



Brad Owen
Lieutenant Governor



Heroin: Black tar opioid overshadowing marijuana as greatest drug threat

While the state of Washington is known for its many natural wonders, many across the nation may wonder just what we were thinking when we became one of the first states to approve the sale of marijuana for recreational use for the 21-and-over set.

Sure, it's been a bumpy ride to implement legalized growing and selling of recreational pot, and there are still more hurdles to clear. One of these is its reconciliation with the medical marijuana market, legal in Washington since a voter-approved initiative in 1998 yet one that remains largely unregulated and readily accessible. Medical marijuana is "authorized" rather than prescribed by physicians willing to assign pot as a treatment for any number of ailments. Many studies show, curiously, that most of these ailments afflict men in their 20s and 30s.

But there is an even greater, darker scourge that is killing people in Washington and across the nation. Black tar heroin is increasingly finding its way to our region, said to be smuggled across the border from the opium poppy fields of southern Mexico by the money-hungry and super violent drug cartels like the Sinaloa, along with cocaine and meth. Overall heroin use in the United States has been rising steadily since 2007. A nationwide survey on drug use in 2012 reported that about 669,000 Americans had used heroin in the previous year. Heroin-related deaths are especially prevalent in states that border oceans and Mexico.



Lt. Governor Brad Owen

Seizures quadruple

Our state health officials are reporting a stark rise in the number of opioid overdose deaths (many from heroin). Heroin seizures by regional and federal law enforcement agencies quadrupled in the five-year period between 2009 and 2013.

More so-called "smash and grab" burglaries from store fronts are being committed by heroin addicts seeking easy money for a quick fix. State crime lab data suggests an 85 percent increase statewide for opioids in evidence testing between 2002 and 2013. Over the same period publicly funded drug treatment admissions for opioids as the primary drug increased 197 percent statewide, with increases in 38 out of 39 Washington counties, according to figures compiled by the Alcohol Drug Abuse Institute at the University of Washington.

The Northwest High Intensity Drug Trafficking Area, an organization that tracks and coordinates illegal drug enforcement activities in a 14-county area, reports that, for the first time in its 19-year history, heroin is outranking marijuana as the greatest drug threat to the region.

Impacts rural communities

One of the counties that has been hit hardest in Washington state is Mason, a mostly rural county in southwest Washington where I happen to live. Mason County posted 14 opioid-related deaths per 100,000 in population between 2011 and 2013, well above the state average of nine, according to death certificate data compiled by our state's Department of Health. Several other rural communities are similarly impacted.

Police officers and sheriff's deputies in many jurisdictions are encountering so many instances of heroin overdoses on their patrols that they now carry kits of naloxone, a medication taken intranasally that blocks the opioid receptors in the brain and can save a life by reversing the effects of a heroin overdose. Washington's Good Samaritan law also encourages citizens to administer naloxone to overdose victims without risk of criminal charges themselves.

Numerous reports state that many heroin addicts are finding their way to our homeless encampments, which seem to be popping up with more frequency than ever, especially in Seattle and surrounding communities. Publicly managed needle exchange programs in at least two counties are at an all-time high, with one jurisdiction reporting the exchange of one million needles in 2012 alone by users as young as 14.

The heroin problem is so alarming in Washington that a recent day-long symposium on heroin and opioid overdose in Seattle attracted more than 400 participants, including law enforcement, prevention and policy specialists, health care professionals and the news media. The keynote address was by Michael Botticelli, the newly confirmed director of the Office of National Drug Control Policy. ONDCP has developed a slate of national strategies to head off opioid abuse. Among the other speakers was Penny LeGate, a popular former television news reporter and program host who told the heartbreaking story of losing her daughter Marah to heroin addiction. Due to the interest in that symposium, a second is now scheduled in Eastern Washington on May 15.

Prescription med abuse, new low-cost availability drive surge

What is driving the sudden surge in heroin use? Authorities point to heroin as the natural go-to drug of choice for people who first get hooked on opioid-based prescription medications, then seek cheaper ways to achieve an equivalent high. While the price of a gram of heroin is variable, it can be purchased on the street for as little as \$20, roughly the same as a gram of recreational marijuana in Washington. The availability of heroin has also increased. Traditionally a lesser source than Asian producers, the Mexican drug cartels have now developed sophisticated, multi-billion dollar supply chains into the U.S. and are encouraging Mexican farmers to supplant subsistence crops with the cultivation of more lucrative opium poppies.

Strategies

All of this is raising great new concern for heroin/opioid abuse and we must act.

- First, we must continue to educate the public on the harmful impacts of heroin and opioid overdose to prevent these deaths. Our law enforcement personnel and emergency response professionals see the outcomes every day. Heroin abuse is ruining the lives of families and individuals and we must let people know about it.

- Second, let's step up our efforts to lock up prescription medication and dispose of it properly to keep people from getting hooked. Doctors should limit prescription meds to just what is needed for the patient. Too often far more painkillers are prescribed than are needed, leaving the excess to sit around in unlocked medicine cabinets as a temptation for over-use by the patient or to theft by others. In addition to decreasing dosage to just what is needed, let's be sure that all of our opioid-based pharmaceuticals are sold in FDA-approved, tamper-proof pill bottles.
- Third, let's work with the federal government and local law enforcement on new, more impactful interdiction strategies to keep this stuff off the streets.
- Fourth, encourage more local law enforcement agencies and other first responders to carry and be trained in the use of naloxone to counteract drug overdoses on the streets. This, of course, is a relatively new but important role for officers accustomed to waiting for medics to arrive.
- Finally, let's inform others that substance use disorder prevention and treatment works, and is available in local communities. In Washington state a number of publicly funded resources are indexed on a web site for prevention professionals (theathenaforum.org). We also operate a 24-hour toll-free help line for adults and an evening-only help line for teens.

By working on the problem of abuse together we can address and stop this terrible resurgence of heroin and opioid addiction. Youth are especially at peril as they are among the most vulnerable to influence by peers and unscrupulous adults. Please do what you can to stay informed, then join whatever efforts you can to educate and prevent even more instances of death and tragedy in your state and communities.

Prepared for publication by NLGA © National Lieutenant Governors Association 2014-2015

President of the Senate
Chairman, Rules Committee

220 Legislative Building
416 Sid Snyder Ave. S.W.
PO Box 40400
Olympia WA 98504-0400

Phone: (360) 786-7700
FAX: (360) 786-7749
e-mail: Brad.Owen@leg.wa.gov