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What Should We Do about the Opioid Epidemic?

Drug abuse, a problem the United States has faced for decades, has taken a sharp and lethal turn with the rise of opioids—both legal painkillers, such as oxycodone and fentanyl, and illegal ones like heroin.

More than 64,000 Americans were killed by drug overdoses in 2016, according to the Centers for Disease Control, and at least two-thirds of those deaths were caused by opioids. That is worse than the peak of the HIV epidemic in 1995 and more than the number of US combat deaths in the entire Vietnam War.

In the last year, doctors wrote more than 236 million prescriptions for opioids, or about one for every American adult. But many patients became addicted to the painkillers as their bodies began to tolerate higher and higher doses. Others, if they could no longer get prescriptions, switched to heroin; then came the even deadlier fentanyl.

Now drug abuse is so widespread it is even affecting productivity—employers say they can't fill positions because too many applicants fail a drug test. The Federal Reserve reports that opioid addiction may be shrinking the number of job applicants because it is keeping otherwise able-bodied people out of the workforce.

The problem exists in almost every community throughout the United States, though it has hit hardest

in the Northeast, the Midwest, and Appalachian regions, where joblessness and poverty have hollowed out many small towns and left families in desperate circumstances. In Cincinnati, Ohio, police estimated that police officers and paramedics spent at least 102 hours tending to overdose patients in just one week. Responding to the crisis is straining the budgets of many small towns and counties.

Doctors and nurses now see the epidemic's effects on the next generation, a wave of babies born addicted to painkillers or heroin. Sara Murray and Rhonda Edmunds, nurses in Huntington, West Virginia, founded Lily's Place, a facility for addicted babies and their mothers.

"The devil has come to Huntington," Murray said on CNN. "We have generational addiction and that's their normal. It was their mother's normal. It was their grandmother's normal. And now, it's their normal."

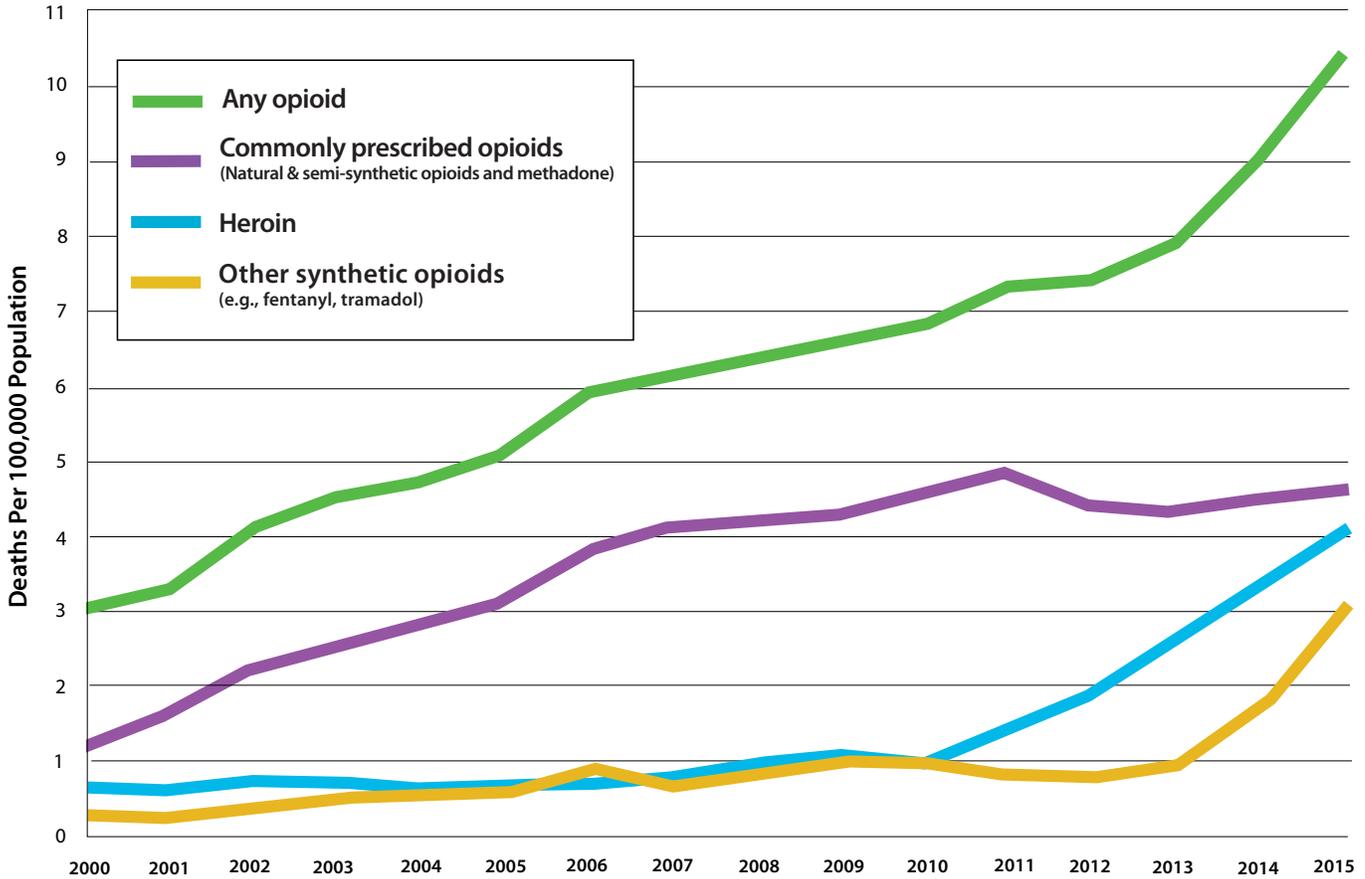
What should we do to relieve the opioid epidemic facing our communities?

This issue advisory presents three options for deliberation, along with their drawbacks. Each option offers advantages as well as risks. If we increase enforcement, for example, this may result in many more people in prison. If we reduce the number of prescriptions written, we may increase suffering among people with painful illnesses.

Drug overdoses are now the leading cause of death among Americans under 50.

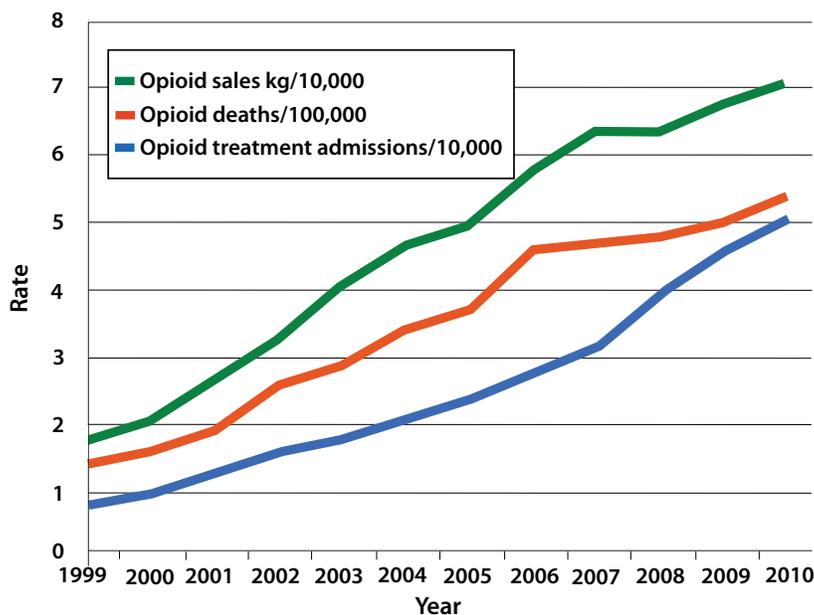
Facts about Opioid Use

Overdose Deaths Involving Opioids, United States, 2000-2015



SOURCE: CDC/NCHS, National Vital Statistics System, Mortality. CDC WONDER, Atlanta, Ga: US Department of Health and Human Services, CDC; 2016. <https://cdc.gov/>

Opioid Treatment, Deaths, Sales



SOURCE: Annual Review of Public Health—German Lopez

- “Opioids” include both legal medications, such as oxycodone, fentanyl, codeine, and morphine, and illegal drugs, such as heroin and the black market forms of legal drugs.
- Drug overdoses (estimated at about 64,000 nationwide in 2016) are now the leading cause of death for Americans under 50, with two-thirds of those deaths caused by opioids, according to the US Centers for Disease Control.
- The Centers for Disease Control estimates that opioid abuse alone costs the United States about \$78 billion a year in medical expenses, lost productivity, and prison costs.

Option One: Focus on Treatment for All

This option says that, given the rising number of deaths from opioids, we are not devoting enough resources to treatment to make real headway in turning around the epidemic. Addiction is primarily a medical and behavioral problem, and those are the best tools for combating the crisis. Treatment should be available on demand for anyone who wants it. At the same time, the pharmaceutical companies that have profited from making and promoting opioid painkillers need to contribute more to the solution.

A Primary Drawback

This option does little to stop people from becoming addicted in the first place.

Actions

- Greatly expand the number of treatment centers, especially long-term facilities.
- Require that all treatment be fully covered by Medicaid and other health insurance plans.
- Release low-level drug offenders from prison and send them to mandatory treatment.
- Require drug companies to put more of their profits into creating less-addictive painkillers.

Drawbacks

- More treatment centers will be located in neighborhoods around communities where they could well pose problems.
- Treatment on demand will take a huge investment of taxpayer dollars.
- Releasing low-level offenders will leave addicts free to commit crimes to support their habit.
- Requiring new research will drive up the cost of pain medicine, which will hit poor people and seniors hardest.

“**Less than half of the 2.2 million people who need treatment for opioid addiction are receiving it.**”

—*Department of Health and Human Services*

Option Two: Focus on Enforcement

This option says that our highest priority must be keeping our communities safe and preventing people from becoming addicted in the first place. Strong enforcement measures are needed, including crackdowns and harsher sentences for dealers, distributors, and overprescribing doctors. And we should take tougher measures to cut off the supply of drugs at the source. Addiction to opioids and other hard drugs brings with it crime and other dangers, and closing our eyes to these dangers only makes the problem worse. Mandatory drug testing for more workers is needed. In the long run, a tough approach is the most compassionate.

A Primary Drawback

This option criminalizes a public health problem and makes it less likely addicts will seek treatment.

Actions

- Sharply increase law enforcement and sentencing for drug dealing and distributing.
- Increase mandatory drug testing for people on public assistance, students, public employees, and teachers.
- Allow police to go through addicts' cell phones to identify dealers.
- Make and enforce stricter laws that would limit the amount of opioid pain relief medication doctors can prescribe.

Drawbacks

- Longer sentences will result in many more people in prisons that are already severely overcrowded and underfunded.
- More testing means drug users will be less likely to try to look for jobs.
- Police snooping in cell phones is an intrusion into people's private lives.
- This would leave many patients suffering from severe pain.

“From 2011 to 2016, there were 3,926 armed robberies of pharmacies nationwide, many of them for opioids.”

—Drug Enforcement Agency

Option Three: Focus on Individual Choice

This option recognizes that society cannot force treatment on people. We should not continue to waste money on a failed “war on drugs” in any form. Only those who wish to be free of addiction end up recovering. We should be clear that crime will not be tolerated, but if people who use drugs are not harming society or behaving dangerously, they should be tolerated and allowed to use safely, even if they are damaging their own lives. Those who do not or cannot make the decision to get well should not be forced, and communities shouldn’t spend their limited resources trying to force treatment on people.

A Primary Drawback

This option makes addiction seem okay.

Actions

- Set up community-based centers where people who are addicted can inject drugs safely.
- Eliminate penalties for using drugs; the police should only pursue dealers.
- Offer complete amnesty from prosecution for anyone who seeks treatment.
- Equip all police with naloxone, an overdose treatment drug, and make it available cheaply and without prescription.

Drawbacks

- “Safe places” could actually promote and encourage drug use.
- By only pursuing dealers, there will be no deterrent against individual users.
- Drug addicts are an enormous burden on their families and the economy. Most cannot get or keep good jobs and taxpayers end up supporting them.
- Police and paramedics will be out treating overdoses when they could be chasing criminals or treating heart attacks.

“Sterile needle exchange programs reduce the rate of disease transmission by addicts, especially HIV and Hepatitis C, by up to 70 percent.”

—Centers for Disease Control

About This Issue Advisory

THE EFFECTS OF DRUG ADDICTION on individuals, families, and society has long been of serious concern to all of us. The recent rise in opioid abuse has raised the stakes. Deliberative forums on this issue will not be easy. It will be important to remind participants that the objective of these forums is to begin to work through the tensions between safety, freedom, and a healthy society.

The problems caused by opioid addiction can evoke raw emotion on those who have been affected by it. Forum participants with strong feelings about this issue may feel attacked by those who hold other points of view. This may sidetrack the deliberation. In productive deliberation, people examine the advantages and disadvantages of different options for addressing a difficult public problem, weighing these against the things they hold deeply valuable. This framing is designed to help people work through their emotions to recognize the trade-offs that each of us must wrestle with in deciding how to move forward.

The framework outlined in this issue advisory encompasses several options and provides an alternative

means of moving forward in order to avoid the polarizing rhetoric now growing around the major policy options. Each option is rooted in a shared concern and proposes a distinct strategy for addressing the problem that includes roles for citizens to play. Equally important, each option presents the drawbacks inherent in each action. Recognizing these drawbacks allows people to see the trade-offs that they must consider in pursuing any action. It is these drawbacks, in large part, that make coming to shared judgment so difficult—but ultimately, so productive.

One effective way to begin deliberative forums on this issue is to ask people to describe how the issue of opioid addiction has affected them or their families. Some will have had direct experience with these drugs; many more will talk about the corroding effects of opioid addiction in their family or friends. They are likely to mention the concerns identified in the framework.

The goal of this framework is to assist people in moving from initial reactions to more reflective judgment. That requires serious deliberation or weighing options for action against the things people value.

This issue advisory was prepared for the National Issues Forums Institute (NIFI) in collaboration with the Kettering Foundation. National Issues Forums issue guides are used by civic and educational organizations interested in addressing public issues. These organizations use the books in locally initiated forums convened each year in hundreds of communities. Recent topics have included US politics, economic security, America's role in the world, and immigration. For more information on the National Issues Forums, visit the website www.nifi.org.

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