

Did The Fentanyl Wave Hit Oregon Just As Voters Decriminalized Drugs?

Jeffrey Singer

February 8, 2024

Oregonians are having second thoughts about their decision to decriminalize drugs 3 years ago. They blame it for the state's recent rise in overdose deaths. But a closer look at the data shows that Oregon has fared no worse than other states did when the fentanyl wave breached its borders.

Three years after its first-in-the-nation drug <u>decriminalization</u> measure (Measure 110) went into effect, Oregon's lawmakers are <u>poised</u> to <u>re-criminalize</u> possessing and using drugs. Lawmakers note that Oregon's overdose rate has <u>risen dramatically and exceeded the national average</u> since Measure 110 took effect in 2021.

I have argued <u>here</u> that policymakers were mistaken if they believed decriminalizing drugs would necessarily lead to a drop in overdoses. Decriminalizing is not the same as legalizing. As long as people who use drugs need to go to the black market for them, they can never be sure of the dose or purity of what they are buying or if it is the drug they think they are buying. I also argued that it is inappropriate to judge Measure 110 so soon after the law went into effect. For example, in its first year, the country was amid the COVID-19 pandemic, and public health measures made it even more challenging than usual for Oregonians to access harm reduction and treatment programs.

However, writing in the New York Times this week, addiction and neuroscience journalist Maia Szalavitz contends that, while people may be quick to assume that the rise in overdoses during Measure 110's implementation suggests cause and effect, it is essential to remember that correlation is not causation. Szalavitz provides crucial information placing Oregon's overdose problem in proper context.

Szalavitz points to numerous studies showing that illicit fentanyl flooded the drug market in waves, beginning in the eastern US and working its way west. Szalavitz cites work by Brandon del Pozo of Brown University Medical School, showing nearly identical surges in overdose rates in every region of the country as fentanyl began dominating the drug market. Szalavitz cites research showing that, by 2018, almost 90 percent of overdose deaths involving fentanyl and its analogs occurred in 28 states east of the Mississippi River. Additional research published in 2023 showed a similar wave making its way across the country, finally dominating western states, including Oregon, around 2021.

Investigators at Brown University Medical School and the Research Triangle Institute (RTI International) used Centers for Disease Control and Prevention overdose mortality data from 2008–2022 and a synthetic control group consisting of 48 states and the District of Columbia to study the association between overdose fatality rates and Measure 110. They used a changepoint analysis to determine "when each state experienced a rapid escalation in fentanyl." The researchers concluded:

After adjusting for the rapid escalation of fentanyl, analysis found no association between M110 and fatal drug overdose rates.

Future evaluations of the health effects of drug policies should account for changes in the composition of unregulated drug markets.

The researchers also found:

Recriminalization in Washington State saw an increase in the fatal overdose rate.

Before lawmakers return to tactics that have proven to be a dismal failure for more than 50 years and risk exacerbating Oregon's drug overdose problem, they should listen to drug policy researchers who point out that Oregon's surge in overdose deaths corresponds to the late arrival of fentanyl in the state relative to other parts of the US.

If lawmakers want to know where to place the blame for Oregon's overdose crisis, the answer should be obvious: prohibition.

Author Biography: Jeffrey Singer is a Senior Fellow at the Cato Institute in Washington, DC, serving in the Department of Health Policy Studies.