll make sure that when we post this for the RETAIN network, that they have a direct link to CORE so they can see all the excellent work that you all have been doing in your state. Don't be surprised if folks say, hey can we talk with you a little more.

Ashley Shaw: Please do.

GeMar Neloms: Amanda Lattimore, we are once again pleased to avail ourselves of your expertise and your direct connection with CARES and West Virginia and consistently informing us through your work with CARES. We're really looking forward to that ongoing piece as well, and so I want to thank you both once again and continued success in West Virginia.

Ashley Shaw: Thank you, thank you so much.

Amanda Latimore: Thank you.