



**THE ALLIED TRADES  
ASSISTANCE PROGRAM**

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## INTRODUCTIONS

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Ken Serviss, CEAP, CAC, QSAP

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Executive Director

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Joe Carey

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ILA Pier Counselor

# **AGENDA**

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CURRENT TRENDS

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SUBSTANCE USE IN THE WORKPLACE

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MENTAL HEALTH IN THE WORKPLACE

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STIGMA

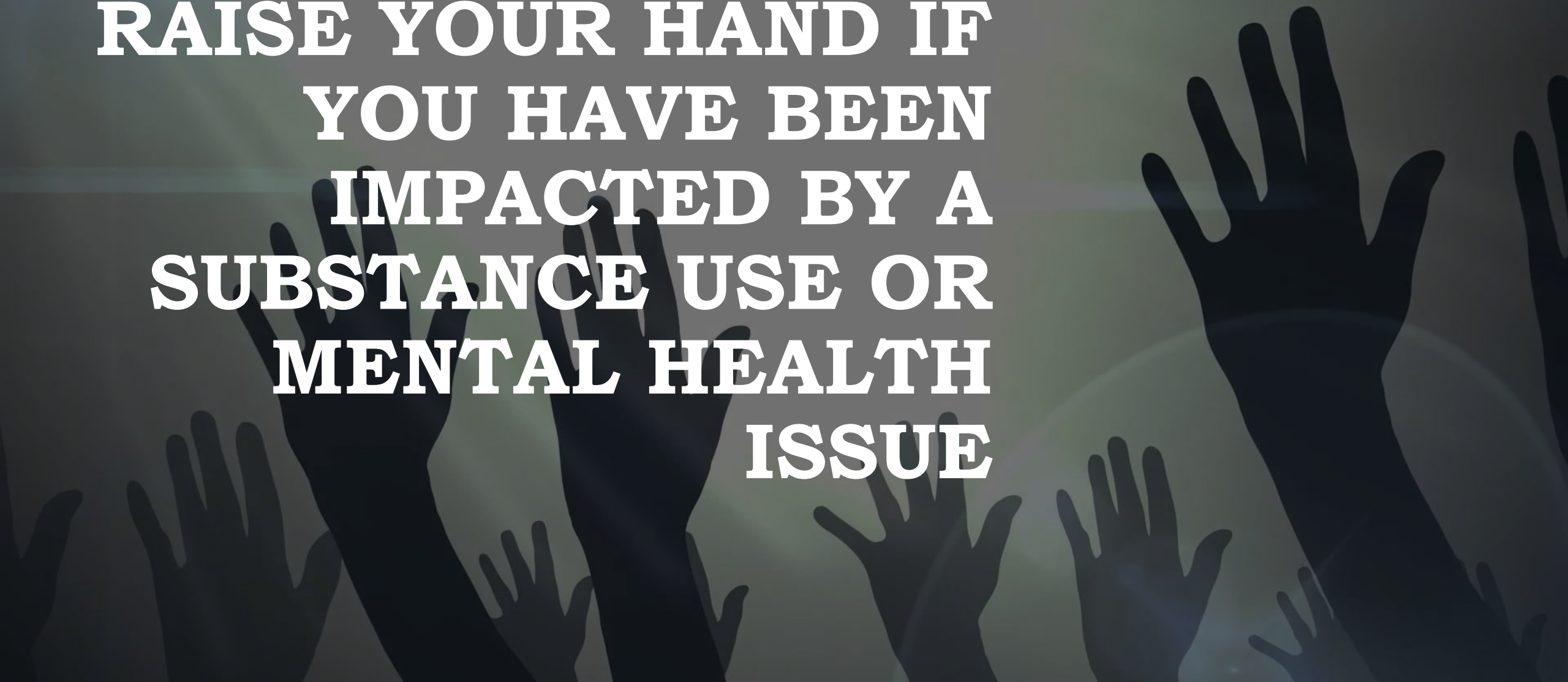
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ADDRESSING THE PUBLIC HEALTH  
CRISIS

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FOCUSING TOWARDS CHANGE

**RAISE YOUR HAND IF  
YOU HAVE BEEN  
IMPACTED BY A  
SUBSTANCE USE OR  
MENTAL HEALTH  
ISSUE**



# WHERE ARE WE AT TODAY?

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In 2021, there were 106,699 overdose deaths compared to 91,799 in 2020. Deaths involving synthetic opioids (primarily fentanyl) increased to 70,601.

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More than 70% of deaths occurred among males

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According to the National Institute on Mental Health (NIMH), one in five U.S. adults live with a mental illness in 2021 (57.8 million).

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Only 26.5 million (47.2%) received mental health services

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The prevalence was higher among females (27.2%) than males (18.1%).



# PRESENT DAY OPIOID EPIDEMIC

- Manufactured fentanyl continues to be present in drug markets
- Non-opioid users are dying as fentanyl is mixed with other drugs such as cocaine and methamphetamine
- Data is trending to likely show that fatal overdoses have increased dramatically in many communities during the COVID-19 pandemic
- Reasons for this increase includes depression and anxiety tied to the pandemic, the end of in-person, face-to-face prevention and treatment services due to COVID-19 precautions, and unplanned stops and starts in drug usage and isolation

# “TRANQ” ~ XYLAZINE

Xylazine is not an opioid. It is a central nervous system depressant and cannot be reversed by Naloxone, making it harder to save people overdosing on this combination.

In 2020, the Centers for Disease Control and Prevention found xylazine in 11.4% of overdose deaths

Drug traffickers are now using the sedative xylazine as an adulterant for other illicit drugs to increase or change the effects. People who use drugs like heroin, fentanyl, or cocaine adulterated with xylazine are increasing their risk for a fatal drug overdose, often without knowing they are taking the sedative.

# IMPACT ON THE WORKFORCE



According to the CDC, Workplace unintentional overdose deaths accounted for 5.8% of occupational deaths



The three most prevalent industries included transportation, construction, and warehouse workers



According to the National Council on Alcoholism and Drug Dependence (NCADD), drug use and addiction cost American companies \$81 billion every year



# OPIATE USE AMONG WORKERS

- Prescription pain relievers alleviate moderate to severe pain
- Addiction to a prescription opioid like Vicodin can happen within several weeks of starting the drug
- As tolerance builds to an opioid, the user finds out they must take more of the drug to get the same effect
- As the body gets addicted, so does the brain



**IMPAIRMENT IS A SERIOUS ISSUE**

**FACING TODAY'S WORKPLACE**

**75% OF EMPLOYERS REPORT THAT  
OPIOID USE HAS IMPACTED THEIR  
WORKPLACE**

**ONLY 17% OF THOSE EMPLOYER'S  
REPORT BEING PREPARED TO ADDRESS  
THE ISSUE**

**CDC, 2021**

An aerial photograph of a busy port area. In the foreground, a large container ship with "YANG MING" written on its side is docked at a pier. The pier is filled with numerous blue gantry cranes used for loading and unloading containers. The ship's deck is stacked high with colorful shipping containers. To the left of the ship, there are large industrial buildings and more stacks of containers. In the background, a dense urban cityscape stretches across the horizon under a clear sky. The overall scene depicts a major hub of international trade and logistics.

**ADDICTION IN OUR  
INDUSTRY**

# **MENTAL HEALTH IN THE WORKPLACE**

**MENTAL  
HEALTH  
AND SUICIDE:  
A SERIOUS  
PUBLIC  
HEALTH  
PROBLEM**

Statistically industries such as, mining and construction, are the worst in terms of workers suffering with mental health issues and the highest rates of suicide per industry in the U.S.

Individuals who work in safety sensitive positions are the perfect example of how differently society views physical and mental health.

## PERCEPTION

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Industries that are male dominated, have the perception that the men who work within it are 'tough'.

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Recent surveys have suggested that 64% of workers want better support for their physical health, mental health, and overall wellbeing, with calls coming from within the industry to have a better awareness of mental health.



**THE CDC HAS FOUND  
THAT AT RISK  
POPULATIONS  
EXHIBIT MANY  
COMMON RISK  
FACTORS THAT ARE  
ASSOCIATED WITH  
FEELINGS OF  
HELPLESSNESS.**

## SUFFERING IN SILENCE

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Many workers feel forced to “deal with it,” not seeking out the help they need, and symptoms get worse.

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To counteract this long-standing challenge, the mental health of your workforce needs to be prioritized at the same level as is safety on work sites.



# SUICIDE STATISTICS

2021 data indicates 48,183 suicide deaths after two years of declining numbers in 2019 and 2020

- Approximately one death every 11 minutes
- Suicide was the ninth leading cause of death in the U.S. (ranked tenth in previous years)
- The suicide rate among males was 4 times higher than females
- There were over 1.7 million attempted suicides

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Sometimes we are not aware of the suicide risk in a person until they try to end their life.

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A suicide attempt is among the most predictive factors for future suicide risk.

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Reports estimate that for every suicide death there are 25 to 100 non-fatal suicide attempts for all ages

# **ATTEMPTED SUICIDE**

# THE IMPACT OF SUICIDE

According to the Centers for Disease Control and Prevention, the financial toll of suicide on society is costly.

Suicide and nonfatal self-harm cost the nation over \$500 billion in medical costs, work loss costs, value of statistical life, and quality of life costs.

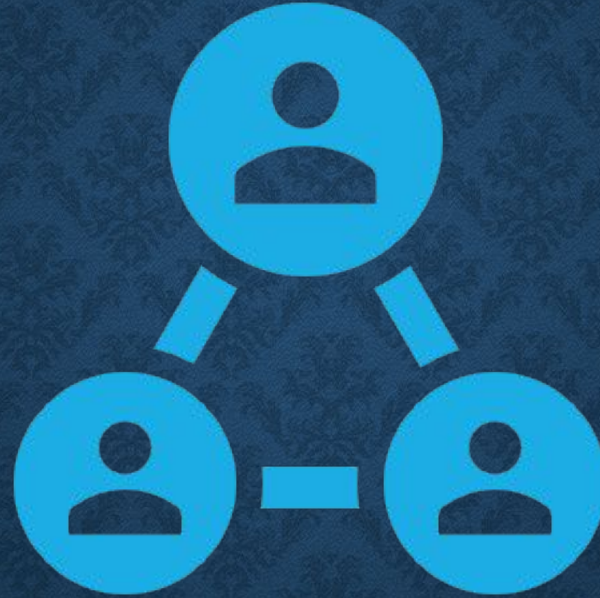
For every suicide death, there were about:

3 Hospitalizations for self harm

8 Emergency Dept. visits related to suicide

38 self-reported suicide attempts

265 people who considered suicide



**AS LEADERS WHAT ARE WE DOING TO CHANGE?**



According to the National Institute on Drug Abuse (NIDA), addiction is defined as a chronic, relapsing disorder characterized by compulsive drug seeking, continued use despite harmful consequences, and long-lasting changes in the brain. It is considered both a complex brain disorder and a mental illness.

**HELP**



**ASSISTANCE  
ENCOURAGEMENT  
SUPPORT**

**ALCOHOLISM**

**ASTHMA**

**MENTAL HEALTH**

**CANCER**

**DIABETES**

**SUBSTANCE USE DISORDER**

**HEART DISEASE**

**LABEL**

**DETACHMENT**

**DISAPPROVAL**

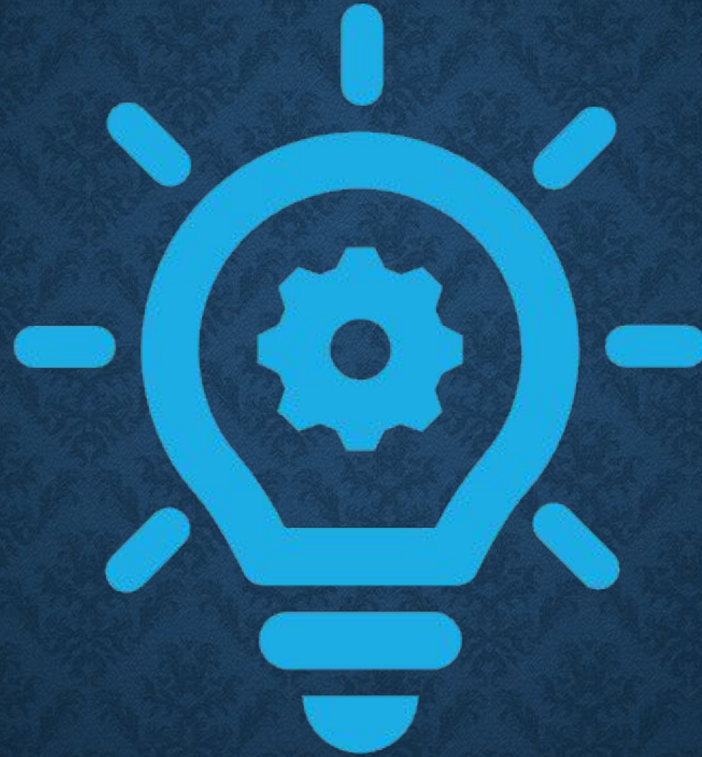


**STIGMA**

A 3D puzzle with one red piece in the center. The puzzle pieces are dark blue and arranged in a grid. The red piece is the central focus, standing out against the blue background. The text is overlaid on the puzzle.

# **STIGMA**

**A mark of disgrace associated  
with a particular  
circumstance, quality, or  
person.**



**THE MOST EFFECTIVE APPROACH TO ADDRESSING A  
PUBLIC HEALTH CRISIS  
IS THE  
PUBLIC HEALTH MODEL**



# THE PUBLIC HEALTH MODEL



Prevention & Awareness



Intervention



Treatment



Support

A signpost with multiple directional signs: ADVICE, TIPS, ASSISTANCE, HEALTH, SUPPORT, and GUIDANCE.

# **PUBLIC HEALTH MODEL**

## **Intervention**

# **PUBLIC HEALTH MODEL: INTERVENTION**

**Effective Employee Assistance Program**

**Comprehensive Drug and Alcohol  
Testing Program**



# THE ALLIED TRADES ASSISTANCE PROGRAM

Who We Are & What We Do

# ATAP: HISTORY

- ATAP is a non-profit, 501c3 organization created by the Philadelphia Trade Unions to contain costs and promote improved service delivery for substance use disorder, mental health concerns and related issues to union members, retirees and dependents.
- Since inception, ATAP has delivered above industry standard quality Employee Assistance Services for numerous labor organizations ranging in size from 800 to 10,000 members. ATAP has been able to customize and implement an Employee Assistance Program that best meets each organization's target objectives.
- ATAP is a program of unions, for unions and by unions
- The problems of substance use, and mental illness affects every level of society. As pressures of everyday living have increased, so have the number of people with substance use and mental health disorders. ATAP was created to address the needs of union members arising out of substance use and mental health disorders as well as related problems.



# ATAP STAFF

- ATAP staff is directly responsive to the specific needs of union members, their dependents and retirees in providing personal, confidential and appropriate referral and follow up services.
- **ATAP staff is comprised of:**
  - Certified Employee Assistance Professionals (CEAP)
  - Qualified Substance Abuse Professionals (SAP)
  - Licensed Social Workers (LSW)
  - Master Level Social Workers (MSW)
  - Certified Addictions Counselors (CAC)

# ATAP Services:



EAP sessions both virtually and face to face/site visits



24-hour Emergency Helpline with direct contact with ATAP staff



Telephonic assessments and referrals



Provider Network and Relations – telehealth services



Training, Education and consultation



Critical Incident Stress Debriefing

# **PUBLIC HEALTH MODEL**

**Prevention &  
Awareness**

AWARENESS  
EDUCATION  
HARM REDUCTION  
ANTI-STIGMA  
CAMPAIGN  
SOCIAL MEDIA  
TOOLBOX TALK



# PREVENTATIVE EDUCATION

Online training developed in 2016, to promote Awareness about Substance Use Disorder in the workplace

In Fall of 2022, ATAP kicked off their 2-hour in person education covering Mental Health and Substance Use Disorder.

The goal for ATAP was to specially target our Union Apprenticeship Programs. To date ATAP has provided this education to 10 union Apprenticeship Programs.

## Training Objectives:

Addiction in the Construction Industry  
Mental Health in the Construction Industry  
Suicide Awareness  
What's in your Toolbox to help?

Employee Assistance Program - ATAP  
Peer Advocate Program  
Building Trades Support Group  
Naloxone

# PUBLIC HEALTH MODEL TREATMENT



# PUBLIC HEALTH MODEL TREATMENT



- Do your members have access to treatment?
- Are members in the appropriate level of care?
- Are your members being denied treatment at admission or continuing care review?
- What are the costs associated with various treatment modalities?
- How do you select treatment providers?
- Internal Controls – Accreditation – Standards

# CENTERS OF EXCELLENCE

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Collection of comprehensive data to support quality treatment outcomes and satisfaction surveys

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Overview of Physical Plant and Clinical/Specialty Programs

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Oversight of compliance with facilities State Licensure and Accrediting Body

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Provision of documents including Financial Audits, Malpractice and Liability Insurance

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Overview of Policy and Procedure manuals

# COMMON CONCERNS FOR UNION MEMBERS SEEKING TREATMENT

- Many employees worry about voluntarily coming forward to admit they have a substance use problem; and yet, seeking treatment is always the best way to safeguard one's employment and/or licensure.
- Employees who fail a drug test or come to work under the influence are subject to disciplinary measures.
- Requesting treatment before a substance use problem starts to affect one's job performance can spare an employee from potentially serious, negative consequences.
- Some employees may have concerns about finances and affording time away for treatment.

A top-down view of a diverse group of people sitting on the floor, with their hands stacked in a circle in the center. The hands are of various skin tones and are wearing different colored sleeves and cuffs. The background is a light-colored floor. The text 'PUBLIC HEALTH MODEL SUPPORT' is overlaid in white, bold, sans-serif font, centered over the hands. A vertical white line is positioned to the right of the text.

# PUBLIC HEALTH MODEL SUPPORT

# PEER ADVOCATES



Developed in 2017, to address workforce needs related to the opioid epidemic

Internal liaison within the workplace to assist and support individuals who are struggling with substance use disorder

Trained to act as a first responder to support their peer until they can connect with their Employee Assistance Program

Support person for individuals returning from treatment

Building Trades Support Group Meeting

# PEER ADVOCATE PREREQUISITES



- ✓ Complete the Preventative Education “Changing the Culture of Construction” Substance Use Disorder and Mental Health Awareness
- ✓ Obtain a letter of recommendation from a union official (Business Manager)
- ✓ Obtain a letter of support from signatory contractor
- ✓ Complete the Peer Advocate Advanced training program





# PEER ADVOCATE TRAINING TOPICS

- Understanding EAP's
- Understanding Addiction
- Understanding Treatment
- The Importance of Narcan
- How to Recognize an Issue
- Communication
- Confidentiality
- Workplace Impact
- Relapse Prevention
- Effectiveness of a Peer Advocate and Overall Support



# PEER ADVOCATES

ATAP trained its first group of Peer Advocates in 2018, to date we have trained 50 peer advocates who are first liaisons on work sites to members.

Over the years the training has evolved from a one-day training concentrating on substance use to a two-day training with the addition of a full day to concentrate on mental health and suicide.

**P**REVENTION  
**E**DUICATION  
**E**MPATHY  
**R**ECOVERY.



IF YOU WANT TO CHANGE THE  
WORLD, START WITH THE  
NEXT PERSON WHO COMES TO  
YOU IN NEED.

B. D. SCHIERS

# CONTACTS

## Kenneth Serviss, CAC, CEAP, QSAP

- Executive Director
- Office: (215) 677-8820
- KenS@alliedtrades-online.com
- LinkedIn: [www.linkedin.com/in/kennethserviss](http://www.linkedin.com/in/kennethserviss)

## Joe Carey

- ILA Peer Counselor
- Office: (267) 351-4079
- JoeC@alliedtrades-online.com

## ATAP Online

- [www.alliedtrades-online.com](http://www.alliedtrades-online.com)
- Find ATAP on Social Media: Facebook, LinkedIn, Twitter, Instagram