Margaret Chase Smith Library 2017 Essay Contest

Each year the Margaret Chase Smith Library sponsors an essay contest for high school seniors. The essay prompt for 2017 was, How would you address the current lethal drug epidemic? The essays have been edited for length.

THIRD-PLACE ESSAY

Knowledge Is Power: Preventing Drug Use through Education

by Sigrid Sibley

Each year, more Americans die from drug overdose than car accidents. In Maine alone, 208 people died of overdoses in 2014, while 131 died in car accidents (Diomede 2015). According to an article by Joe Lawlor (*Portland Press Herald*, March 6, 2017), in 2016, the number of overdose deaths rose to 378, compared to 160 vehicle deaths. Heroin is currently the most dangerous narcotic in the United States, but the misuse of synthetic opioids is growing exponentially. It's not just adults who are being affected by drug use, often children become victims of their parent's drug habits. Many babies exposed to drugs in the womb, both pharmaceutical and illicit, suffer from neonatal abstinence syndrome (NAS), which is "a result of the sudden disconnection of fetal exposure to substances that were used or abused by the mother during pregnancy" (Kocherlakota 2014). Symptoms of NAS typically occur 48 to 72 hours after birth and include seizures, hyperactive reflexes, excessive crying, vomiting, dehydration, and fever. Infants suffering from NAS are hospitalized for an average of 23 days after birth to receive pharmacologic treatment. On average, hospitalization and treatment costs $93,400 per infant (Barfield 2016). NAS is especially prevalent in Maine. The *Portland Press Herald* (December 6, 2016) reported that 30.4 out of every 1,000 babies born in Maine hospitals in 2012 suffered from NAS, the second highest rate in the nation.

Since President Nixon declared a war on drugs in 1971, several tactics have been used to reduce drug use in America, most focusing on eradicating the illegal drug trade. The Drug Enforcement Administration was founded in 1973 to control drug production, distribution, and trafficking, but the agency mostly focused on fighting international drug smugglers. While reducing access to drugs is helpful, it is not 100 percent effective in reducing drug use because people still make their own drugs or abuse prescription drugs. In 2014, 89 percent of overdose deaths in Maine were caused by abuse of legal pharmaceutical drugs (Diomede 2015). Instead of focusing on reducing the drug trade, there should be more effective drug-use-prevention programs. After all, there is no way to eradicate all forms of drug trade and production. It is more important that people know how to resist drug use if they encounter drugs.

Unfortunately, most educational prevention programs have not been effective. One of the most famous and widely used prevention programs is DARE. The DARE program sent police officers into schools to discuss the danger of drug use and the benefits of a substance-free life with students. A study by Lynam et al. (1999) looked at 1,004 20-year-olds who had received either DARE or a standard drug-prevention unit in sixth grade. The students who received DARE did not have different attitudes toward drugs and were not less likely to use drugs than the students who did not receive DARE. There are several theories on why DARE was not effective. First, the program typically only lasted a few months. It also consisted of police officers or other adults speaking to children, rather than encouraging peer interaction or discussion. The "Just Say No" campaign, launched by First Lady Nancy Reagan in 1986, has also been criticized for being ineffective. Critics claim the campaign's failure is due to oversimplification of a complex issue. The program does not teach the social skills or resistance tactics needed to say no to drugs.

While most efforts to curb drug use in the United States have failed, antitobacco campaigns have been more successful. In March 2012, the Centers for Disease Control and Prevention (CDC) launched Tips from Former Smokers, which uses the stories of former smokers to motivate current users to quit and to prevent people from experimenting with cigarettes in the first place. The Tips campaign has motivated 500,000 people to quit tobacco, and the successful features of the campaign could be applied to a national drug-education campaign. Much of the success is due to the use of media, the diversity of their campaign, and a supportive partners program. The program also supports a diverse audience: the free helpline (1-800QUIT-NOW) is available in

English, Spanish, and several Asian languages. The motivating stories on the Tips website are categorized by disease as well as demographic subgroups. This makes it easier for readers to find people with similar experiences and conditions. Most importantly, the Tips campaign works to engage the community so that tobacco users have support when they are trying to quit.

There are some obvious differences between tobacco use and drug use. First of all, tobacco is legal. Tobacco users can call the CDC's help line or reach out for support within their communities without fear of legal consequences. While drugs should not be legalized and society should not normalize drug abuse, there should be a support system in place to give drug users a chance to recover without being immediately punished, especially if they have not committed any other crimes. People who are struggling with, or at risk for, drug addiction should have the opportunity to improve their lives, whether it is a help line, accessible educational resources, or an outreach program.

The outreach program of a national drug-education campaign would focus on educating both doctors and patients about the dangers of prescription pain medication, which is often a gateway to addiction. Through advertisements and public service announcements on a variety of media platforms including television and social media, the campaign would work to raise awareness of the dangers of using high-risk pain treatment such as opioids. The campaign would also work to educate both doctors and patients about low-risk alternatives for treating chronic pain such as physical therapy, meditation, and exercise.

The campaign would also highlight the importance of storing pharmaceutical drugs in a safe space with restricted access. Many people become addicted to prescription drugs that were not prescribed to them. In 2012, 21 percent of Americans who abused prescription drugs were originally prescribed the medication by their doctor, while 64 percent of abusers obtained the medication from a friend or relative, not a doctor (Diomede 2015).

In addition to educating doctors and patients about prescription drugs, the campaign would focus on teaching doctors to recognize and treat mental illness, which is often an underlying cause of drug addiction. People who struggle with mental illnesses are far more likely to abuse drugs. In America, 12- to 17-year-olds who have had a major depressive episode in the past year are twice as likely to use illicit drugs. In 2014, six out of ten adults treated for addiction had a previously diagnosed mental illness (Diomede 2015).

The outreach program would collaborate with schools to create long-term prevention programs that allow students to develop skills needed to resist peer pressure and make informed decisions regarding drug use. The prevention programs would last several years so the skills are revisited and reinforced. The program would encourage student discussion and interaction. Simply lecturing will not teach students to avoid drugs; students need to be able think for themselves and create a personal plan to prevent drug use.

Overall, the Tips campaign has cost $48 million. A national drug-education campaign would cost at least as much. Many taxpayers may find it difficult to justify the high price of such a campaign, but $48 million is only a fraction of what illicit drugs cost the United States annually. According to the National Institute on Drug Abuse (https://www.drugabuse.gov/related-topics), the combination of crime, lost work productivity, and healthcare costs due to drug use is estimated at $193 billion per year. These are only monetary estimates. The heartache and pain caused by drug abuse and overdose within our communities is immeasurable. A national drug-education campaign would help end the lethal drug epidemic and prevent more Americans from misusing both illicit and pharmaceutical drugs. It would also prevent families from losing a loved one.

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