



A Call to Action on Opioids and Naloxone in the Construction Industry

Oregon Safety Symposium February 18, 2026

safeproject.us

Cal Beyer, CWP, NAC

- Over 30 years professional experience in risk management, safety & wellness focusing on human capital risk management and wellbeing
- Helped launch mental health & suicide prevention movement in the AEC industry
- Appointed to the Executive Committee of National Action Alliance for Suicide Prevention & Lived Experience Advisory Committee of the Suicide Prevention Resource Center (SPRC)
- Recognized as Top 25 Newsmaker for 2016 by *Engineering-News Record* and elected to National Academy of Construction (NAC) in 2025.
- Serves on Advisory Boards for Goldfinch Health
- Formerly served on Advisory Boards for the Center of Workplace Mental Health, AGC of America, MindWise Innovations & Youturn Health
- Frequent presenter at industry events & regular contributor to industry publications



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Thank you to ALL Participating Partners!

2026 Safety Symposium Sponsors



We asked our Executive Committee what they would encourage people to do to promote hope and help seeking.



"I continue to pursue prevention, harm reduction, and recovery strategies at the intersection of substance use and suicide as outlined in the 2024 National Strategy for Suicide Prevention."



— Cal Beyer, MPA

Sr. Director, SAFE Workplaces for SAFE Project

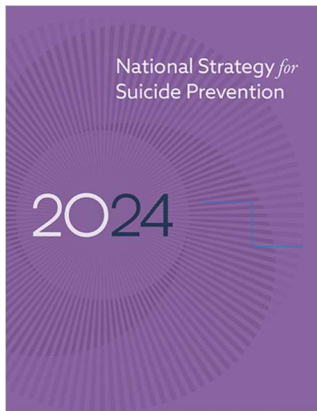
For more from the Action Alliance EXCOM, visit theactionalliance.org/bethere/excom.



Intersection of Substance Use and Suicide & Overdose Prevention



2010 inaugural appointee to Workplace Task Force; Appointed to Executive Committee in 2016



Appointed to Lived Experience Advisory Committee in 2020

Goal 2.6: Support upstream comprehensive community-based suicide prevention. *Implement and evaluate interventions addressing the intersection of suicide, substance use and adverse childhood experiences, including those with a focus on improving social determinants of health across diverse populations.*





Shout-Out to Sandy Lender; Editor – Supporter since 2016-17

Jan 08, 2025

Naloxone is the New AED in Workplace First-Aid

Nov 17, 2025

Real Talk: Alcohol Awareness and Promoting Workplace Recovery

Dec 19, 2025

5 Trends Shaping Workforce Mental Health and Substance Use Prevention

<https://theasphaltpro.com/>



**Join at slido.com
#2274080**



My family and I have experience being prescribed opioids for pain management?



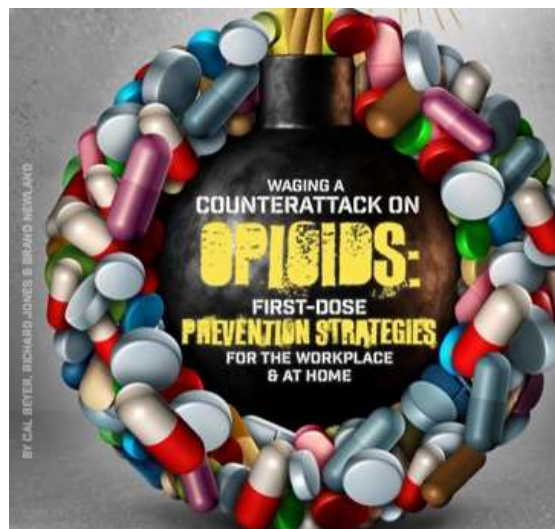
Indicate which statements are TRUE about construction and aggregates mining operations

Total Worker Health Statistics in Mining -- MSHA

- December 2025 NIOSH/MSHA study highlighted:
 - “Workers in the mining industry have higher rates of substance use disorders (SUD), illegal opioid use, and fatal overdoses compared with workers in most other industries. Mine workers also have among the highest rates of suicide”.
- Suicide death rate: 72 per 100,000 workers (56 for construction)
- #5 highest rate of fatal overdose deaths among 19 industry groups – 60.1 per 100,000 workers
 - Construction is 1st in fatal overdoses: 130.9 per 100,000 workers

<https://blogs.cdc.gov/niosh-science-blog/2025/12/01/niosh-msha-guide-sud/>

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CFMA Building Profits

March/April 2022

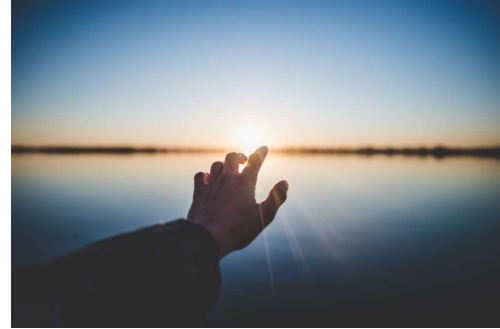
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<https://cfma.org/articles/waging-a-counterattack-on-opioids-first-dose-prevention-strategies-for-the-workplace-and-at-home>

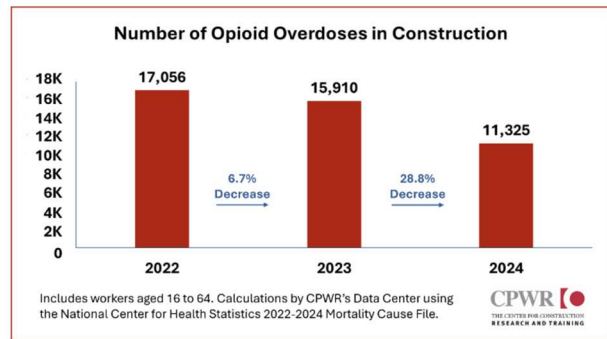
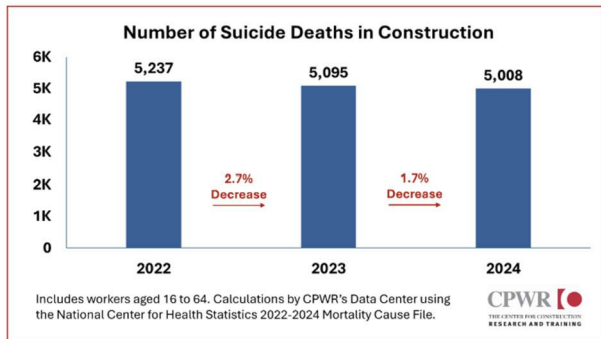


Glimmer of Hope Amidst the Darkness

- Overdose rates in Oregon remain higher than pre-pandemic era
- Need to maintain vigilance despite 22% reduction in OR in 2023-24 and continuing declines in 2025
- Nationally, still > 73,000 deaths in most recent 12-month reporting period (through Aug 2025)
 - 45 states reported declines



CPWR Data on Overdoses and Suicides in Construction



https://www.cpwr.com/update_newsletter/february-special-edition/



I have experienced loss due to overdose or suicide in my family, among friends, neighbors, former classmates, and/or co-workers or business partners?

Leading Gateways for New Persistent Opioid Use

- Chronic Pain
- On- and Off-the-Job Injuries
- Surgeries
- Medical and Dental Procedures
- Diversion of Leftover Pills



Opioid First Dose Prevention Strategy = Injury Prevention

- **NIOSH/CDC -- 2020**

- Construction industry has a high frequency of work-related musculoskeletal disorders (WMSDs)
 - “Overall injury rate that is 77% higher than other industries”
 - “34% of construction workers will have at least one WMSD”
 - “construction workers with WMSDs are 3 times more likely to be prescribed opioids”

- **National Council on Compensation Insurance (NCCI) -- 2020**

- “quantity of opioids prescribed to injured workers is more than double the average number prescribed to those in all other industry groups.”
- “contracting industry group claimants, on average, receive both 20% more opioid prescriptions and opioid prescriptions that are 20% stronger.”

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Pictogram: Opioid Risk in Construction



Source: <https://hwc.public-health.uiowa.edu/opioid-management-guidelines-for-the-construction-trades/>





Have you stocked naloxone/Narcan in workplaces and worksites?



What have been the barriers to stocking naloxone/Narcan in workplaces and on worksites?

Harm Reduction = First Aid & Emergency Response



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STORY

Why Vulcan Materials Company Stocks Naloxone at All Operating Facilities

SAFE Project's Senior Director of Workplaces, Cal Beyer, recently interviewed Chad McDougal, Vice President of Safety, Health & Environmental at Vulcan Materials Company. Vulcan Materials Company is a Fortune 500 enterprise with top-down commitment to safety, quality, and sustainability.



<https://www.safeproject.us/story/vulcan-materials-stocks-naloxone/>

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Naloxone Training Resources

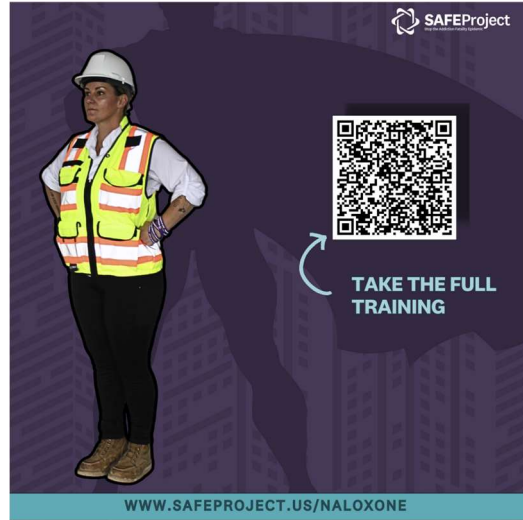


SAFEProject

BE A SUPERHERO WITH NALOXONE
SAVE THE DAY, SAVE A LIFE

IT TAKES 5 MINUTES TO BE A HERO!

WWW.SAFEPROJECT.US/NALOXONE



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TAKE THE FULL TRAINING

WWW.SAFEPROJECT.US/NALOXONE

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JHL CONSTRUCTORS

TOGETHER WE BREAK STIGMA

Every hand in this photo carries a different story, but they're united in one mission: ending shame and saving lives. From job sites to break rooms, recovery belongs in every workplace. Let's keep showing up for each other.

Join the movement. Take the No Shame Pledge today.
www.safeproject.us/noshame

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safeproject.us/workplaces

IF YOU ONLY KNEW HOW MUCH YOUR WORKERS CARRY.

Your crew may look strong on the outside – but inside, they might be carrying stress, pain, or loss. Leadership means checking in. Listening. Creating space. It's time to unpack the stigma around mental health. SAFE Project can help your workplace take the first step. Visit safeproject.us/workplaces to learn more about support and available resources.

SAFEProject
Stop the Addiction Fatality Epidemic



Opioid Prescriptions Impact Whole Households

JAMA Network Open

Original Investigation | Substance Use and Addiction
Association of Postsurgical Opioid Refills for Patients With Risk of Opioid Misuse and Chronic Opioid Use Among Family Members

David A. Asch, PhD, Robert A. Hays, MD, MPH, Joseph S. Reynolds, MD, Kathleen M. Fink, PhD, David H. Gustafson, MD, MSc, PhD, MD, Mark C. Bellini, MD, PhD, Brian Youngling, DO, Nathan Finkler, PhD, Sam Kivimäki, MD, PhD

Abstract

IMPORTANCE The US health care system is experiencing a sharp increase in opioid-related adverse events and spending, and opioid overprescription may be the key factor in this crisis. Ambient opioid exposure within households is one of the most major dangers of overprescription.

OBJECTIVE To quantify the association between the postsurgical initiation of prescription opioid use in opioid-naïve patients and the subsequent prescription opioid misuse and chronic opioid use among opioid-naïve family members.

DESIGN, SETTING, AND PARTICIPANTS This cohort study was conducted using administrative data from the database of a US commercial insurance provider with more than 20 million covered individuals. Participants included pairs of patients who underwent surgery from January 1, 2008, to December 31, 2016, and their family members within the same household. Data were analyzed from January 1 to November 30, 2018.

EXPOSURES Duration of opioid exposure and refills of opioid prescriptions received by patients after surgery.

MAIN RESULTS AND MEASURES Risk of opioid misuse and chronic opioid use in family members were calculated using inverse probability weighted Cox proportional hazards regression models.

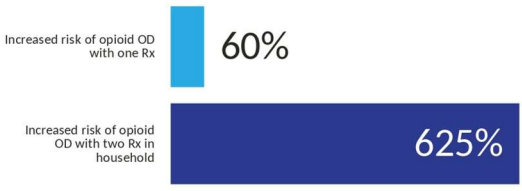
RESULTS The final cohort included 84 533 pairs of patients and family members. Most pairs included female patients (44 041 [52.1%]) and male family members (44 292 [52.2%]), and a majority of pairs included patients in the 45 to 54 years age group (249 388 [29.6%]) and family members in the 18 to 24 years age group (101 527 [12.1%]). A total of 1788 opioid misuse events (2.1%) and 1485 chronic opioid use events (1.8%) occurred in family members. In adjusted models, each additional opioid prescription refill for the patient was associated with a 2% (95% CI, 1% to 3%) increase in hazard of opioid misuse in family members. The risk of opioid misuse appeared to increase only in households in which the patient obtained refills. Family members in households with any refills had a 3.9% (95% CI, 2.2% to 5.6%) increased hazard of household opioid misuse. When patients became chronic opioid users, the hazard ratio for opioid misuse among family members was 3.2 (95% CI, 1.8 to 5.6%), and similar patterns were found for chronic opioid use.

CONCLUSIONS AND RELEVANCE This cohort study found that opioid exposure was a household risk. Family members of a patient who received opioid prescriptions refills after surgery had an increased risk of opioid misuse and chronic opioid use.

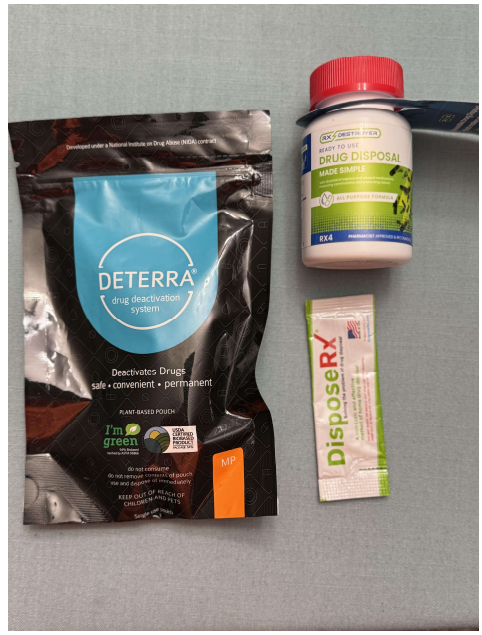
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JAMA Network Open. 2022;5(11):e222196. doi:10.1001/jamaopen.2022.22196 July 18, 2022 1/5



- Journal of the American Medical Association study (July 2022)
- >840,000 patients



Drug Deactivation and At Home Disposal Products

- Different products for different uses and different price points
- Innovative idea to engage your workforce by distributing samples during Toolbox Talks
- Available online and at many retail pharmacies

Opioids in Construction: How Home-based Drug Deactivation & Disposal Saves Lives

<https://www.forconstructionpros.com/business/construction-safety/article/22891746/safe-project-opioids-in-construction-how-homebased-drug-deactivation-and-disposal-saves-lives>



Free Mail Order Naloxone in Oregon

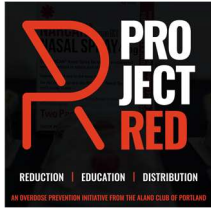


NALOXONE MAILED TO YOU

NEXT's mail-based services are designed to support individuals who are unable or unwilling to access in-person services in Oregon. To qualify for free mail-based naloxone distribution, you will need to view a training video, answer a short quiz, and provide request details. NEXT does not interact with health insurance in any way, and for that reason our enrollment form is not HIPAA compliant. We will share your enrollment information with our Oregon affiliate Project RED who will be mailing supplies to you in discrete packaging from Portland.

Opioid overdose prevention and response trainings can vary, and in some cases cover the topic extensively. We encourage you to visit our educational resources page to learn more about rescue breathing, the recovery position, opioid overdose aftercare, and a host of other valuable topics. If you have any questions, please don't hesitate to reach out.

Our training video, quiz, and enrollment are available in both English and Spanish.



INJECTABLE INTRAMUSCULAR NALOXONE AND NARCAN NASAL SPRAY ARE BOTH AVAILABLE IN OREGON.

REQUEST NALOXONE

<https://nextdistro.org/orchoice>



Call to Action for Home & Families: First Dose Prevention



Talk to all family members about opioid risks (counterfeit, contamination & diversion)



Search your home for leftover medications and use take-back kiosk at pharmacy or safe disposal product



Request naloxone be co-dispensed if prescribed opioids



Ask dentists, doctors (all specialties) & surgeons about non-opioid medications and multi-modal pain management



Purchase medication lock box and/or drug deactivation products for safe at home disposal



Use 10 Questions to Ask Surgeons before scheduling surgery and request Enhanced Recovery Protocols (www.GoldfinchHealth.com)





After attending today's session, I have increased knowledge of opioid risks and safety practices



After today's session, I have increased knowledge and resources to talk to doctors, dentists, and surgeons AND family members, friends and co-workers about opioids and naloxone/Narcan?



After today's session, I understand the why, what and how for stocking naloxone in workplaces and construction worksites



Contact Information

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Additional Resources



In the Moment Call to Action

Join the No Shame Movement





I TOOK THE NO SHAME PLEDGE!

I am committed to ending the stigma around addiction and recovery.




SAFE Project's No Shame Pledge: A MOVEMENT TO COMBAT STIGMA.

- ADDICTION IS A COMPLEX, TREATABLE HEALTH CONDITION.**
I commit to ongoing learning about the factors that can contribute to addiction.
- THERE ARE MULTIPLE PATHWAYS OF RECOVERY.**
I respect each person's ability to define and create a recovery pathway that works for them.
- STIGMA IS A MAJOR BARRIER TO SEEKING SUPPORT, ACCESSING CARE, AND ACHIEVING RECOVERY.**
I pledge to challenge stigma in all its forms.

Join the No Shame Movement!






nosamepledge.com

[#NoShame](https://twitter.com/NoShame)

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Part 1: Blog by Cal Beyer & Ronna Yablonski



MAY 5, 2025

How Leaders Can Support Employees Navigating Family Mental Health Challenges

<https://curt.org/2025/05/05/how-leaders-can-support-employees-navigating-family-mental-health-challenges/>

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Part 2: Blog by Ronna Yablonski

OCTOBER 2, 2025

Leading with Intention in Every Role: How Working Parents Can Prevent Youth Substance Use



<https://curt.org/2025/10/02/leading-with-intention-in-every-role-how-working-parents-can-prevent-youth-substance-use/>



SAFE Project Resources

Quick Links:

- Good Samaritan State Laws
- Treatment and Recovery Housing Locator

Naloxone Overdose Reversal Trainings:



[5 Minute Opioid Overdose Response Training](#)



[30 Minute Opioid Overdose Response Training](#)



[Administering Naloxone Spanish Version](#)



[Administering Naloxone English Version](#)



PAGE

SAFE Locator: Treatment, Family Support, & Recovery Housing

Choose the type of help that you or your loved one are looking for.



Treatment Centers

Facilities that typically provide clinical and counseling services.



Family Support

Find programs, support, and services you need as a family member or friend.



Recovery Housing

Designated housing environments to support people in recovery.

<https://safelocator.org/en/help-selection>

QR Code to Request Resource Guide



3 Downloadable Resources Articles via QR Code

CRISIS MANAGEMENT: The Critical Human Element
 BY BOB VANDEPOL & CAL BEYER



A new trend has also emerged: 2019 marked the seventh consecutive year of substantial increases due to non-fatal use of drugs or alcohol in the workplace in all industries (see multiple in the construction industry)? This is similar to the 107 accidents that occurred in all workplaces?

Construction risk management is a specialized body of knowledge, techniques, tools, and resources focused on the identification, planning, and implementation of controls to prevent or minimize potential events from happening in the first place or to prevent the total damage of a contractor's operations should such an event occur.

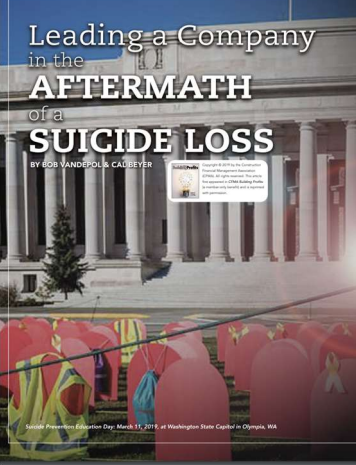
In addition to their human toll, organizational risks are dangerous to both corporate bottom and project operations. Productivity, quality, risk, safety, profitability, and other key performance measures are adversely affected by such events.

This is why risk management can be further defined as "The conservation of an organization's human and financial resources."

A Crisis Demands
 In order to stay on top in an ever-evolving crisis - the point at which the solution of an emergency or disaster issue is often better or worse. Remember that during a crisis, we have little to be "business as usual" rather than "business as usual."

May/June 2021 - CMRA Building Health


Leading a Company in the AFTERMATH of a SUICIDE LOSS
 BY BOB VANDEPOL & CAL BEYER



When a 2017 by the Construction Industry Institute (CII) and the Construction Industry Institute (CII) published the results of a survey of 100 construction industry executives, the results revealed a concerning trend: 71% of respondents reported that they had experienced a suicide loss in their organization. This is a significant increase from the 58% reported in a 2015 survey.

Source: Construction Industry Institute (CII) Survey, March 11, 2015, at Washington State Capitol in Olympia, WA

Reversing Opioid Overdoses in Construction: A Jobsite Imperative
 By Cal Beyer



In August 2023, the Centers for Disease Prevention and Control (CDC) reported the first data highlighting substance overdose rates by occupation and industry sector.

Construction and extraction had the highest rate among 17 major occupational groups in 2018 at 100.8 per 100,000 workers. Subsequent construction use, the leading industry group among 16 others at a rate of 20.9 per 100,000 workers. Additional analysis identified nine more subgroups for a total of 17 specific construction occupations. The analysis revealed several and contributing factors including high injury rates, minimal experience for pain management, and the potential for insufficient injury recovery and rehabilitation.

While the research revealed a clear need in the field because it continues to be directly related to those fatalities due to construction-related medications, the data did not allow us with the intent of providing any prescriptive guidance of state and federal levels. However, the emergence of highly sophisticated software - especially featuring - starting in 2013 already increased the number of potential deaths, as the software continued to evolve in the US. Critical IT software has been developed over the last two decades by public safety and community-based health reduction agencies to improve conditions.



Call to Action for Employers: First Dose Prevention

- 01** Educate employees on risks & side effects of opioids, safety practices & harm reduction methods
- 02** Institute prevention of sprain/strain injuries and early intervention of injuries, especially "physical therapy first" for injury treatment
- 03** Review medication formulary for opioid alternatives and evaluate options for Medication Assisted Treatment for Opioid Use
- 04** Analyze de-identified Health Insurance Benefits Claims to identify aggregated prescribing patterns and refills and request Health Plan to offer alternatives to opioids for pain management
- 05** Institute oversight process to manage leaves & accommodations for post-surgical return to work to monitor healing
- 06** Request Work Comp carrier and Benefit Health Plan or third-Party Administrator (TPA) to offer alternatives to opioids, monitor opioid prescriptions, and Enhanced Recovery protocols

