**What Should We Do about the Opioid Epidemic?**

**Addendum to National Issues Forum’s Issue Advisory**

**Forum, February 24**

Hosted by Center for Civic Life at Ashland University

In collaboration with Mental Health and Recovery Board of Ashland County

& ACCADA – Ashland County Council on Alcoholism and Drug Abuse

The opioid epidemic is nationwide, but Ohio has a pressing reason to be concerned. According to the Ashland Times Gazette of December 22, 2017, Ohio is the second highest in the nation in overdose deaths. This is a huge problem that calls for multiple solutions from multiple sources. This forum asks citizens to consider solutions and prevention. The opioid crisis is a community issue, as well as a personal one. We are asking people what they think should be done and what *they* can do as citizens.

**In this forum we will deliberate the following options**:

* Focus on Treatment for All
* Focus on Enforcement
* Focus on Individual Choice
* Focus on Prevention

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**Option One: Focus on Treatment for All**

National Issues Forums (Issue Advisory, p. 2) reports a significant increase in sales of opioids, treatment, and overdose deaths in the U.S. between 2000 and 2015. Ashland County is fortunate to have the Ashland County Council on Alcoholism and Drug Abuse (ACCADA) for treating opioid addictions. They offer both outpatient treatment – Medication Assisted Treatment – and access to inpatient treatment – Residential and Detox. In 2017, they reported the following activity:

* 61 people started Medication Assisted Treatment (MAT) services at ACCADA in 2017. This is down from 78 in 2016 and 71 in 2015.
* 73% of those receiving MAT services in 2017 have shown some progress toward treatment goals.
* 14 people received and benefited from Drug/Alcohol residential and/or Detoxification Services in 2017. This represents 140 days of intensive treatment for the 14 combined.
* ACCADA provided 880 hours of Prevention Services in 2017, having impact on over 12,000 county residents.
* A 24-hour crisis hotline can be reached at 419-289-6111.
* More emergency help can be found at the following:
  + Ashland County Sheriff, 9-1-1
  + UH Samaritan Medical Center, 419-289-0491 or 800-257-9917
  + ACCADA 419-289-7675
* Further information can be found at the following:
  + <http://ashland.oh.networkofcare.org/mh/emergency-services.aspx>
  + <https://www.ashlandmhrb.org/where-to-get-help>

Yet, despite Ashland County’s perseverance, according to National Issues Forums (Issue Advisory, p. 3) the U.S. Department of Health and Human Services reports that less than half of the 2.2 million people who need treatment for opioid addiction are receiving it. This options states that opioid addictions are medical and behavioral problems that need treatment. Yet treatment does little to stop people from *becoming* addicted. What should our nation do? What should we do locally?

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| **Actions that might be taken** | **Drawbacks/tradeoffs** |
| Greatly expand the number of treatment centers, especially long-term facilities. | Neighborhoods might oppose having treatment centers because of possible problems. |
| Require that all treatment be covered by Medicaid and other health insurance plans. | Treatment on demand will take a huge investment of taxpayer dollars. |
| Release low-level drug offenders from prison and send them to mandatory treatment. | Releasing low-level offenders will leave addicts free to commit crimes to support their habit. |
| Require drug companies to put more of their profits into creating less-addictive pain killers. | Requiring new research will drive up the prices of pain medication. This will hit poor people and senior citizens the hardest. |
| Consumer education to encourage patients to discuss with their doctors alternatives to opiates for pain and how to avoid addiction to opioids if prescribed. | A campaign to educate consumers about this topic may be costly. |
| In Ashland County, we could raise taxes to support ACCADA’s work and enable them to continue to grow as needed. | Some people may not want to pay higher taxes. |

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**Option Two: Focus on Enforcement**

Because of the crime associated with drug addictions, this option states that crackdowns and harsher sentences for dealers are needed. Yet this option criminalizes a public health problem and makes it less likely that addicts will see treatment.

The following are statistics from our local area:

* In the county of Ashland, law enforcement officers and EMS’s responded to 64 overdoses in 2017. This is up from 52 in 2016
* In the county of Ashland, 6 overdose deaths were reported in 2017, down from 12 in 2016.
* Last year, 2016, the METRICH Enforcement Unit, in collaboration with both Ashland Police and the Ashland County Sheriff’s office, responded to 136 drug cases, including 50 involving heroin. 17 cases involved Crystal Methamphetamine, the first ones to come to light since 2008. Others included marijuana, prescription drugs, cocaine, weapons, Fentanyl, Carfentanil, synthetic marijuana, methamphetamine labs, MDMA, and Psilocybin mushrooms.

Business owners are concerned that drugs affect workers’ attention, promptness, and health. This option also suggests more mandatory drug testing for workers. What should our nation do? What should we do locally?

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| **Actions that might be taken** | **Drawbacks/tradeoffs** |
| Sharply increase law enforcement and sentencing for drug dealing and distributing. | Longer sentences will keep prisons over-filled. They are already overcrowded and underfunded.  Many people believe that, if people stop using drugs, the dealers will go out of business and that targeting drug dealers wastes time and money that could be spent on treatment and prevention. |
| Increase mandatory drug testing for people on public assistance, students, public employees, and teachers. | Drug users may stop trying to look for jobs |
| Allow police to go through addicts’ cell phones to identify dealers. | Police snooping in cell phones is an intrusion into people’s private lives. |
| Make and enforce stricter laws that would limit the amount of opioid pain relief medication that doctors can prescribe. | This would leave many patients suffering from severe pain. |
| In Ashland County, we could raise taxes to help fund law enforcement and emergency services. | Some people would not want to pay higher taxes. |

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**Option Three: Focus on Individual Choice**

This option states that if people who are using drugs are not harming others, they should be allowed to live their lives the way they choose and that communities shouldn’t spend their limited resources trying to force treatment on people. According to National Issues Forums (Issue Advisory, p. 5), only people who want to be free from addiction end up recovering. A drawback to this option is that it legitimizes addiction. It also doesn’t address the user who begins criminal acts in order to obtain drugs.

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| **Actions that might be taken** | **Drawbacks/tradeoffs** |
| Set up community centers where people who are addicted can inject drugs safely. | Safe places could promote and encourage drug use. |
| Eliminate penalties for using drugs; police should pursue only dealers. | This action gives no deterrent to an individual user. |
| Offer complete amnesty from prosecution for anyone who seeks treatment. | 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. |
| In Ashland County, law enforcement officers and First responders are equipped with naloxone/Narcan, an overdose drug. It is also is widely available in Ashland County. This may be one reason for the decrease in deaths from overdoses. | Police and paramedics are out treating overdoses when they could be chasing criminals or treating heart attacks. |

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**Option 4: Focus on Prevention**

None of the first three options does anything to prevent the use of dangerous drugs. This option focuses on preventing drug use by education, by meaningful ties to others, and encouraging individuals to value what they can give for others.

Ashland County vigorously pursues education. The following are accomplishments in Ashland County for 2017.

* 2,000 Ashland County students received prevention programming in 2017.
* 33 school-based education and community-based process presentations were provided in 2017.

Additional educational resources can be found at the following websites:

* Mental Health and Recovery Board of Ashland County <https://www.ashlandmhrb.org/resources/alcohol-and-drug-abuse>
* Start Talking: Building a Drug-Free Future <http://starttalking.ohio.gov/>
* ACCADA <http://accada-rap.org/>

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| **Actions that might be taken** | **Drawbacks/tradeoffs** |
| Parents need to use their influence on their children’s emotional and relationship skills. Family residency-building includes encouraging children to help others, providing choices, providing safe routines, and engaging in outdoor exercise. (Karther, *Core Concepts*, MHRB) | Work-shift hours, packed after-school activities, homework, and social media rob families of quality parent-child time. Parents without child care supports are especially stretched for time and energy. |
| Communities can help one another by being good neighbors. Communities can also form coalitions to identify and share resources. | People will need to realize the importance of ties to others. They will need to go out of their way to look for opportunities to give or to join forces with others. |
| Schools can help students find meaning and purpose beyond grades and test scores. Examples include a deep and compelling curriculum and service learning. Additionally, schools can and do provide education on health and wellness, as well as how to resist unhealthy practices, such as drugs. | Teachers and administrators already look for ways to help students. However, state and national priorities often frustrate these well-intentioned people. |
| Places of worship should teach personal meaning and the importance of helping others. They should provide a place for counseling and emotional/spiritual guidance. | People who do not have a place of worship may not have a place to go for emotional/spiritual guidance. |
| Health and wellness practices should become part of the community’s focus, starting with prenatal care and going through old age. | People often resist practices that require self-discipline. |
| To counteract a culture of dependence on drugs, drug companies should be barred from advertising prescription drugs. This would tend to encourage people to seek non-drug therapies and, when necessary, to seek professional help. | Drug companies have resisted efforts to remove their privilege and would continue to do so. |