

# The Montgomery Herald

## **Addiction stats say U.S. is failing — bigly**

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Just last month, at the intersection of policy making that produced law and a statistical abstract that captured a snapshot of life in America in the here and now, we were given a clear view and understanding of what we value as a country — and what we don't. What we saw were divergent realities.

President Donald Trump signed and celebrated Republican legislation, a tax reform bill that taps our nation's treasury for about \$1.5 trillion over the next decade to the greater benefit of the wealthy, the donor class and very large corporations. The president called it a Christmas gift.

Sen. Shelley Moore Capito and Rep. Evan Jenkins voted for the bill. Sen. Joe Manchin did not.

Just a day before the president put pen to paper, the federal government reported that 63,600 people had died from drug overdoses in the U.S. in 2016 — up from about 52,000 the year prior.

Here in West Virginia, the rate of drug overdose deaths came in at 52 deaths per 100,000 in population — the highest rate in the nation. In 2015, the rate was 41.5 cases per 100,000.

Yes, America, we have a drug problem. But we also have a disconnect in D.C.

For the sake of perspective, consider this: The Vietnam War Memorial Wall — at the opposite end of the National Mall from the U.S. Capitol — has 58,318 names inscribed into its reflective black granite. These are the names of U.S. military personnel who were wounded in Vietnam between 1957 and 1975 and ultimately died of their wounds.

Yes, drug overdose deaths in one year here at home outnumbered U.S. military deaths over nearly two decades in Vietnam.

According to a 2016 study at the Cato Institute, a libertarian think tank, 3,024 Americans died at the hands of foreign-born terrorists on our home soil — over a 40-year period through 2015.

That includes the 2,977 who died on 9/11 and translates to 75 deaths per year, one every five days.

Daily, 170 people are estimated to die from drug overdoses in the U.S.

What would be the reaction if Americans woke up to news that 170 people had been killed in a terrorist attack on American soil? How would we respond if that were the lead news item the following day? And the day after that? Every day?

Can you imagine the hysteria? The calls for immediate and forceful action? For beefing up national security with bucket loads of cash?

For building a wall?

If the opioid epidemic continues without interruption, and no statistical study suggests that it won't, one forecast estimates that 650,000 more people will die from opioid overdoses in the next 10 years.

But what do we hear from our policy makers?

Much of what they have done has focused on reducing the amount of prescription painkillers. The latest federal data show prescriptions in 2015 were still three times what they were in 1999.

Other prevention efforts have targeted heroin and fentanyl, but the flow of those drugs into the country has largely gone unabated.

The most Congress has done was to appropriate \$1 billion for drug treatment over two years. Experts say the need requires tens of billions of dollars — each and every year.

This was the year, too, that Congress tried to repeal and replace the Affordable Care Act — our nation's health insurance policy. That would have cut access to addiction treatment for millions of people.

While that effort failed repeatedly, not from the lack of support from Capito and Jenkins, the successful tax reform bill killed the individual mandate to the ACA, which — according to projections — will cost some 13 million people their health insurance but pass along \$300 billion in savings to the rich.

The nation's drug addiction will be impossible to crack if we — for some perverse notion — value the material wealth of our nation's richest one percent over the well-being of a neighbor, a friend, a family member, a community.

The numbers say we are failing — bigly.