

# Does Publicly Provided Take-Home Naloxone program affect Labour & Health related outcomes? Evidence from Canada

Mumitul Al-Anik<sup>◇</sup>

Department of Economics  
University of Saskatchewan,  
Saskatoon, Canada.

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## Abstract

In this paper, I explore whether the implementation of publicly funded Take-Home Naloxone (THN) program, affects Healthcare Utilization, Health related Outcomes, Drug Use and Labour market outcomes in selected Canadian provinces. Using the Public use file of Canadian Community Health Survey (CCHS), my preliminary results show that THN program increases the Emergency Department visits by a small margin. It also increases visits to Mental Healthcare professionals and Depression among the population by a significant amount. However, THN reduces the Cannabis consumption among both Male and Female population, but especially among population who have post secondary or University degree and earn above Canadian national average. THN also improves the Self-perceived health status among 12 to 19 years old Canadian females. As for Labour market outcomes, the Difference-in-Difference estimates indicate that the effect on employment due to this program is also positive. Furthermore, I find little to no evidence that THN increases Overnight patient Visits or Absenteeism in the treatment provinces. My findings are robust when controlling for year, province or demography-wise heterogeneity and province-specific time trends.

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<sup>◇</sup> Corresponding Author. Mail: [mua361@mail.usask.ca](mailto:mua361@mail.usask.ca). Office Address: 9 Campus Drive, Saskatoon, S7N 5A5. I thank all the Professors in the Department that I have worked with/ studied under for their guidance, specially Dr. Maxym Chaban & Dr. Nazmi Sari for the generous academic and financial support. Special thanks to Dr. Siyu Quan for her assistance with the coding. All errors are my own.