

Overdose crisis exhausts West Virginia indigent burial fund

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Five months before the end of the fiscal year, West Virginia's Department of Health and Human Resources (DHHR) funding for its Indigent Burial Program has run out.

Frederick Kitchen, president of the West Virginia Funeral Directors Association, told the *Intelligencer/ Wheeling News Register* March 5 that the spiraling drug overdose death rate is the cause of the funding shortfall. The DHHR's budget for indigent burials is \$2 million per year, and the department typically allocates \$1,250 for funeral homes to provide burial services to the poor. "We've got five months with no money available," Kitchen said. "Funeral directors do what they can, but this creates a hardship for a lot of funeral homes."

The fiscal year ends June 30. So far, according to Allison Adler, spokesperson for state DHHR Secretary Bill Crouch, "1,508 burials have been committed for payment through the Indigent Burial Program. ... There are funds remaining for 63 additional burials." Every year since 2013, the fund has been depleted before the end of the fiscal year.

Kitchen explained that many overdose deaths require an autopsy that can take two or three weeks before a funeral. "It puts a lot of hardship on families after getting the worst news of their lives," he said.

"Most of our families [of overdose victims] are worn out leading up to it," said Eric Fithyan, a funeral director and planner for James and Chambers funeral homes in the Northern Panhandle of the state. "However, a lot of times we deal with the families asking the 'what ifs'."

Fithyan told the *Intelligencer*, "The biggest and hardest thing is dealing with those left behind. A drug overdose death is almost like a suicide or unplanned death, and there is no way to alleviate the grief."

Many of the overdose victims leave behind young children, for whom grandparents and even great-grandparents must assume responsibility, creating severe financial and sometimes health hardships for them. In West Virginia, 5,182 children were in foster care in 2016, most orphaned by the heroin epidemic.

Relatives often spend down their resources before an

overdose happens, trying to battle the addiction, Fithyan explained, leaving them little money to pay for a burial. Many overdose victims are penniless and lack life insurance.

The deaths are traumatic even for funeral home staff, Fithyan said. "It can be especially overwhelming for the younger staff seeing a segment of their society dying from these drugs."

Gene Fahey, vice president at Altmeyer Funeral Homes, echoed the sentiments of Fithyan. "It's the unnatural balance of life when parents are burying their children. ... It affects all of us. Younger people on our staff are seeing people their own age, 20s and 30s, dying. They are coming eyeball to eyeball with mortality."

The state's drug overdose death rate stood at 41.5 per 100,000 in 2015, according to the latest available data from the Centers for Disease Control and Prevention. This is the highest rate in the country, nearly three times the national average.

Last year, at least 818 people died from overdoses in the state, according to a February 13 analysis by the West Virginia Health Statistics Center, a 13 percent increase over the 725 who died in 2015. The *Register-Herald* newspaper reported that the vast majority of 2016's overdose deaths involved at least one opioid. "We are seeing an unprecedented rise in the overdose deaths related to opioids," Dr. Rahul Gupta, the state health officer and commissioner of the DHHR's Bureau for Public Health, told the *Register-Herald* March 7. "It seems we have not yet peaked."

The death toll translates into an average of one fatal overdose every 12 hours in the state. Many of the deaths are due to fentanyl or carfentanil, extremely potent opioids that have been introduced into the heroin trade in the United States. These drugs are many times stronger than morphine, and can cause nearly instantaneous asphyxiation and death. Gupta warned that carfentanil in particular presented dangers to both users and anyone near the drug. "You don't necessarily have to be injecting a drug like this, because it's so potent," he said in a statement last October. "A first

responder or a parent who may find their child's drugs is at risk, too. Just by simply cleaning the drug off the floor, if a person isn't wearing gloves or a mask, it's possible for them to overdose just from being exposed."

In cities like Huntington, West Virginia, the rate is far higher. Data from the state's Health Statistics Center Drug Overdose Database indicates that as of January 2017, Huntington's Cabell County recorded a fatal overdose rate of nearly *100 per 100,000* in 2016.

Jim Johnson, Huntington's director of the Mayor's Office of Drug Control Policy, told the *Exponent Telegram* in an article published February 7 that first responders in the city had prevented 300 fatal overdoses using the anti-opioid naloxone. "That's 300 people that are somebody's mother, son, father or daughter. We're doing a good job at saving people, but the question is what's next," he said.

According to Gordon Merry, the executive director of Cabell County's Emergency Medical Service, the situation is already markedly worse in 2017. In the first three weeks of the year, crews responded to 60 overdoses. The week of January 22-28 saw 32 more overdoses, more than double the number in the same period last year. Merry told the *Huntington News Network* that those numbers did not include deaths. All told, in 2016 Huntington saw 1,163 overdoses, and Cabell County recorded another 241.

Across the border from Huntington in Boyd County, Kentucky, overdoses have similarly spiked. The county's ambulance service spent \$2,500 in 2015 on Narcan, the branded version of naloxone. In 2016, the cost rose to \$12,000, and the county is on track to spend \$20,000 in 2017. Merry said Cabell County spent \$50,000 on Narcan last year.

Carfentinal, the drug responsible for the 26 overdoses in the span of a few hours August 15 in Huntington, had taken at least 60 lives within the city and another 12 in the county last year. "It's getting worse," Merry said. "There's no end to this. It's becoming a revolving door. That's what's so frustrating. We need to get these people in treatment, and that's not happening."

The average age of an overdose victim in Huntington is 35. The youngest victim, who survived, was only 11 years old. The oldest nonfatal overdose victim was 65. Two-thirds of the overdoses were seen in men, and 93 percent of the victims were white.

Huntington is the epicenter of the heroin epidemic, but areas decimated by the collapse in coal employment are similarly crippled by the growth of drug addiction. "When jobs leave the area, people lose focus and don't have anything to do, so they can end up turning to drugs," said John Deskins, executive director of the Bureau for Business and Economic Research at West Virginia University. At

least five counties in the state—10 percent of all counties—are considered in economic depression by the West Virginia Center on Budget and Policy. In former coal-mining regions, the unemployment and poverty rates stand in double digits, and thousands of people have moved away in the past decade.

Johnson, in Huntington, said the rise in heroin addiction had brought in the risk of another serious health epidemic. "Twenty-eight counties in West Virginia have already been notified by the Centers for Disease Control that they are in deep danger of an HIV and hepatitis outbreak," Johnson told the *Exponent Telegram*. "When they started a harm reduction program and a needle exchange program in Huntington, 28 percent of the patients admitted to sharing needles. Over 50 percent of the patients were hepatitis positive."

While there is a crying need for vastly expanded drug treatment options along with many other social services, the budget situation has worsened at the state, county and municipal level. The state is currently in the midst of a half-billion-dollar shortfall, and Democratic Governor Jim Justice is proposing sweeping cuts to virtually every department. Counties and cities are on the verge of insolvency, and have been axing basic social outlays (see "Report reveals deepening poverty in West Virginia").

In January, the city of Huntington laid off dozens of police and firefighters to close a reported \$2.2 million budget shortfall. The reduction in emergency responders will have an inevitable effect on the city's death toll from overdoses. Firefighters are often the first on the scene of an overdose. According to Fire Chief Jan Rader, "We have had over 100 saves on the Huntington Fire Department alone [in 2016]."

In response to the budget cuts, which included the layoff of seven firefighters, fire stations erected a banner, photographed and posted to social media, that was swiftly ordered removed. It read, "This fire truck out of service due to lack of manpower. Don't feel safe? Call your mayor." Ray Canafax, a spokesperson for the fire department, told local television news WSAZ January 23 that the department's overtime was cut and short staffing had resulted in taking one of the city's two ladder trucks out of service. "We're short four people," he said. "When we're short four people, that leads to us having to close a truck down."



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