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Trump had the answer to the overdose crisis in 1990, not in the State of the Union

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With more than 64,000 American deaths in 2016 attributable to drug overdoses, many are understandably clamoring for government to "do something" about the problem.

During his State of the Union Address, Trump briefly suggested a two-pronged approach of enhanced enforcement efforts and helping people with drug problems to get treatment.

While superficially appealing, any effort to prevent drug overdoses must acknowledge that our nation has gotten to this point despite, or even in part because of, our nearly half-century long War on Drugs.

Back in 1990, Trump himself publicly <u>denounced</u> the War on Drugs as "a joke," and called for the legalization of drugs and the use of proceeds from the sale of drugs to finance drug education efforts. At that point in time, the drug war had been raging for two decades.

The following decades have only proven Trump correct in his assessment of our disastrous War on Drugs.

In the nearly three decades since Trump called for an end to prohibition, we're no closer to "winning" the war, have spent hundreds of billions of dollars, arrested, jailed and/or imprisoned millions of Americans and are now dealing with record high drug overdose deaths.

And yet, despite having known better in 1990, Trump used the State of the Union to call for more of the same. "We must get much tougher on drug dealers and pushers if we are going to succeed in stopping this scourge," he said.

Such an argument is discredited by decades of evidence that drug prohibition, as with alcohol prohibition, does little more than magnify the harms of drugs while introducing other problems, including the financing of street gangs and cartels ravaging neighborhoods and countries across the world.

The so-called opioid crisis won't be solved by perpetuating the same failed drug policies which got us to this point.

While much of the media focus on opioids has centered on prescribers and prescription opioids as the problem, the reality is that addiction, drug abuse and drug overdoses are far more complicated issues which necessarily involve a web of biological, economic, social and psychological factors.

Government efforts intended to assuage the problem have only made matters worse.

Practically, as Jeffrey Singer, a surgeon and senior fellow at the Cato Institute, has <u>noted</u>, while opioid overdose deaths remained stable from 2006 to 2010, reductions in opioid prescriptions since then have corresponded with greater numbers of overdoses. These reductions were driven by government pressure to reduce opioids prescriptions, with one of the unintended consequences being more death and suffering.

A major consequence of government efforts is that many people, including people with legitimate pain needs, have turned to the black market for relief. Coupled with a growing availability of heroin, which is often tainted with synthetic opioids like fentanyl, many who choose or are forced to turn to the black market are at risk of using drugs of varying purity which can put them at risk of overdose and death.

The result? A surge in the proportion of deaths tied to <u>fentanyl</u> and thus drug tainting which is a feature of the illegal market than the legal market.

Perhaps without prohibition or government resistance to practical harm reduction efforts like safe consumption sites and syringe-exchange programs, many lives could have been saved.

There are many more pieces to this picture, some of which I wrote more about <u>here</u> following the publication of a <u>report</u> by the Global Commission on Drug Policy urging North American policy makers to resist the temptation of solving the overdose problem with greater criminalization.

We cannot arrest or "treat" our way out of the problem. Ending drug prohibition, respecting individual liberty and putting harm reduction at the core of any government response to drug abuse is the sensible way forward, not doubling down on more of the same.