



**- QUESTIONNAIRE -**

**Sample Provided by:** Nielsen Scarborough  
**Sample Size:** 2,607 Registered Voters

**Field Dates:** June 13-29, 2022  
**Margin of Error:** +/- 1.9%

Today we are going to look at proposals to address drug and alcohol misuse and addiction, also known as substance use disorders. Drugs that can be misused can include illegal drugs, prescription drugs used in an unprescribed manner, and other drugs that may not be illegal (such as marijuana in some states).

A person has a substance use disorder if they meet some of the following criteria:<sup>1</sup>

- The substance (drugs or alcohol) is often used in a manner that is physically harmful, psychologically harmful and/or results in failures to fulfill major obligations at work, school, or home, and giving up on social activities or hobbies.
- The substance (drugs or alcohol) is often taken in larger amounts or over a longer period than the person originally intended.
- A number of negative symptoms occur when substance use is cut back or stopped (i.e. withdrawal symptoms).
- Larger amounts of the substance are needed to get the intended feeling or prevent withdrawal.
- The person desires to cut down on using the substance but has not succeeded.

There are millions of Americans who have a substance use disorder. Since the covid pandemic began, it is estimated that the number of people misusing alcohol and drugs has increased.

Q1. Do you know anyone who misuses drugs or alcohol, whether or not they have been officially diagnosed?

	Yes	No	Refused / Don't Know
<b>National</b>	61.3%	38.4%	0.3%
Republicans	59.4%	40.0%	0.6%
Democrats	60.9%	38.9%	0.2%
Independents	65.6%	34.2%	0.2%
<b>Cooks PVI (D-R)</b>			
Very red	64.1%	35.5%	0.3%
Somewhat red	61.4%	38.4%	0.2%
Lean red	62.1%	36.8%	1.2%
Lean blue	58.9%	40.8%	0.3%
Somewhat blue	63.7%	36.2%	0.1%
Very blue	59.3%	40.7%	0.0%

There are various ways that people start using substances before developing a substance use disorder or an addiction to the substance. They may start by drinking alcohol in an ordinary fashion, occasionally taking drugs for recreational purposes, or taking prescribed pain killers.

Some people may use substances to deal with underlying problems such as depression or anxiety for which they are not getting treatment. This is sometimes called self-medication.

Most people do not become addicted when they use such substances. Some people are born with a genetic tendency to become addicted. Traumatic experiences, such as childhood abuse or military combat, can also increase the tendency to addiction.

<sup>1</sup> SAMHSA. (2021) 2020 NSDUH: Methodological Summary and Definitions

For people who become addicted, the substance has an impact on their brain functioning, making it harder for them to resist using the substance and difficult to stop without treatment.

In recent years, as opioids were prescribed more liberally, there was a significant increase in the number who became addicted and started using unprescribed drugs once their prescriptions ran out. As a result, opioids are now prescribed in a more limited way. However, there are still large numbers of people still dealing with their resulting opioid addiction.<sup>2</sup>

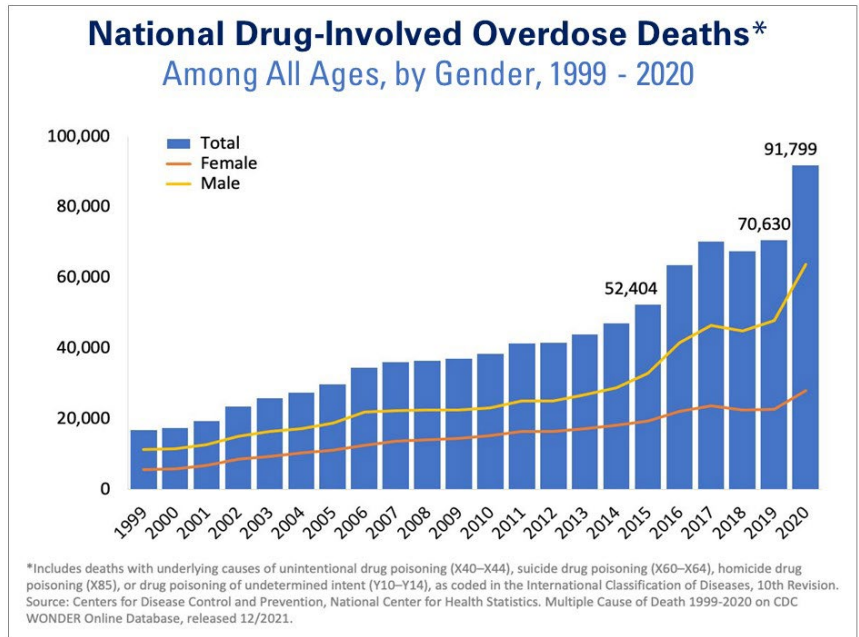
Another side effect of substance misuse and addiction is its negative effect on people’s health, including serious effects on people’s heart, lungs, liver and other vital organs. These effects can even be fatal over time.

People can also catch lifelong diseases, such as HIV and Hepatitis, when they share needles or other tools used to take drugs.

People can also overdose from drugs or alcohol, which can result in death. Over the last couple of decades, there has been a large increase in the number of deaths from drug overdoses. In the year 2020, around 100,000 people died from drug overdoses, more than triple what it was in 2000.<sup>3</sup> Three quarters of those overdose deaths are from the use of opioids.

In addition, each year about 90,000 people die from alcohol misuse.<sup>4</sup>

Q2. Have you personally known someone who died from a drug overdose?



	Yes	No	Refused / Don't Know
<b>National 2022</b>	37.6%	62.0%	0.4%
Republicans	35.3%	64.5%	0.2%
Democrats	35.8%	63.5%	0.7%
Independents	45.8%	54.0%	0.2%
<b>Cooks PVI (D-R)</b>			
Very red	40.7%	59.3%	0.0%
Somewhat red	35.0%	64.8%	0.1%
Lean red	37.7%	61.7%	0.5%
Lean blue	37.9%	62.0%	0.1%
Somewhat blue	37.0%	62.0%	1.0%
Very blue	39.0%	60.1%	0.9%

Substance use disorders also cost society as a whole – over \$400 billion a year according to the National Institute of Health. This includes<sup>5</sup>:

- \$65 billion in added healthcare costs
- \$109 billion in costs to the criminal justice system, primarily dealing with illegal drugs, dealing with people being under the influence of drugs or alcohol while driving, and crimes committed for the purpose of financing a substance use disorder.

<sup>2</sup> CDC. Prescription Opioids; CDC. (2017) Characteristics of Initial Prescription Episodes and Likelihood of Long-Term Opioid Use — United States, 2006–2015

<sup>3</sup> CDC. (2021) NCHS: Drug Overdose Deaths in the U.S. Top 100,000 Annually

<sup>4</sup> CDC. (2021) Deaths and Years of Potential Life Lost from Excessive Alcohol Use - 2011-2015

<sup>5</sup> American Journal of Preventive Medicine. (2015) 2010 National and State Costs of Excessive Alcohol Consumption, DOJ. (2011) National Drug Threat Assessment, and Medical Care. (2016) The Economic Burden of Prescription Opioid Overdose, Abuse and Dependence in the United States, 2013 (minus \$3 billion spent on treatment), all cited by NIH. Costs of Drug Abuse. The figures cited do not include estimated cost from loss-of-life.

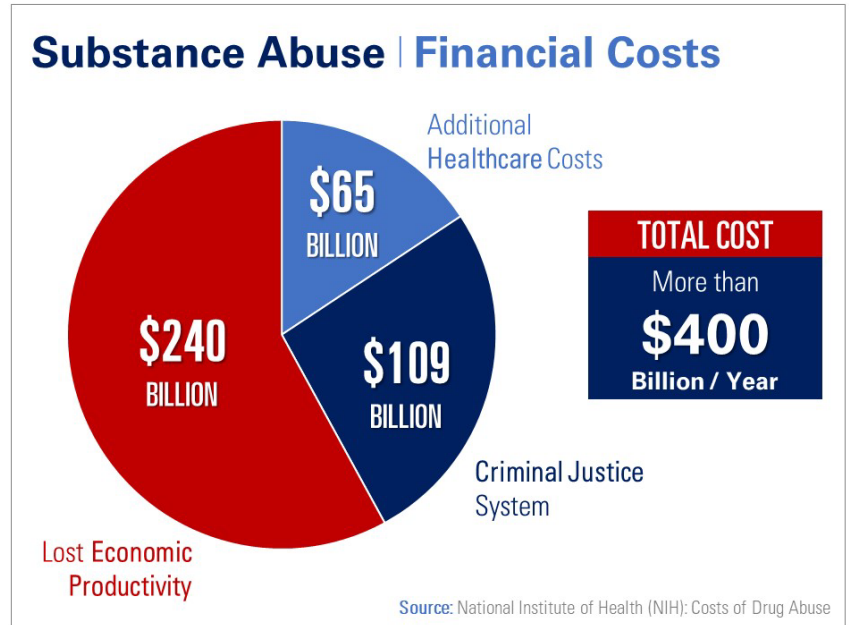
- \$240 billion of costs due to lost economic productivity from people failing to work effectively, missing work, or from being in prison on drug charges.

In addition to these costs, the deaths from overdoses have other substantial economic consequences.

Now, let's turn to a way to address substance use disorders: **providing treatment**.

Treatment may involve counseling, medication, and possibly staying in a rehabilitation (or 'rehab') center for intensive treatment.

Research finds that the majority of people who go through a treatment program reduce or stop abusing drugs and alcohol and improve their ability to function in their social lives and remain employed.<sup>6</sup>



Treatment, however, is often an ongoing process. About half of the people who enter treatment start misusing substances again and need to return to treatment or receive additional treatment.<sup>7</sup>

To help increase the amount of treatment available, the federal government provides cities and states with money to develop and operate treatment programs, and to train healthcare workers in substance use disorder treatment.

Spending money on treatment has proven to be cost-effective. The National Institute of Health estimates that for every dollar spent on treatment, there are \$7 in savings related to healthcare, criminal justice, and economic productivity.<sup>8</sup>

Despite the spending on treatment, there are still many people who need and want treatment but cannot get it.

There are about 1 million people who need and want treatment, or more treatment, but are not getting it.<sup>9</sup>

There is currently a debate about whether government spending on treatment should be increased so that all people who need and want treatment can get it.

Here is an argument in favor:

Q3. Treatment is an effective and relatively inexpensive way to treat substance misuse and addiction. An abundance of research shows that treatment is very cost effective.<sup>10</sup> Think about it: spending one dollar on treatment results in seven dollars of savings to society. Some studies put it at twelve dollars.<sup>11</sup> Clearly, it is the sensible thing to do.

How convincing or unconvincing do you find this argument?

<sup>6</sup> NIDA. (2022) Principles of Drug Addiction Treatment: A Research-Based Guide. How effective is drug addiction treatment?

<sup>7</sup> NIDA. (2022) Drugs, Brain and Behavior: The Science of Addiction

<sup>8</sup> NIH. (2006) Benefit–Cost in the California Treatment Outcome Project: Does Substance Abuse Treatment “Pay for Itself”?

<sup>9</sup> SAMHSA. (2021) NSDUH Detailed Tables 5.40A

<sup>10</sup> NIH. (2000) Cost-benefit analysis of drug treatment services: review of the literature

<sup>11</sup> NIH. (2006) Benefit–Cost in the California Treatment Outcome Project: Does Substance Abuse Treatment “Pay for Itself”?

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	32.1%	49.1%	<b>81.2%</b>	11.3%	6.6%	<b>17.9%</b>	0.8%
Republicans	19.8%	54.1%	<b>73.9%</b>	16.7%	8.9%	<b>25.6%</b>	0.5%
Democrats	46.6%	45.0%	<b>91.6%</b>	5.1%	2.7%	<b>7.8%</b>	0.6%
Independents	26.4%	48.0%	<b>74.4%</b>	13.6%	10.1%	<b>23.7%</b>	1.9%
<b>Cook's PVI (D-R)</b>							
Very red	20.2%	56.7%	<b>76.9%</b>	15.5%	6.8%	<b>22.3%</b>	0.8%
Somewhat red	29.1%	48.8%	<b>77.9%</b>	10.7%	10.9%	<b>21.6%</b>	0.6%
Lean red	31.8%	48.7%	<b>80.5%</b>	13.6%	4.6%	<b>18.2%</b>	1.3%
Lean blue	34.1%	47.9%	<b>82.0%</b>	11.4%	5.9%	<b>17.3%</b>	0.6%
Somewhat blue	33.6%	49.9%	<b>83.5%</b>	9.4%	6.4%	<b>15.8%</b>	0.7%
Very blue	40.9%	45.6%	<b>86.5%</b>	7.6%	4.8%	<b>12.4%</b>	1.2%

Here is an argument against:

Q4. Taxpayers should not be paying to fix the problems that people knowingly got themselves into. If a person decides to start using dangerous and addictive drugs, that is their responsibility. They should be the ones to get their life back on track. If they are ready to change, they will find a way.

How convincing or unconvincing do you find this argument?

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	15.7%	24.8%	<b>40.5%</b>	26.2%	32.6%	<b>58.8%</b>	0.6%
Republicans	20.8%	34.8%	<b>55.6%</b>	27.8%	16.3%	<b>44.1%</b>	0.3%
Democrats	9.4%	15.3%	<b>24.7%</b>	25.2%	49.6%	<b>74.8%</b>	0.6%
Independents	18.7%	25.0%	<b>43.7%</b>	25.4%	29.7%	<b>55.1%</b>	1.2%
<b>Cook's PVI (D-R)</b>							
Very red	16.4%	27.1%	<b>43.5%</b>	26.5%	29.7%	<b>56.2%</b>	0.4%
Somewhat red	17.8%	27.9%	<b>45.7%</b>	27.0%	26.9%	<b>53.9%</b>	0.4%
Lean red	13.7%	24.6%	<b>38.3%</b>	30.7%	30.2%	<b>60.9%</b>	0.7%
Lean blue	17.9%	25.3%	<b>43.2%</b>	24.3%	32.2%	<b>56.5%</b>	0.3%
Somewhat blue	14.6%	25.8%	<b>40.4%</b>	23.3%	35.7%	<b>59.0%</b>	0.6%
Very blue	12.4%	17.9%	<b>30.3%</b>	26.1%	42.3%	<b>68.4%</b>	1.3%

Here is another argument in favor:

Q5. We know that addiction is a physical and a mental disorder that many people cannot fight on their own, just like diabetes or asthma. But many that want and need professional treatment can't get it. They want to be productive members of society and have healthy relationships, and we should help them do that. Remember, many of these people developed an addiction just by taking the opioids they were prescribed.

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	40.4%	42.1%	<b>82.5%</b>	11.0%	6.0%	<b>17.0%</b>	0.5%
Republicans	27.5%	45.3%	<b>72.8%</b>	16.9%	10.1%	<b>27.0%</b>	0.2%
Democrats	53.6%	39.0%	<b>92.6%</b>	6.0%	0.9%	<b>6.9%</b>	0.5%
Independents	38.6%	42.1%	<b>80.7%</b>	9.9%	8.4%	<b>18.3%</b>	1.0%
<b>Cook's PVI (D-R)</b>							
Very red	33.2%	47.4%	<b>80.6%</b>	12.3%	6.7%	<b>19.0%</b>	0.4%
Somewhat red	37.5%	41.2%	<b>78.7%</b>	12.4%	8.3%	<b>20.7%</b>	0.6%
Lean red	44.9%	38.9%	<b>83.8%</b>	10.1%	5.6%	<b>15.7%</b>	0.5%
Lean blue	39.5%	43.7%	<b>83.2%</b>	9.8%	6.5%	<b>16.3%</b>	0.5%
Somewhat blue	39.7%	43.2%	<b>82.9%</b>	11.2%	5.2%	<b>16.4%</b>	0.6%
Very blue	46.5%	38.1%	<b>84.6%</b>	11.9%	3.1%	<b>15.0%</b>	0.2%

Here is another argument against:

Q6. Giving people drug treatment won't really solve the problem of drug addiction because the real source of the problem is moral weakness in our society. That is one of the reasons so many people relapse after treatment. It is not the proper role of government, but religious and charitable organizations, to solve this fundamental problem.

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	9.8%	21.7%	<b>31.5%</b>	27.2%	40.8%	<b>68.0%</b>	0.4%
Republicans	14.6%	29.5%	<b>44.1%</b>	34.3%	21.4%	<b>55.7%</b>	0.2%
Democrats	5.5%	12.7%	<b>18.2%</b>	21.3%	60.2%	<b>81.5%</b>	0.5%
Independents	9.5%	25.2%	<b>34.7%</b>	25.7%	39.1%	<b>64.8%</b>	0.4%
<b>Cook's PVI (D-R)</b>							
Very red	9.6%	26.1%	<b>35.7%</b>	30.2%	33.9%	<b>64.1%</b>	0.2%
Somewhat red	11.1%	23.9%	<b>35.0%</b>	29.7%	34.8%	<b>64.5%</b>	0.4%
Lean red	7.1%	22.1%	<b>29.2%</b>	29.4%	40.8%	<b>70.2%</b>	0.6%
Lean blue	11.1%	22.8%	<b>33.9%</b>	26.5%	39.4%	<b>65.9%</b>	0.1%
Somewhat blue	10.0%	19.1%	<b>29.1%</b>	23.6%	46.6%	<b>70.2%</b>	0.6%
Very blue	9.6%	16.8%	<b>26.4%</b>	23.6%	49.7%	<b>73.3%</b>	0.2%

Q7. So now, how high a priority should it be for the government to ensure that every person who needs and wants treatment for their substance use disorder is able to get it?

	Very High Priority	Somewhat High Priority	Total Very/Somewhat High Priority	Somewhat Low Priority	Not at All a Priority	Total Somewhat / Not at All a Priority	Refused / DK
<b>National</b>	38.4%	41.8%	<b>80.2%</b>	15.9%	3.6%	<b>19.5%</b>	0.3%
Republicans	20.7%	45.9%	<b>66.6%</b>	26.9%	6.2%	<b>33.1%</b>	0.3%
Democrats	54.1%	39.5%	<b>93.6%</b>	6.0%	0.2%	<b>6.2%</b>	0.3%
Independents	40.6%	38.8%	<b>79.4%</b>	14.8%	5.4%	<b>20.2%</b>	0.3%
<b>Cook's PVI (D-R)</b>							
Very red	31.6%	46.0%	<b>77.6%</b>	17.9%	4.5%	<b>22.4%</b>	0.0%
Somewhat red	34.0%	39.9%	<b>73.9%</b>	19.4%	6.0%	<b>25.4%</b>	0.7%
Lean red	36.9%	43.9%	<b>80.8%</b>	15.6%	2.7%	<b>18.3%</b>	1.0%
Lean blue	41.7%	37.6%	<b>79.3%</b>	17.1%	3.6%	<b>20.7%</b>	0.0%
Somewhat blue	39.4%	43.7%	<b>83.1%</b>	14.4%	2.6%	<b>17.0%</b>	0.0%
Very blue	46.4%	41.9%	<b>88.3%</b>	9.3%	2.3%	<b>11.6%</b>	0.1%

Currently, the federal government spends around \$20 billion a year on treatment for substance use disorders<sup>12</sup> This is about 1.5% of all federal spending on healthcare.

There is a proposal in Congress to increase federal spending on treatment for substance use disorders, by providing an additional:

- \$8 billion a year to local and state governments to:
  - expand existing treatment programs and build new treatment centers to increase the number of openings and reduce waiting lists
  - offer free or low-cost treatment for people who cannot afford it because they do not have insurance, have used up their coverage or cannot afford the copays that many health insurance plans require.
- \$2 billion a year to research substance use disorders and train healthcare professionals in best-practices to treat substance use disorder and to deal with overdoses.<sup>13</sup>

<sup>12</sup> National Drug Control Budget FY2022

<sup>13</sup> [Comprehensive Addiction Resources Emergency Act](#) by Rep. Maloney (D), cosponsors: 105D; and by Sen. Warren (D), cosponsors: 15D

Experts estimate that increasing spending by this amount would likely enable nearly all people who need and want treatment for their substance use disorder to get it<sup>14</sup>

Q8. Please select how acceptable this would be to you on the scale below, with 0 being not at all acceptable, 10 very acceptable, and 5 just tolerable.

	Unacceptable (0-4)	Just Tolerable (5)	Acceptable (6-10)	At Least Tolerable (5 – 10)	Refused / Don't Know
<b>National</b>	25.3%	13.6%	60.9%	74.5%	0.2%
Republicans	35.0%	19.6%	45.3%	64.9%	0.2%
Democrats	13.2%	8.9%	77.7%	86.6%	0.1%
Independents	31.1%	11.5%	57.0%	68.5%	0.5%
<b>Cook's PVI (D-R)</b>					
Very red	29.4%	15.2%	54.9%	70.1%	0.4%
Somewhat red	32.1%	12.6%	55.1%	67.7%	0.2%
Lean red	24.6%	13.2%	61.5%	74.7%	0.7%
Lean blue	24.7%	15.9%	59.3%	75.2%	0.0%
Somewhat blue	24.4%	13.7%	61.8%	75.5%	0.1%
Very blue	16.9%	9.6%	73.5%	83.1%	0.0%

Q9. Finally, do you favor or oppose this proposal?

	Favor	Oppose	Refused / Don't Know
<b>National</b>	74.8%	24.8%	0.4%
Republicans	58.3%	41.3%	0.4%
Democrats	92.0%	7.9%	0.1%
Independents	71.9%	27.3%	0.8%
<b>Cooks PVI (D-R)</b>			
Very red	67.8%	31.6%	0.6%
Somewhat red	67.7%	32.2%	0.1%
Lean red	77.5%	21.2%	1.3%
Lean blue	74.2%	25.7%	0.1%
Somewhat blue	74.3%	25.5%	0.2%
Very blue	87.5%	12.5%	0.0%

Another issue is how much substance use disorder treatment should be provided to people in prison.

According to the latest estimates, around two thirds of all prisoners have substance use disorders—including both drugs and alcohol.<sup>15</sup> For many of these people, their crimes were related to their substance use disorder in that they:

- violated drug laws,
- committed crimes under the influence of drugs or alcohol (such as drunk driving or spousal abuse), or
- committed crimes to cover the cost of their substance use, such as theft.

Currently, while many prisons offer some treatment programs, most do not have the trained staff to provide treatment to all who need it and few programs use up-to-date methods.<sup>16</sup>

<sup>14</sup> Time. (2017) Here's What It Would Cost to Fix the Opioid Crisis, According to 5 Experts;

Back-of-envelope calculations find that an additional \$14 billion would be needed to cover 1 million more people. Total spending on treatment is about \$44 billion and 2.7 million who received treatment. To provide an additional 1 million people with treatment would require increasing spending by 36%, or to \$60 billion. If that increase is covered entirely by the federal government, then they would be spending an additional \$14 billion.

Sources for spending numbers: Projected 2020 national expenditures were \$42 billion ([Health Affairs 2014](#) and [SAMHSA 2014](#)), but federal spending is \$1.7 billion more than projected (\$18.3B vs \$20B in 2021 per the [National Drug Control Budget FY2022](#)), bringing the total to roughly \$44 billion.

Source for number who received treatment: 2.7 million received treatment for drugs and/or alcohol ([SAMHSA NSDUH Table 5.23A](#))

<sup>15</sup> NIDA. Criminal Justice Drug Facts; Columbia University. (2010) Behind Bars II: Substance Abuse and America's Prison Population

<sup>16</sup> Columbia University. (2010) Behind Bars II: Substance Abuse and America's Prison Population

By the latest estimates, only about one in ten people in prison who have a substance use disorder have received treatment.<sup>17</sup>

A proposal has been put forward to provide additional funds to cities and states that want to expand and improve the treatment programs in their prisons.<sup>18</sup>

Here is an argument in favor:

Q10. Substance use disorder is a key reason many prisoners have ended up in prison and return to prison. Studies show that providing prisoners with treatment reduces their chance of committing another crime when they leave prison and increases their chances of leading a healthy life.<sup>19</sup> It is both humane and cost effective for society.

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	39.6%	41.8%	<b>81.4%</b>	10.3%	7.8%	<b>18.1%</b>	0.5%
Republicans	22.1%	50.8%	<b>72.9%</b>	13.9%	12.7%	<b>26.6%</b>	0.5%
Democrats	57.0%	35.1%	<b>92.1%</b>	5.0%	2.3%	<b>7.3%</b>	0.6%
Independents	38.1%	37.8%	<b>75.9%</b>	14.4%	9.3%	<b>23.7%</b>	0.3%
<b>Cook's PVI (D-R)</b>							
Very red	34.9%	46.3%	<b>81.2%</b>	11.3%	7.3%	<b>18.6%</b>	0.2%
Somewhat red	34.8%	38.9%	<b>73.7%</b>	15.6%	10.2%	<b>25.8%</b>	0.6%
Lean red	36.9%	46.8%	<b>83.7%</b>	7.6%	7.2%	<b>14.8%</b>	1.5%
Lean blue	40.3%	38.9%	<b>79.2%</b>	12.1%	8.7%	<b>20.8%</b>	0.0%
Somewhat blue	42.5%	40.0%	<b>82.5%</b>	10.1%	6.8%	<b>16.9%</b>	0.6%
Very blue	48.8%	41.4%	<b>90.2%</b>	4.3%	5.3%	<b>9.6%</b>	0.3%

Here is an argument against:

Q11. It should not be the responsibility of prisons to treat people's substance abuse problems. Prisoners are in prison to be punished for criminal behavior, not given therapy. Being in prison and away from all drugs should be enough for people to get over their drug and alcohol problems.

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	11.4%	20.4%	<b>31.8%</b>	26.7%	41.1%	<b>67.8%</b>	0.3%
Republicans	17.1%	28.2%	<b>45.3%</b>	32.9%	21.8%	<b>54.7%</b>	0.1%
Democrats	5.4%	13.7%	<b>19.1%</b>	21.3%	59.3%	<b>80.6%</b>	0.2%
Independents	12.5%	19.1%	<b>31.6%</b>	25.7%	41.7%	<b>67.4%</b>	1.1%
<b>Cook's PVI (D-R)</b>							
Very red	11.5%	26.4%	<b>37.9%</b>	27.3%	34.6%	<b>61.9%</b>	0.2%
Somewhat red	14.9%	20.8%	<b>35.7%</b>	26.9%	37.0%	<b>63.9%</b>	0.4%
Lean red	8.6%	21.4%	<b>30.0%</b>	30.1%	38.7%	<b>68.8%</b>	1.3%
Lean blue	13.6%	20.0%	<b>33.6%</b>	25.3%	41.2%	<b>66.5%</b>	0.0%
Somewhat blue	9.1%	16.4%	<b>25.5%</b>	27.6%	46.8%	<b>74.4%</b>	0.0%
Very blue	9.4%	19.1%	<b>28.5%</b>	23.1%	48.3%	<b>71.4%</b>	0.1%

Here again is the proposal:

Q12. Provide additional funds to cities and states that want to expand and improve the substance use disorder treatment programs in their prisons.

<sup>17</sup> Columbia University. (2010) Behind Bars II: Substance Abuse and America's Prison Population

<sup>18</sup> Residential Substance Use Disorder Treatment Act by Rep. Jackson Lee (D), and by Sen. Cornyn (R)

<sup>19</sup> holloway, K. et al. (2006) The effectiveness of drug treatment programs in reducing criminal behavior: A meta-analysis

	Unacceptable (0-4)	Just Tolerable (5)	Acceptable (6-10)	At Least Tolerable (5 – 10)	Refused / Don't Know
<b>National</b>	26.1%	12.3%	61.3%	73.6%	0.3%
Republicans	36.0%	17.9%	45.7%	63.6%	0.4%
Democrats	14.1%	7.1%	78.8%	85.9%	0.0%
Independents	31.6%	12.0%	55.8%	67.8%	0.6%
<b>Cook's PVI (D-R)</b>					
Very red	27.2%	16.5%	56.2%	72.7%	0.2%
Somewhat red	34.4%	12.0%	53.1%	65.1%	0.5%
Lean red	26.3%	11.9%	61.0%	72.9%	0.8%
Lean blue	25.8%	14.8%	59.4%	74.2%	0.0%
Somewhat blue	24.3%	10.0%	65.6%	75.6%	0.0%
Very blue	17.6%	8.3%	74.1%	82.4%	0.0%

Q13. Finally, do you favor or oppose this proposal?

	Favor	Oppose	Refused / Don't Know
<b>National</b>	74.4%	24.9%	0.7%
Republicans	60.8%	38.2%	1.1%
Democrats	88.9%	10.8%	0.3%
Independents	71.3%	28.2%	0.5%
<b>Cooks PVI (D-R)</b>			
Very red	72.7%	26.6%	0.7%
Somewhat red	67.1%	32.2%	0.7%
Lean red	75.8%	23.8%	0.5%
Lean blue	72.8%	27.1%	0.1%
Somewhat blue	74.6%	24.8%	0.6%
Very blue	85.5%	12.7%	1.8%

Now let's turn to an approach that has been developed that makes as its primary goal reducing the harm that drug use can have on users.

As you may know, using or misusing drugs can cause:

- **Overdoses:** Around 100,000 people died of overdoses in 2021.<sup>20</sup> Many of these people died because they did not know a drug they were taking was laced with an especially dangerous drug, such as fentanyl.
- **Diseases, such as HIV or Hepatitis C:** These are transmitted by using a needle to take drugs which was infected by another user.

The approach seeks to reduce these harms by giving health care providers and drug users:

- **Testing Kits** so that drug users can know whether the drugs are laced with an especially dangerous drug, such as fentanyl
- **Medication** that can counter the effects of an overdose
- **Clean Needles, or Disinfectants to Clean Needles,** so they do not catch any dangerous disease when using needles

Police are also trained, in some cases, on how to administer medication to a person they encounter who has overdosed.

To ensure that people use these programs, police cannot arrest a person for drug possession while they are visiting one of these programs to get testing kits or clean needles.

Several hundred cities in the US and other countries have set up these programs.

<sup>20</sup> CDC. (2021) Drug Overdose Deaths in the U.S. Top 100,000 Annually



Studies have found that these programs significantly reduce the likelihood of overdoses.<sup>21</sup> They also cut the rate of diseases from drug use, such as HIV, by around half.<sup>22</sup>

Studies have found that such programs do not lead to any increase in the use of drugs.<sup>23</sup> Such programs are not meant to replace drug treatment programs that seek to reduce drug usage. In some cases, the programs are used as an initial contact with drug users that can develop into treatment. But the immediate goal is to reduce the harms associated with drug use.

While such programs are in use in some cities, most drug users, however, do not have access to these programs, especially in rural areas.

There is a proposal in Congress to provide federal funds to cities and states that want to create or expand programs like these.<sup>24</sup>

Here is an argument in favor:

Q14. Many drug users have become addicted, either from being over-prescribed opioids, or they started taking drugs in response to a traumatic life experience. They should not have to suffer from an overdose or getting a lifelong disease that will only make their problems worse. They should be treated humanely.

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	38.1%	38.5%	<b>76.6%</b>	14.9%	8.1%	<b>23.0%</b>	0.5%
Republicans	21.1%	40.3%	<b>61.4%</b>	23.2%	14.9%	<b>38.1%</b>	0.5%
Democrats	52.3%	38.8%	<b>91.1%</b>	7.0%	1.5%	<b>8.5%</b>	0.4%
Independents	42.1%	34.3%	<b>76.4%</b>	14.8%	8.4%	<b>23.2%</b>	0.4%
<b>Cook's PVI (D-R)</b>							
Very red	32.2%	40.0%	<b>72.2%</b>	18.0%	9.1%	<b>27.1%</b>	0.7%
Somewhat red	35.3%	37.2%	<b>72.5%</b>	15.9%	11.2%	<b>27.1%</b>	0.4%
Lean red	36.4%	39.5%	<b>75.9%</b>	16.6%	6.4%	<b>23.0%</b>	1.2%
Lean blue	38.1%	39.0%	<b>77.1%</b>	14.3%	8.4%	<b>22.7%</b>	0.1%
Somewhat blue	39.2%	38.3%	<b>77.5%</b>	14.5%	7.6%	<b>22.1%</b>	0.4%
Very blue	46.8%	37.0%	<b>83.8%</b>	10.0%	6.1%	<b>16.1%</b>	0.1%

Here is an argument against:

Q15. It is not society's responsibility to reduce the harm of using illegal drugs. People know what they are getting into when they start using dangerous drugs. Maybe when they feel the negative consequences it will help motivate them to stop using drugs.<sup>25</sup>

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	13.6%	23.1%	<b>36.7%</b>	26.7%	36.4%	<b>63.1%</b>	0.2%
Republicans	20.1%	31.7%	<b>51.8%</b>	31.2%	16.8%	<b>48.0%</b>	0.1%
Democrats	6.3%	14.9%	<b>21.2%</b>	23.2%	55.3%	<b>78.5%</b>	0.2%
Independents	15.6%	23.1%	<b>38.7%</b>	24.8%	35.9%	<b>60.7%</b>	0.6%

<sup>21</sup> NIH. (2018) Fentanyl test strips as an opioid overdose prevention strategy: Findings from a syringe services program in the Southeastern United States; Intl Journal of Drug Policy. (2018) Use of rapid fentanyl test strips among young adults who use drugs; Connecticut Dept of Health. Fentanyl Testing to Prevent Overdose; NIH. (2020) A fentanyl test strip intervention to reduce overdose risk among female sex workers who use drugs in Baltimore: Results from a pilot study; NIH. (2019) Use of Rapid Fentanyl Test Strips Among Young Adults Who Use Drugs

<sup>22</sup> NIH. (2013) Are needle and syringe programmes associated with a reduction in HIV transmission among people who inject drugs: a systematic review and meta-analysis

<sup>23</sup> [NIDA. Syringe Services Programs; CDC. Summary of Information on The Safety and Effectiveness of Syringe Services Programs \(SSPs\);](#)

<sup>24</sup> H.R.6311 - Comprehensive Addiction Resources Emergency Act. This bill includes funding for "syringe services program" which can include, but are not exclusively, syringe exchange programs.

<sup>25</sup> "The International Task Force Meeting Statement on So-Called "Harm Reduction" Policies" Drug Prevention Network Canada – Harm Reduction".

Cook's PVI (D-R)							
Very red	14.4%	24.0%	<b>38.4%</b>	32.1%	29.1%	<b>61.2%</b>	0.4%
Somewhat red	14.4%	26.8%	<b>41.2%</b>	27.1%	31.3%	<b>58.4%</b>	0.4%
Lean red	13.3%	22.8%	<b>36.1%</b>	29.3%	34.0%	<b>63.3%</b>	0.6%
Lean blue	15.8%	23.2%	<b>39.0%</b>	24.9%	36.1%	<b>61.0%</b>	0.0%
Somewhat blue	13.9%	18.4%	<b>32.3%</b>	26.4%	41.3%	<b>67.7%</b>	0.0%
Very blue	8.9%	22.5%	<b>31.4%</b>	21.6%	46.9%	<b>68.5%</b>	0.1%

Here is another argument in favor:

Q16. When a person gets a disease from using an infected needle or overdoses because their drugs were laced with fentanyl, it costs everyone. More is spent on healthcare and disability insurance, diseases spread, and families lose loved ones and their incomes. Harm reduction programs are proven to reduce these consequences.

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	35.5%	38.0%	<b>73.5%</b>	17.2%	8.8%	<b>26.0%</b>	0.5%
Republicans	18.0%	40.5%	<b>58.5%</b>	26.2%	15.1%	<b>41.3%</b>	0.2%
Democrats	53.6%	35.4%	<b>89.0%</b>	8.8%	1.9%	<b>10.7%</b>	0.3%
Independents	32.6%	38.4%	<b>71.0%</b>	16.9%	10.7%	<b>27.6%</b>	1.4%
Cook's PVI (D-R)							
Very red	29.4%	39.9%	<b>69.3%</b>	19.4%	10.9%	<b>30.3%</b>	0.4%
Somewhat red	33.0%	35.2%	<b>68.2%</b>	16.3%	14.7%	<b>31.0%</b>	0.8%
Lean red	33.4%	40.8%	<b>74.2%</b>	19.2%	6.1%	<b>25.3%</b>	0.5%
Lean blue	33.4%	38.2%	<b>71.6%</b>	18.9%	8.8%	<b>27.7%</b>	0.7%
Somewhat blue	38.9%	38.9%	<b>77.8%</b>	14.7%	7.5%	<b>22.2%</b>	0.1%
Very blue	44.9%	36.3%	<b>81.2%</b>	14.0%	4.5%	<b>18.5%</b>	0.4%

Here is another argument against<sup>26</sup>:

Q17. It should not be the role of government to enable people to use illegal drugs. We should be taking needles away from drug users, not giving them out. These programs send the message that the government will tolerate this behavior, weaken the message that using drugs is wrong, and can make people feel freer to use illegal drugs.<sup>27</sup>

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	23.6%	28.7%	<b>52.3%</b>	20.5%	27.0%	<b>47.5%</b>	0.3%
Republicans	40.0%	33.2%	<b>73.2%</b>	16.2%	10.5%	<b>26.7%</b>	0.0%
Democrats	9.7%	22.7%	<b>32.4%</b>	24.2%	43.1%	<b>67.3%</b>	0.3%
Independents	19.9%	32.0%	<b>51.9%</b>	21.2%	25.9%	<b>47.1%</b>	1.0%
Cook's PVI (D-R)							
Very red	25.5%	32.9%	<b>58.4%</b>	19.9%	21.5%	<b>41.4%</b>	0.2%
Somewhat red	28.4%	27.0%	<b>55.4%</b>	19.5%	24.5%	<b>44.0%</b>	0.6%
Lean red	24.2%	33.4%	<b>57.6%</b>	18.6%	23.5%	<b>42.1%</b>	0.3%
Lean blue	25.2%	25.9%	<b>51.1%</b>	23.2%	25.2%	<b>48.4%</b>	0.6%
Somewhat blue	20.7%	29.0%	<b>49.7%</b>	18.0%	32.2%	<b>50.2%</b>	0.0%
Very blue	15.5%	26.2%	<b>41.7%</b>	21.9%	36.3%	<b>58.2%</b>	0.1%

<sup>26</sup> IACP. Harm Reduction Reason. (2018) Does the 'Moral Hazard' of Lifesaving Naloxone Justify Making It Hard to Get? citing Governor LePage; CNHI. (2017) Indiana prosecutor says needle exchange kits may encourage more drug use citing Indiana Prosecuting Attorneys Council urging a vote against needle exchange legislation.

<sup>27</sup> IACP. Harm Reduction Reason. (2018) Does the 'Moral Hazard' of Lifesaving Naloxone Justify Making It Hard to Get? citing Governor LePage; CNHI. (2017) Indiana prosecutor says needle exchange kits may encourage more drug use citing Indiana Prosecuting Attorneys Council urging a vote against needle exchange legislation; "The International Task Force Meeting Statement on So-Called "Harm Reduction" Policies" Drug Prevention Network Canada – Harm Reduction".

So, here again is the proposal:

Q18. Provide federal funds to cities and states that want it, to expand or create new “harm reduction” programs that provide drug users:

- **Testing Kits** so that the drug users can know whether the drugs are laced with an especially dangerous drug, such as fentanyl
- **Medication** that can counter the effects of an overdose
- **Clean Needles, or Disinfectants to Clean Needles**, so they do not catch any dangerous disease when using needles.

	Unacceptable (0-4)	Just Tolerable (5)	Acceptable (6-10)	At Least Tolerable (5 – 10)	Refused / Don't Know
<b>National</b>	34.7%	13.3%	51.4%	64.7%	0.5%
Republicans	56.3%	15.7%	27.6%	43.3%	0.4%
Democrats	13.5%	9.3%	76.3%	85.6%	0.8%
Independents	36.0%	17.1%	46.8%	63.9%	0.1%
<b>Cook's PVI (D-R)</b>					
Very red	45.5%	15.8%	38.3%	54.1%	0.3%
Somewhat red	42.3%	13.3%	44.2%	57.5%	0.2%
Lean red	34.0%	16.3%	49.6%	65.9%	0.1%
Lean blue	33.6%	14.8%	50.9%	65.7%	0.8%
Somewhat blue	31.3%	9.7%	58.5%	68.2%	0.5%
Very blue	22.3%	10.1%	66.2%	76.3%	1.3%

Q19. Finally, do you favor or oppose this proposal?

	Favor	Oppose	Refused / Don't Know
<b>National</b>	61.4%	38.1%	0.5%
Republicans	36.0%	63.5%	0.5%
Democrats	86.1%	13.6%	0.3%
Independents	60.5%	38.7%	0.8%
<b>Cooks PVI (D-R)</b>			
Very red	51.5%	48.5%	0.0%
Somewhat red	51.5%	48.3%	0.2%
Lean red	60.4%	39.0%	0.6%
Lean blue	62.6%	37.3%	0.1%
Somewhat blue	66.2%	32.9%	1.0%
Very blue	76.5%	22.6%	0.9%

Now let's turn to another topic.

As you may know, when a law enforcement officer encounters someone committing a minor non-violent offense, such as possessing a small amount of drugs, loitering, or disturbing the peace, they have various options. They can choose to arrest them, give them a warning, or let them go.

There is an additional option being used in some cities: if law enforcement officers perceive that a non-violent offender has a substance use disorder, rather than charging them with a crime, require them to enter a treatment program and give them information about available programs. If the person refuses, they may be charged.

In Congress, there is a proposal to provide funds to allow cities and states to set up or expand such programs.<sup>28</sup>

<sup>28</sup> CARA 3.0 by Rep. Trone (D) and by Sen. Portman (R). (Bill does not require financial resources be taken away from any other law enforcement operations.)

These programs would:

- train officers to recognize when a person has a substance use disorder, and how to interact with substance users
- give officers the tools to require them to enter a treatment program and give them information about available programs.

Here is an argument in favor:

Q20. A person who has a drug or alcohol problem should be put in treatment, not jail. Jailing people for minor offenses doesn't solve addiction, but it does cost local communities a lot of time and millions of dollars in police resources, court costs, and prisons. It also makes it harder for them to get housing or a job because of their criminal record, making it worse. Law enforcement officers are on the front lines, so they're in a great position to get them into treatment.<sup>29</sup>

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	46.1%	35.1%	<b>81.2%</b>	11.0%	7.2%	<b>18.2%</b>	0.5%
Republicans	30.6%	39.5%	<b>70.1%</b>	17.1%	12.1%	<b>29.2%</b>	0.7%
Democrats	60.9%	31.1%	<b>92.0%</b>	5.4%	2.2%	<b>7.6%</b>	0.4%
Independents	46.3%	34.9%	<b>81.2%</b>	10.4%	7.9%	<b>18.3%</b>	0.5%
<b>Cook's PVI (D-R)</b>							
Very red	38.4%	38.8%	<b>77.2%</b>	13.5%	8.9%	<b>22.4%</b>	0.4%
Somewhat red	43.9%	33.0%	<b>76.9%</b>	11.5%	11.1%	<b>22.6%</b>	0.6%
Lean red	47.0%	32.4%	<b>79.4%</b>	13.0%	5.9%	<b>18.9%</b>	1.8%
Lean blue	45.7%	38.8%	<b>84.5%</b>	9.9%	5.7%	<b>15.6%</b>	0.0%
Somewhat blue	49.6%	33.4%	<b>83.0%</b>	9.7%	7.3%	<b>17.0%</b>	0.0%
Very blue	50.9%	33.9%	<b>84.8%</b>	9.4%	5.4%	<b>14.8%</b>	0.4%

Here is an argument against<sup>30</sup>:

Q21. The law must be upheld in all cases. Police are there to stop crime and arrest criminals, not determine if someone has a drug problem and help them get treatment. If a person commits a crime they should be charged and receive the punishment, whether or not they have a substance abuse problem. We should leave it up to the courts to decide whether a person should get sent to treatment rather than jail.<sup>31</sup>

	Very Convincing	Somewhat Convincing	Total Convincing	Somewhat Unconvincing	Very Unconvincing	Total Unconvincing	Refused / DK
<b>National</b>	19.5%	29.2%	<b>48.7%</b>	23.9%	27.2%	<b>51.1%</b>	0.2%
Republicans	30.5%	36.4%	<b>66.9%</b>	22.4%	10.6%	<b>33.0%</b>	0.1%
Democrats	9.5%	21.5%	<b>31.0%</b>	26.7%	42.1%	<b>68.8%</b>	0.2%
Independents	18.6%	31.2%	<b>49.8%</b>	21.0%	28.9%	<b>49.9%</b>	0.3%
<b>Cook's PVI (D-R)</b>							
Very red	22.0%	29.8%	<b>51.8%</b>	25.6%	22.4%	<b>48.0%</b>	0.2%
Somewhat red	22.0%	29.3%	<b>51.3%</b>	23.8%	24.4%	<b>48.2%</b>	0.4%
Lean red	19.5%	31.3%	<b>50.8%</b>	23.3%	25.7%	<b>49.0%</b>	0.3%
Lean blue	20.2%	28.8%	<b>49.0%</b>	23.7%	27.3%	<b>51.0%</b>	0.0%
Somewhat blue	15.5%	29.2%	<b>44.7%</b>	25.2%	30.1%	<b>55.3%</b>	0.0%
Very blue	17.7%	26.9%	<b>44.6%</b>	22.1%	33.2%	<b>55.3%</b>	0.1%

So, here again is the proposal:

Q22. Provide federal funds to cities and states that want to set up or expand programs that:

- train officers to recognize when a person has a substance use disorder

<sup>29</sup> PLOS. (2020) Health outcomes and cost-effectiveness of diversion programs for low-level drug offenders: A model-based analysis

<sup>30</sup> See work by [Rafael Mangual](#) at the Manhattan Institute

<sup>31</sup> See work by [Rafael Mangual](#) at the Manhattan Institute

- give officers the tools to require them to enter a treatment program and give them information about available programs.

	Unacceptable (0-4)	Just Tolerable (5)	Acceptable (6-10)	At Least Tolerable (5 – 10)	Refused / Don't Know
<b>National</b>	25.5%	11.3%	63.0%	74.3%	0.2%
Republicans	37.7%	15.7%	46.1%	61.8%	0.4%
Democrats	11.5%	7.0%	81.4%	88.4%	0.1%
Independents	30.3%	11.5%	57.9%	69.4%	0.2%
<b>Cook's PVI (D-R)</b>					
Very red	29.0%	16.8%	54.0%	70.8%	0.2%
Somewhat red	31.6%	10.5%	57.0%	67.5%	0.9%
Lean red	25.0%	11.2%	63.6%	74.8%	0.2%
Lean blue	25.8%	9.6%	64.6%	74.2%	0.0%
Somewhat blue	23.1%	12.3%	64.6%	76.9%	0.0%
Very blue	18.1%	9.5%	72.3%	81.8%	0.1%

Q23. Finally, do you favor or oppose this proposal?

	Favor	Oppose	Refused / Don't Know
<b>National</b>	73.9%	25.6%	0.6%
Republicans	58.2%	41.1%	0.6%
Democrats	90.2%	9.4%	0.4%
Independents	70.8%	28.3%	0.9%
<b>Cooks PVI (D-R)</b>			
Very red	67.3%	32.2%	0.5%
Somewhat red	69.0%	31.0%	0.0%
Lean red	74.7%	24.0%	1.3%
Lean blue	73.7%	26.1%	0.2%
Somewhat blue	76.2%	23.7%	0.2%
Very blue	81.9%	16.7%	1.4%

[Q23 – Q29 Released Previously]

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