

The opioid epidemic in the US: A national health emergency

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18 July 2017

The *Washington Post* recently published an extraordinary article on policies to address the spiraling drug epidemic in the United States. The article—“As opioid overdoses exact a higher price, communities ponder who should be saved”—did not feature calls for emergency health care or rehabilitation programs, but rather suggestions by some local officials that the state should just let drug addicts die.

The *Post* highlighted, among others, the proposal of Middletown, Ohio Council Member Daniel Picard that emergency responders should not use the drug naloxone to save overdose victims more than two times. The newspaper noted that the drug is often “the only thing separating whether an overdose victim goes to the hospital instead of the morgue,” and draws the conclusion that it is perfectly reasonable to adopt policies to ensure that many more go to the latter rather than the former.

That such fascistic measures—what might be called the “Duterte solution” to the drug epidemic in the US—are being treated as a rational and legitimate part of the political debate is an expression of the debased political psychology that dominates in the American ruling class. As far as the corporate and financial elite is concerned, if tens of thousands more people die from drug overdoses, this is not only acceptable, it is a positive good.

Such measures are being advanced amidst a national public health emergency on a scale not seen since the AIDS epidemic of the 1980s and ‘90s. In 2015, a shocking 52,000 people in the United States died from drug overdoses, including more than 30,000 from opioids alone. This compares to just under 42,000 deaths from AIDS at its peak in 1995. The figures for 2016, when finally totaled, are expected to show an increase of nearly 20 percent, rising to nearly 170

people every day of the year.

In the hardest hit regions, stories of morgues and funeral homes running at maximum capacity are commonplace. Twice already this year in Montgomery County, Ohio, the coroner’s office has been so overwhelmed with bodies that it was forced to rent extra refrigeration units.

Opioid-related deaths have jumped in states throughout the country, devastating rural areas and big cities, and affecting all races and ethnicities. In Maryland, the number of opioid-related deaths has nearly quadrupled since 2010. In Ohio, opioid related deaths jumped from 296 in 2003 to 2,590 in 2015, a 775 percent increase. In Florida in 2015, three opioids—heroin, fentanyl and oxycodone—were directly responsible for the deaths of 3,896 people.

The number of people directly impacted by the crisis—including family members, friends and colleagues, medical responders, social workers and many others—is in the millions. Many addicts have children who are forced into a resource-starved foster care system, or are left in the hands of family members who cannot provide for them. A recent study from University of Michigan estimates that one baby is born addicted to some sort of opiate every hour.

Thousands of workers who have dedicated their lives to jobs that treat drug addiction experience second-hand trauma from the hardships that come with combating the epidemic, with little to no resources. Hospital workers are forced to turn away withdrawing addicts from the emergency room without care; social workers have the task of telling children they cannot be reunited with their parents, or worse, that one or both of their parents have died; rehabilitation clinicians are expected to “cure” addicts with nothing more than additional drugs and a twelve-step program.

The drug epidemic is a public health crisis of incredible magnitude, and yet nowhere in the political establishment is there serious discussion on the measures needed to combat it—or who is responsible.

The underlying assumption in articles like the one in the *Post* is that drug abuse is a moral failing, and that those addicted deserve to face the consequence of their actions. This is a convenient explanation for those who wish to wash their hands of a problem that threatens their pocketbooks.

The drug epidemic, however, is not an individual failing but a symptom of a diseased social system. It is the product of definite actions taken by the ruling class and its political representatives, Democratic and Republican.

There are of course the pharmaceutical companies, which for years have been given a free hand to aggressively market some of the most addictive opioids, making huge profits in the process. These drugs were recklessly misbranded as “abuse resistant” throughout the 1990s and early 2000s, despite overwhelming evidence to the contrary. Prescriptions for opioids such as Percocet, Oxycontin and Vicodin skyrocketed from 76 million in 1991 to nearly 259 million in 2012, enough to supply each American adult with a bottle of pills, and some with two.

The same pharmaceutical companies continue to profit from the crisis that they helped foster. One of the reasons that cities face growing costs for using naloxone is that some companies marketing varieties of the drug have hiked up the price by as much as 500 percent.

More fundamentally, the drug epidemic is a symptom of the devastation produced by nearly forty years of social counterrevolution. Whatever the specific circumstances behind each individual tragedy, the crisis is the product of the unrelenting attack on social programs, wages, education and health care, combined with deindustrialization that has wiped out hundreds of thousands of jobs and produced levels of social inequality not seen since the 1920s.

Obama concluded his two terms in office declaring that “things have never been better” in the United States—a proclamation that applied to the ruling elite he served, but not to the great mass of the population. Now, under the Trump administration, the political establishment is engaged in a great “debate” over the

future of health care, currently centered on just how much and in what way to destroy Medicaid, which funds at least eighty percent of drug abuse services.

The outcome of the new health care bill, whatever its form, will be nothing short of social murder. In this sense, Picard, the local Ohio official, is merely channeling the general outlook of the ruling class, for which the reduction in life expectancy is a basic strategic aim.

A health emergency on the scale of the drug epidemic requires an emergency response. The Socialist Equality Party insists that billions of dollars must be allocated to fund rehabilitation centers, using the most advanced scientific methods and procedures. The health care system must be equipped with detox centers and connected to institutions to help with long-term recovery. All social workers in the field must receive a decent wage and the counseling and support needed. Children must be given the highest level of care while their parents recover.

Such elementary measures and more must be connected to the reconstruction of society to ensure that everyone has the right to a high-paying job, health care, education and quality housing. Only in this way can the underlying causes of drug addiction be addressed.

None of these measures is possible without a frontal attack on wealth of the corporate and financial elite and its stranglehold on the entire economic and political system. As tens of thousands die, the ruling class conspires to spend trillions on war and conjure up new ways to amass ever greater fortunes.

The disease of which the drug epidemic is a symptom is the capitalist system. It can be cured only through the mobilization of the entire working class in the fight for socialism.



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