

Washington Post Forum
Addiction in America: The New War on Drugs
Dec. 7, 2018

BACKGROUND

On December 7, 2018 the Washington Post held a series of discussions with U.S. Surgeon General Dr. Jerome Adams, health policy experts and medical professionals about the opioid crisis plaguing the United States. Speakers discussed new proposals aimed at combating the crisis, address disparities in access to treatment and examine the impact of drugs on communities across the country.

FIRST PANEL – Discussing the latest proposals from the federal government aimed at combating the worst addiction epidemic in American history through prevention, intervention and treatment.

- **US Surgeon General Jerome Adams**

He began by mentioning the current activity of the Administration and Congress to combat the opioid epidemic. He mentioned the federal government has been working with key stakeholders to address this problem and is seeing real progress. HHS has disbursed more than \$1 billion in opioid-specific funding for states, which includes State Opioid Response (SOR) grant programs administered by SAMHSA. Additional funding from the Health Resources and Services Administration (HRSA) went to community health centers to increase access to substance abuse disorder and mental health services, to increase the number of professionals and paraprofessionals who are trained to deliver integrated behavioral health and primary care services as part of health care teams in HRSA-supported health centers as well as to rural grantees to increase services and develop plans to implement evidence-based opioid use disorder prevention, treatment and recovery interventions.

Surgeon General Jerome Adams emphasized the point that the United States needs to focus on preventative measures rather than reactive measures when facing opioid addiction. He made sure to make clear it would save tax payers large sums of money to prevent opioid addiction, rather than dealing with it after the fact. One way to prevent overdose deaths is to focus on naloxone availability not just for medical professionals – it needs to be in the hands of every American.

Including the funding passed through HR 6, Surgeon General Adams mentioned, in his opinion, this Congress and the Administration have done more for combating the opioid epidemic than any Congress or Administration has. Furthermore, in addressing mental health he believes mental health should be included in primary care – that there are not enough behavioral specialists to adequately handle it.

He concluded by mentioning the Surgeon General Release Spotlight on Opioids, which can be found [here](#).

SECOND PANEL – Discussing the impact of the opioid crisis on communities, large and small. The speakers offered perspectives on access to treatment, racial and economic disparities, addiction programs for prison populations and promising new prevention models.

- **Traci Green, Deputy Director, Injury Prevention Research Center, Boston Medical Center**

- **Regina M. LaBelle, Director, Addiction and Public Policy Initiative at Georgetown University's O'Neill Institute; Former Chief of Staff, White House Office of National Drug Control Policy (2009-2017)**
- **Roger A. Mitchell, Chief Medical Examiner, District of Columbia**
- **Tom Synan, Chief of Police, Newtown, Ohio**

Regina LaBelle stated a concern with new wave of drug use and addiction that could be attributed to the recent spike in the use of injecting liquid meth. However, she mentioned she believes the US is better equipped to handle this new wave as a result of the new federal policies that have been put in place. Dr. Mitchell then stated he believes a way to combat substance abuse disorder is to focus on the social construct behind the people that are at risk of abusing. Essentially to alleviate the poor living situations, or social constructs that facilitate the use of drugs, and the fact that it needs to be focused on as an alternative way to combat the epidemic.

With all the money coming from the federal level, Regina LaBelle mentioned that the states have wide leeway to allocate that money. Specifically, she applauded the SOR grants, in the fact that it establishes a baseline and the states then can apply these funds to the specific needs of the state. She also stated the federal government and the state need to identify intervention points across the continuum to better apply these funds.

Tom Synan emphasized the fact that addiction needs to be treated as a mental health problem, rather than being looked at as a criminal problem as it is today. He was adamant in stating that law enforcement should not be the enforcer, but rather the link to connect these people who are struggling to get the mental health help that they need. Furthermore, the panel as a whole also stated there needs to be more information gathering in the populations that are using to help facilitate what to expect, examples being the trends on the street and what actions work to better treat these people.

THIRD PANEL – Discussing treatment models aimed at minimizing the harmful effects of drug use, including controversial “safe-injection sites” in select cities across the country.

- **Alex H. Kral, PhD, Distinguished Fellow, RTI International**
- **David W. Murray, PhD, Senior Fellow, Hudson Institute**

Dr. Kral first stated that one of the new ways to help reduce overdose deaths, STD transmissions, as well as increase access to doctors and mental health practitioners are these supervised injection sites. He believes this is a new way to reach those with substance abuse disorders. In distinction, Dr. Murray conversely stated he believes we should not enable continued drug abuse with these supervised injection sites, and rather we should focus on the rehabilitation and treatment of those with substance abuse orders in a way that does not enable them. He mentioned that these sites are methodologically unsound and runs in contrast of trying to curb the drug epidemic that the United States faces today.

Dr. Kral believes that the US will open a supervised injection site in the near future. Dr. Murray believes the use of supervised injection sites are not a sound policy decision to combat substance abuse disorder, however he believes that the US will open a supervised site sometime in the future.