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Release available at: <http://eagletonpoll.rutgers.edu/opioids-June2018>. Find all releases at <http://eagletonpoll.rutgers.edu>. Follow the Rutgers-Eagleton Poll on Facebook <https://www.facebook.com/RutgersEagletonPoll> and Twitter [@EagletonPoll](https://twitter.com/EagletonPoll).

**MANY NEW JERSEYANS PRESCRIBED OPIOIDS DO NOT RECALL DOCTOR EXPLAINING DANGERS, RISKS,
OR ALTERNATIVE TREATMENTS**

NEW BRUNSWICK, N.J. – Nearly half of New Jerseyans (46 percent) say they or a family member have been prescribed opioids by a medical professional in the last 12 months, according to the latest Rutgers-Eagleton Poll as part of the “Opioids in the Garden State” series.

Among those residents who say they or a family member received a prescription, about a third say the main reason for the prescription was surgery (34 percent) and a quarter for chronic pain (26 percent). Fewer state a reason related to a dental procedure (17 percent), injury (10 percent), out-patient procedure (9 percent) or something else (4 percent).

But while nearly all of those prescribed say that their medical provider discussed the reason why the prescription was necessary for either them or their family member (86 percent), far fewer recall the doctor or dentist explaining the dangers of taking opioid drugs with alcohol and anti-depressants (62 percent), the risks of addiction and overdose associated with opioid drugs (54 percent), or alternative treatments available (47 percent).

Eight in 10 say they or their family member filled the prescription in the past year; the same number say that they or a family member took the pain medication as directed by their physician.

“Our findings suggest that despite new state mandates that require doctors to discuss with patients the potential risks of addiction, potentially dangerous drug interactions and alternative treatments when prescribing opioid medicine, such conversations are not taking place as frequently as they should,” said Itzhak Yanovitzky, associate professor at Rutgers University’s School of Communication and Information and the co-lead of the study. “We must do a better job educating both doctors and patients about the importance of having these conversations and what exactly should be discussed.”

“Differences emerge by some key demographic factors like gender and race in terms of who has had these types of conversations with their doctor,” said Ashley Koning, assistant research professor and director of the Eagleton Center for Public Interest Polling (ECPPI) at Rutgers University-New Brunswick. “Nevertheless, at least a third of almost every subgroup do not recall ever having a conversation about alternatives and risks, while about a quarter say the same about having a conversation regarding the dangers of taking prescription medication with alcohol and anti-depressants.”

Results are from a statewide poll of 704 adults contacted by live callers on both landlines and cell phones from April 26 to May 4, 2018. The sample has a margin of error of +/-4.3 percentage points. Interviews were done in English and, when requested, Spanish.

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QUESTIONS AND TABLES START ON THE FOLLOWING PAGE

Questions and Tables

The questions covered in this release are listed below. Column percentages may not add to 100% due to rounding. Respondents are New Jersey adults; all percentages are of weighted results. Interpret groups with samples sizes under 100 with caution.

Q. In the last 12 months, were you or a family member prescribed pain medication by someone like a doctor or dentist?

Yes	46%
No	53%
Don't know (vol)	1%
Unwght N=	702

	Party ID			Gender		Race		Age				Income			
	Dem	Ind	Rep	Male	Female	White	Non-wht.	18-34	35-49	50-64	65+	<\$50K	\$50K- <\$100K	\$100K- <\$150K	\$150K+
Yes	48%	46%	40%	43%	49%	44%	47%	45%	46%	45%	48%	55%	44%	41%	45%
No	50%	53%	59%	57%	50%	55%	52%	54%	54%	54%	50%	45%	54%	59%	55%
Don't know (vol)	1%	0%	2%	1%	1%	1%	1%	1%	0%	1%	2%	0%	1%	1%	0%
Unwght N=	260	283	140	354	348	455	222	171	134	217	180	138	225	113	141

Q. What was the MAIN reason you were initially prescribed – or your family member was initially prescribed – the pain medication? Was it because of ... ?

Injury	10%
Surgery	34%
Out-patient procedure	9%
Dental procedure	17%
Chronic pain	26%
Something else	4%
Unwght N=	309

**Opioids in the Garden State June 2018
Rutgers-Eagleton Poll**

	Gender		Race		Age		Income	
	Male	Female	White	Non- wht.	18-49	50+	<\$100K	\$100K+
Injury	12%	9%	9%	13%	12%	9%	9%	14%
Surgery	35%	34%	33%	36%	34%	34%	35%	34%
Out-patient procedure	9%	9%	8%	10%	8%	10%	9%	6%
Dental procedure	15%	18%	18%	16%	19%	15%	16%	19%
Chronic pain	25%	26%	28%	22%	23%	28%	27%	24%
Something else	4%	4%	4%	3%	4%	4%	4%	3%
Unwght N=	151	158	190	105	126	183	170	105

Q. Please tell me whether or not the doctor or dentist discussed each of the following with you or your family member when initially prescribing the pain medication. If you don't know or remember, just say so. [RANDOMIZE ORDER]

	The reason why the prescription was necessary	Alternative treatments that may have been available	The risks of addiction and overdose associated with opioid drugs	The dangers of taking opioid drugs with alcohol and anti-depressants
Yes	86%	47%	54%	62%
No	7%	38%	33%	27%
Don't know/remember (vol)	7%	14%	13%	10%
Unwght N=	309	309	309	309

The reason why the prescription was necessary

	Gender		Race		Age		Income	
	Male	Female	White	Non- wht.	18-49	50+	<\$100K	\$100K+
Yes	81%	89%	83%	91%	81%	90%	87%	83%
No	6%	8%	7%	8%	8%	6%	8%	5%
Don't know/remember (vol)	14%	2%	10%	1%	11%	4%	5%	12%
Unwght N=	152	157	191	104	127	182	170	105

Alternative treatments that may have been available

	Gender		Race		Age		Income	
	Male	Female	White	Non- wht.	18-49	50+	<\$100K	\$100K+
Yes	43%	51%	41%	57%	47%	48%	50%	40%
No	39%	38%	40%	36%	34%	43%	39%	39%
Don't know/remember (vol)	18%	11%	19%	7%	19%	9%	11%	20%
Unwght N=	152	157	191	104	127	182	170	105

The risks of addiction and overdose associated with opioid drugs

	Gender		Race		Age		Income	
	Male	Female	White	Non- wht.	18-49	50+	<\$100K	\$100K+
Yes	55%	53%	47%	64%	54%	55%	55%	53%
No	28%	38%	35%	31%	34%	33%	35%	30%
Don't know/remember (vol)	17%	9%	18%	5%	13%	13%	10%	16%
Unwght N=	152	157	191	104	127	182	170	105

The dangers of taking opioid drugs with alcohol and anti-depressants

	Gender		Race		Age		Income	
	Male	Female	White	Non-wht.	18-49	50+	<\$100K	\$100K+
Yes	63%	62%	58%	70%	62%	63%	66%	54%
No	24%	30%	28%	26%	28%	27%	28%	27%
Don't know/remember (vol)	13%	8%	14%	3%	11%	10%	5%	19%
Unwght N=	152	157	191	104	127	182	170	105

Q. Did you or your family member fill the prescription for the pain medication?

Yes, I did	83%
No, I did not	16%
Don't know/remember (vol)	1%
Unwght N=	309

	Gender		Race		Age		Income	
	Male	Female	White	Non-wht.	18-49	50+	<\$100K	\$100K+
Yes, I did	85%	81%	86%	79%	76%	91%	84%	80%
No, I did not	14%	18%	13%	19%	23%	8%	15%	19%
Don't know/remember (vol)	1%	1%	1%	1%	1%	1%	1%	1%
Unwght N=	152	157	191	104	127	182	170	105

Q. Did you or your family member take the pain medication as directed by your doctor or dentist?

Yes, I did	79%
No, I did not	19%
Don't know/remember (vol)	2%
Unwght N=	309

Opioids in the Garden State June 2018
 Rutgers-Eagleton Poll

	Gender		Race		Age		Income	
	Male	Female	White	Non- wht.	18-49	50+	<\$100K	\$100K+
Yes, I did	82%	78%	79%	80%	80%	79%	78%	81%
No, I did not	15%	22%	20%	18%	18%	19%	22%	14%
Don't know/remember (vol)	4%	0%	2%	2%	2%	1%	0%	5%
Unwght N=	152	157	191	104	127	182	170	105

The Rutgers-Eagleton Poll was conducted by telephone using live callers April 26 to May 4, 2018 with a scientifically selected random sample of 704 New Jersey adults, 18 or older. Persons without a telephone could not be included in the random selection process. Respondents within a household are selected by asking randomly for the youngest adult male or female currently available. If the named gender is not available, the youngest adult of the other gender is interviewed. The poll was available in Spanish for respondents who requested it. This telephone poll included 315 landline and 389 cell phone adults, all acquired through random digit dialing. Distribution of household phone use in this sample is:

Cell Only:	31%
Dual Use, Reached on Cell:	24%
Dual Use, Reached on LL:	42%
Landline Only:	3%

The data were weighted to be representative of New Jersey adults. The weighting balanced sample demographics to population parameters. The sample is balanced to match parameters for sex, age, education, race/ethnicity, region, and phone use. The sex, age, education and race/ethnicity parameters were derived from 2016 American Community Survey PUMS data. The region parameter was derived from 2011-2015 American Community Survey 5-Year Estimates based on total population. The phone use parameter derived from estimates provided by the National Health Interview Survey Early Release Program. Weighting was done in two stages. The first stage of weighting corrected for different probabilities of selection associated with the number of adults in each household and each respondent’s telephone usage patterns. This weighting also adjusts for the overlapping landline and cell sample frames and the relative sizes of each frame and each sample. The second stage of weighting balanced sample demographics to match target population parameters. Weights were trimmed at the 3rd and 97th percentile to prevent individual interviews from having too much influence on the final results. The use of these weights in statistical analysis ensures that the demographic characteristics of the sample closely approximate the demographic characteristics of the target population.

All surveys are subject to sampling error, which is the expected probable difference between interviewing everyone in a population versus a scientific sampling drawn from that population. Sampling error should be adjusted to recognize the effect of weighting the data to better match the population. In this poll, the simple sampling error for 704 New Jersey adults is +/-3.7 percentage points at a 95 percent confidence interval. The design effect is 1.37, making the adjusted margin of error +/- 4.3 percentage points. Thus if 50 percent of New Jersey adults in this sample favor a particular position, we would be 95 percent sure that the true figure is between 45.7 and 54.3 percent (50 +/- 4.3) if all New Jersey adults had been interviewed, rather than just a sample.

Sampling error does not take into account other sources of variation inherent in public opinion studies, such as non-response, question wording, or context effects.

This Rutgers-Eagleton Poll was fielded by Braun Research, Inc. with sample from Survey Sampling International (SSI). The questionnaire was developed and all data analyses were completed in house by the Eagleton Center for Public Interest Polling (ECPIP). Dr. Cliff Zukin, Professor Emeritus of Political Science and Public Policy and Senior Survey Advisor to ECPIP, assisted with this questionnaire and analysis. William Young assisted with analysis and preparation of this report. The Rutgers-Eagleton Poll is paid for and sponsored by the Eagleton Institute of Politics at Rutgers, The State University of New Jersey, a non-partisan academic center for the study of politics and the political process. Full questionnaires are available on request, and can also be accessed through our archives at eagletonpoll.rutgers.edu. For more information, please contact poll@eagleton.rutgers.edu.

Weighted Sample Characteristics

704 New Jersey Adults

Male	48%	Democrat	37%	18-34	26%	HS or Less	33%	White	58%
Female	52%	Independent	42%	35-49	26%	Some College	28%	Black	12%
		Republican	21%	50-64	27%	College Grad	22%	Hispanic	19%
				65+	20%	Grad Work	17%	Other	11%