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# What Should We Do about the Opioid Epidemic?



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## Summary

OPIOID ADDICTION HAS EMERGED in the last decade as a deadly new threat to the health of Americans. More than 64,000 people died of drug overdoses in 2016, most of them from opioids. Overdoses have become the leading cause of death for Americans under 50, with two-thirds of the deaths caused by opioids.

This is an especially complex challenge because, unlike other addictive drugs that have primarily come into the United States from abroad, opioids have been made and prescribed right here. Only in the most recent stages of the epidemic, as desperate addicts turned to heroin and synthetic fentanyl, has smuggling of these substances across our borders become an issue.

How do we confront this epidemic? It clearly is a danger to public health, and for some it is a question of ensuring that we make more resources available to treat addiction and connect people with those resources. Others, who see it as a threat to the safety of communities, say that the appropriate response is more law enforcement and regulation; doctors need to continue prescribing pain medication, but we need to figure out how much and for whom. And for some people, it is important to maintain focus on our individual rights to privacy and self-determination, not to be swept away by the crisis of the moment.

### ***What should we do to reduce the opioid epidemic facing our communities?***

This issue guide is a framework for citizens to work through these important questions together. It offers three different options for deliberation, each rooted in different, widely shared concerns and different ways of looking at the problem. The resulting conversation may be difficult, as it will necessarily involve tensions between things people hold deeply valuable, such as a collective sense of security, fair treatment for all, and personal freedom. No one option is the “correct” one; each includes drawbacks and trade-offs that we will have to face if we are to make progress on this issue. They are not the only options available. They are presented as a starting point for deliberation.



# Summary

## Option 1:

### Focus on Treatment for All

THIS OPTION SAYS THAT, GIVEN THE RISING NUMBER OF DEATHS FROM OPIOIDS, WE MUST DEVOTE CONSIDERABLY MORE RESOURCES TO TREATMENT IN ORDER TO MAKE ANY 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. As the number of people who are addicted rises, ambitious treatment programs become more difficult to carry out.*

#### ACTIONS

Greatly expand the number of treatment centers, especially long-term facilities.

Require that all treatment be fully covered by both private and government-funded health insurance plans.

Release low-level offenders from prison and send them to mandatory treatment.

Require drug companies to put more of their profits into creating less-addictive painkillers.

Ensure that treatment efforts include support for long-term recovery.

Expand use of alternative treatments for pain, such as physical therapy and meditation, to reduce the number of opioid prescriptions.

#### DRAWBACKS

More treatment centers will be located in neighborhoods around communities where they could well pose problems.

Treatment on demand will require a huge investment of public and private money.

Releasing low-level offenders will put them back on the streets, where they could commit crimes to support their habit.

Requiring new research will drive up the cost of pain medicine.

With limited resources, the availability of treatment opportunities may be diminished.

This would leave many patients suffering from severe pain. This approach may only work for a small subset of people.

# Summary

## Option 2: 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 more arrests 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 those who are addicted 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.

Pursue legal action against drug companies that marketed or proliferated these dangerous pain killers.

Closely monitor physicians prescription practices (# of prescriptions, # of pills, duration of prescriptions) and hold them accountable if abuses are apparent.

Educate community members about effective youth and adult opioid prevention strategies.

#### DRAWBACKS

Longer sentences will result in many more people in prisons that are already dangerously overcrowded and underfunded.

This could lead to disparate enforcement of the law targeting people of color.

More testing means drug users will be less likely to try to look for jobs.

Such actions may discourage drug companies from developing other less harmful pain medications.

People may find it more difficult to get the pain medications that they need and may turn to illegal drugs instead.

Community members may not believe in the value of prevention when there is an opioid epidemic.

# Summary

## Option 3:

### Focus on Individual Choice and Reducing Public Harm

THIS OPTION RECOGNIZES THAT SOCIETY CANNOT FORCE TREATMENT ON PEOPLE. We should not continue to waste money on a failed “war on drugs,” but focus instead on reducing overdoses. 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 required to do so, and communities shouldn’t spend their limited resources trying to force treatment on people.

#### A Primary Drawback

*This option makes addiction seem okay.*

#### ACTIONS

All primary care physicians should screen for drugs and alcohol addiction and ensure patients who need help are aware of treatment and recovery options.

Set up community-based centers where people who are addicted can inject drugs safely.

Educate community members and physicians about available options for treatment and prevention, including medically assisted treatment.

Equip all police with naloxone, an overdose-treatment drug, and make it available cheaply and without prescription.

#### DRAWBACKS

People may be more reluctant to go to their doctor if physicians will pry into the personal behavior of their patients.

Such “safe places” could actually promote and encourage drug use.

People can't be forced to get help. Only those who wish to be free of addiction end up recovering.

Police and paramedics will be out treating overdoses when they could be chasing criminals or treating heart attacks.

## The National Issues Forums

The National Issues Forums (NIF) is a network of organizations that bring together citizens around the nation to talk about pressing social and political issues of the day. Thousands of community organizations, including schools, libraries, churches, civic groups, and others, have held forums designed to give people a public voice in the affairs of their communities and their nation.

Forum participants engage in deliberation, which is simply weighing options for action against things held commonly valuable. This calls upon them to listen respectfully to others, sort out their views in terms of what they most value, consider courses of action and their disadvantages, and seek to identify actionable areas of common ground.

Issue guides like this one are designed to frame and support these conversations. They present varying perspectives on the issue at hand, suggest actions to address identified problems, and note the trade-offs of taking those actions to remind participants that all solutions have costs as well as benefits.

In this way, forum participants move from holding individual opinions to making collective choices as members of a community—the kinds of choices from which public policy may be forged or public action may be taken, at community as well as national levels.

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ISBN: 978-1-946206-27-5 .

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