



# Being an Advocate for Substance Abuse Treatment and Prevention—Time for New Strategies

**Andrew Kessler**  
**Slingshot Solutions, LLC**

**NCAD 2013**  
**Anaheim, CA**  
**September 21, 2013**

FOUNDED AND PRODUCED  
BY THE PUBLISHERS OF

**ADDICTION**  
PROFESSIONAL

IN CONJUNCTION WITH

**BEHAVIORAL**  
HEALTHCARE



IN ASSOCIATION WITH





**Introductions all around!**

- Andrew Kessler, J.D.
- Slingshot Solutions, LLC
- Incorporated in 2008
- Clients include IC&RC, CAADAC/  
CFAAP, Strategic Applications  
International, National Council on  
Problem Gambling



## Who am I? Why am I here?

- To learn about the environment we are currently in
- To learn about how substance abuse is viewed by policy makers
- To take what we learn and apply it to effective advocacy strategies
  - (All in 60 minutes!)



## What is an expert?

- Webster's: "having, involving, or displaying special skill or knowledge derived from training or experience."
- Court of law: "a person who is a specialist in a subject, often technical, who may present his/her expert opinion"
- Newsflash- I'm not the only expert in this room...



**We need you to be leaders**

- If the experts do not lead, who will?  
(That's a rhetorical question...)
- This is a complex issue that will require guidance and patience. If you're looking for overnight results, you can leave now.
- I mean it.



- Get ready to go outside your comfort zone
- This is not about a step by step, easy to use formula. Developing that will take months if not years. We only have an hour.
- This is about learning what is going on outside our world of treatment and prevention, what is going on in the rest of the world of advocacy, and learning to operate in that world
- This is about the landscape we are working in, and why our strategies need to change.



## Pitfalls of advocacy

- To be an advocate- especially someone who is an expert, you must be aware of:
- **The Landscape:** How is your issue perceived by policymakers?
- **The Goal:** What are you after? What is your “ask?”
- **The Process:** What can you, should you, and will you do to achieve that goal?



# THE LANDSCAPE



**Any golfers out there?**





## So what?

- If anyone is an expert at his craft, it's Jack Nicklaus.
- Jack says:
- Aim for the Center of the green, not the flagstick
- (Except on the back 9 on Sunday...)
- Translation: You will be successful if you position yourself properly.
- When the time is right to go for it, then go for it.



## Putting is tricky...

- Don't just look at the break of the green. That will deceive you.
- Exam the TERRAIN that the course is built on!
- Is the course built near a mountain? Putts break away from the mountain.
- Is the course near a river or valley? Putts always break towards the valley.



- **Translation:** the ground you're standing on must be navigated, **but so must the landscape surrounding you.**



**Who is this fine looking gentleman?**





- Terrain is one of five key elements of Sun Tzu's "Art of War."
- If you do not know how the terrain will impact your movements, how can you move efficiently?
- If you can't move efficiently, how can you attack efficiently? How can you retreat efficiently? (the answer is "You can't!")
- If you can't attack (or retreat when necessary) HOW CAN YOU WIN???



- What Congress knows about treatment is an exact duplicate of what the general public knows about treatment.
  - A select few understand that addiction is a disease and treatments should be evidence based.
  - The rest...well, you can imagine.
- So not only do we have to educate Congress, we have to educate the public.
- If the public does not care, Congress will not care.



## STOP...on a Whammy!



**In fact, It's a double whammy!**



## What are we up against?

- Times are tough for all advocates
  - Pressures to reduce spending
  - Which brought us such lovely headaches as the Sequester...
- We get the crumbs to begin with
- So it's another....
  - **DOUBLE WHAMMY!**



## What does the public know?

- What they see from Hollywood
  - What they see from their families
  - What they see in public
- 
- All of this is part of the terrain we are navigating



- Most of the public DOES indeed distinguish between substance abuse and alcoholism.
- What are public attitudes towards alcoholism?
  - Far more tolerant
  - Even though more people live with alcoholics than with substance abusers and see the destruction it causes, more people are also willing to just accept it as something everybody does
  - (WARNING: OFFENSIVE MATERIAL AHEAD)



**Who is this young lady?**

NATIONAL CONFERENCE ON  
**ADDICTION**  
DISORDERS





- Samantha Goudie, aka “Vodka\_Samm”
- University of Iowa
- Arrested for running onto the football field
- Blew a BAC of .341
- Twittersphere hero
  - Called a hero
  - Called an inspiration
  - Mostly by other students



## Priorities, priorities...

- In 2007, Congress held hearings on violence in hip hop music.
- It was bad for kids, they said. It set a bad example.
- This followed a hearing in 1994, after which the industry started self regulating:



**Remember this?**





## Where's OUR hearing?

- Almost one-fourth of Billboard Magazine's most popular songs from 2009 to 2011 mentioned alcohol, a new study finds. Of the 167 songs, 46 referenced a specific brand, such as Patron, Hennessy, Grey Goose and Jack Daniel's.
- Do mentions of alcohol and underage drinking qualify for a warning label? No. (Drug use does...)
- Why? Because society just accepts alcoholism- and underage drinking- as something they have to tolerate.



**Some is better than none....maybe**

- There have been members of congress responsive to the Rx abuse problem
- Legislation has been introduced to curb it
- But in this congress, no legislation is passing
- Even in a good environment, how many of these members would make this their very top priority?
  - (Let me tell you about Hal Rogers...)



- No politician will ever be criticized for being “too tough” on crime
- You and I know that substance abuse is a health issue. The public is less educated.
- The **public** views substance abuse as crime.
- Ergo, (most of) **Congress** views SA as a crime.
- Viewed as social issue, not health issue
- Public will not engage until it is their problem



## What is the perception of the drug culture?

- “All Mexicans are crazy, and this stuff [marijuana] is what makes them crazy.”- Texas State Senator, 1919
- “For everyone who’s a valedictorian, there’s another 100 out there that weigh 130 pounds and they’ve got calves the size of cantaloupes because they’re hauling 75 pounds of marijuana across the desert,” – Rep. Steve King, 2013
- Do I need to translate exactly how too many politicians perceive drug users?



## The silver bullet

- Also, keep in mind other reasons why this is not an easy sell.
- Congress- like Americans- like a quick fix. A silver bullet.
- Raise your hand if you flew to this conference
  - What article of clothing did you have to remove at the TSA checkpoint?
  - And why did you have to do that?
  - Because ONE person tried it before. ONE.
  - I rest my case...



Imagine...

- WHAT IF...All of a sudden in the state of Florida, ten manatees washed up dead on the shore EVERY DAY?
- Ten a day, every day, 365 days a year?
- The press would go nuts. The public would be outraged. I can pretty much guarantee that millions of dollars would be diverted to find the cause of this problem, and solve it.



Now...

- Replace “manatees” with “teenagers”
- Replace “washed up on shore dead” with “dropped dead from a prescription drug overdose.”
- The outrage is...where?
- The media is...where?
- Congress is...where?
- I think it’s starting to sink in...



## Is it “the stigma?”

- Let’s get down to it. Lots of people blame our lack of policy progress on “stigma.”
- Stigma is defined as “a mark of shame or discredit”
- So because others who do not understand addiction may discredit those who have the disease, there may be a stigma attached to it. But when our leaders refuse to address this disease, DUE to stigma, it becomes something else...



**NO!**

- DISCRIMINATION
- I want everyone here and now- if you agree with me- to pledge to stop using the word “stigma” to describe apathy for substance abuse and treatment.
- It is too soft. It is too polite. It lets leaders of the hook.

- DISCRIMINATION



**Give me an example!**

- Governor Scott of Florida faced a massive budget shortfall. He needed to save money, fast!
- His bright idea? Drug test all welfare recipients.
- Why?
  - The poor, and welfare recipients, are stereotyped
  - Addicts are also stereotyped- usually as welfare recipients
  - Because addicts are a convenient scapegoat
  - Process- recipients must pay for test themselves, and if they test clean, they are reimbursed for the cost.



## How'd that pan out?

- General population averages a positive drug test at a rate of about 8%
- Welfare recipients in Florida?
  - TWO AND A HALF PERCENT!
  - (And a federal judge ruled it unconstitutional to boot...)



## Spreading like a virus...

- Utah joined the handful of states that have passed laws mandating drug tests for people seeking welfare benefits.
- of 4,425 people screened for drug use after seeking aid, 813 were deemed to be at high risk of drug use, and 394 were actually subjected to drug testing
- How many people tested positive?
  - NINE



## A voice of reason?

- North Carolina!
- Governor vetoed the bill calling for testing of welfare recipients, citing it as too costly in other states.
- Hey, it's a start...



## What's on the menu?

- Something you need to know about Congress:
- They rarely address the underlying disease of addiction.
- Instead, each decade there is a “drug d’jour” that they go nuts over, and insist that it is the worst epidemic since Bubonic Plague.
- Most believe that if this problem is solved, or talked about enough, then the drug epidemic is solved.
- (Even though alcohol abuse outpaces all illicit substance abuse combined- and to say nothing of tobacco...)



## Today's bill of fare...

- 1930s- Marijuana
- 1960s- LSD
- 1970s- Cocaine (powder)
- 1980s- Crack
- 1990s- Designer drugs (ecstasy)
- 2000s- Methamphetamine
- 2010s- Rx abuse
  - Specifically, Oxycotin/Oxycodone
    - (Even though Rx abuse has outpaced illicit drug use since the 1950s!)



- NEVER underestimate the ability of a public servant- state or federal- to react hysterically to media reports (especially inaccurate media reports)- especially when drugs are involved.
- Nothing causes government- at any level- to kick into action like a story on the local news about one or two kids who died of an “overdose” of some “new” drug.
- I can give you examples of this pertaining to salvia, bath salts, DXM abuse, synthetic marijuana, and on and on.



## **What is the terrain when it comes to members of Congress**

- We have champions right now...
  - Yeah, TWO!
  - Rep. Ryan (D-OH)
  - Rep. Tomko (D-NY)
  - We have others who are interested in our issues, but not champions for our issues (Reed, Whitehouse, Blumenthal, Rogers, Murphy, Bass, Roybal-Allard....)
    - (Don't get me started on Kelly Ayotte....)



## What is the terrain when it comes to members of Congress

- We also have to deal with the likes of Rep. Lankford, who engaged in this dialogue:
- OK State Rep Sally Kern: “[SAMHSA is) going around the nation, they just did this here in Oklahoma, December 7th, and having conferences that are educational. [...] **About 2 percent of the conference is dealing with substance abuse and mental health issues. 98 percent is doing indoctrination or pushing the homosexual agenda.**”
- Rep. Lankford: “They love functioning in the dark. You put some sunlight on it, that does help. But, we’ll see. **I’m glad to take that on.**”



Careful...

- Lots of members of Congress support our efforts. But NONE have made it their top priority.
- There is rhetoric, and there is reality
- And in Washington, reality is MONEY.



- Most advocates concerned with a disease lobby for research funds, not treatment. Why?
- Most diseases are covered by private insurance (I know my insulin is...)
- 70-80% of all SA treatment and prevention funds come from public sources, including the federal government
- Because state programs are getting decimated left and right, too, and every little bit is going to make a difference.
- My focus is on federal policy, but knowing what is going on in the states is becoming critical.



## The times, they are changin'....

- No longer the age of “gimmie”
- Age of “don’t cut me!”
- And that’s bad. Substance abuse treatment and prevention funding is usually first on block (especially in criminal justice)



## Any business school grads?

- “LIFO”
  - SA dollars are almost always LIFO
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- LAST IN
  - FIRST OUT



- Department of Justice Appropriations
- "A first look at the bill indicates that there may be cuts in aid to programs on juvenile justice, prisoner re-entry, and drug courts."
- EUDL: Cut from \$20 million to \$5 million



- We've defined the problem
- Let's get down to business- how to change our approach
  - Because, believe me, it needs to change....



- THE GOAL



## **This is the Slide Title**

Can add a deck here if needed

- This is the easy- and short- part
- Let's talk about the future
- I'm not here just to tell you what you already know... (even though I AM a lawyer...)



- Again, our list of goals is something that cannot be addressed in an hour
- Let's be as concise as possible



## Is it really this simple?

### What do we want?

- Funding, obviously. But for what?
  - Treatment, Prevention, Recovery
  - ACA implementation
  - Research
- Regulatory changes
  - Rx Monitoring
  - Criminal justice reforms
  - Medicare coverage



- From there, it gets tricky.
  - Some focus on treatment. Others on recovery. Others on prevention. Others on research.
  - Back to our golf lesson: As a group, we aim for the center of the green.
  - Once there, as more varied interests, you can pick your own line to the hole.
  - I work with dozens of SA interest groups and DC, and respect all of them immensely. But we're all kind of stuck in neutral.



- THE PROCESS



## What did a law school education get me?

- Problem solving skills!
- Two parts to every problem:
  - Substance
  - Procedure
- We know the substance of our issue. Now lets examine the right procedures to follow.



- Politicians rely on us to get reelected (their #1 priority).
- They are very sensitive to public attention or “criticism” over their actions.
- Personal connections are the best tool we have to persuade them.
- But we’re not using these facts to our advantage....



- Raise your hand if you think...
- Politics plays a role in the funding decisions that are being made on Capitol Hill.
- Politics accounts for 50% or more of the decisions on Capitol Hill.
- Politics accounts for 90% or more of the decisions on Capitol Hill.



**They're drowning up there...**



Each US Representative receives approximately 10K emails every week.

5,000 bills are introduced in a session of Congress.

Capitol Hill is literally drowning in information

Congressional staff admit that CapWiz emails are not read (“slacktivism”).

**Personal appeals are best**



- We are ALL swimming in marketing messages - more than 3,000 a day
- It's more and more difficult to reach people through mass media and advertising.
- Social media reduce barriers, but also increases volume.
- How do you reach someone in our media saturated environment?



## Quality vs. Quantity

NATIONAL CONFERENCE ON  
**ADDICTION**





## Eyes on me, ladies!

For years, many have thought that advocacy is based on sheer numbers. More letters and more calls gets you heard.

### **NOT TRUE** (Anymore)

We don't need 1 million people marching in the streets (though it would be nice to have)!

100 or 1,000 well-placed, trained advocates can get the attention we need.

By **narrowly targeting our efforts**, we can be taken seriously on Capitol Hill-and at home.





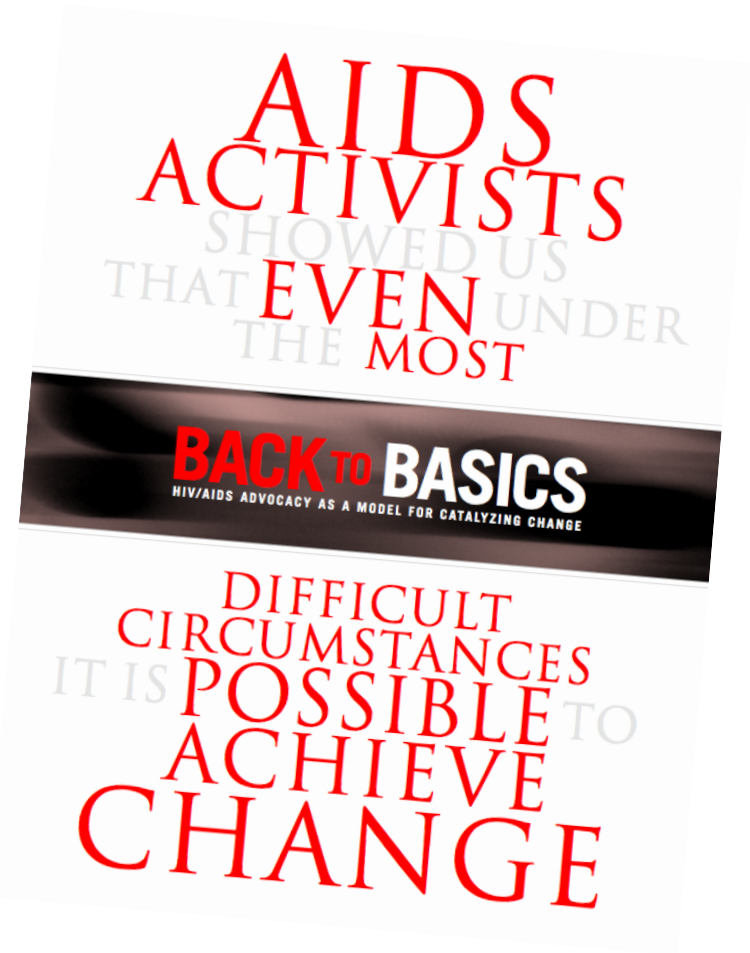
## Precision strikes

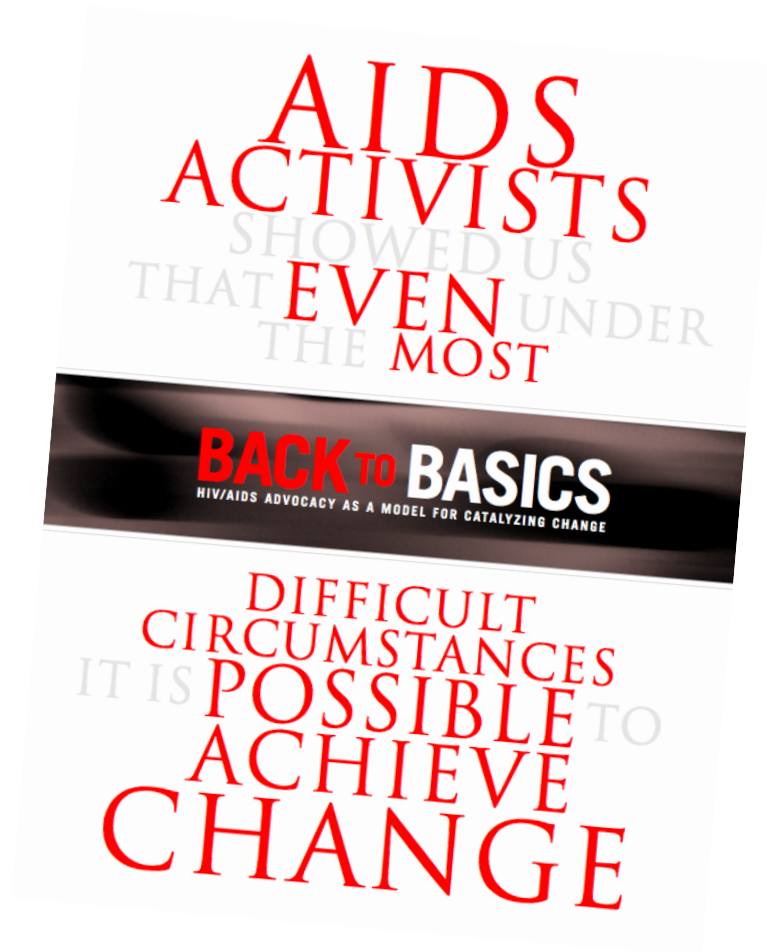
- We need 10 or more quality people in 10 key congressional districts.
- These advocates can put significant political pressure on their Representative.
- Focus on very personal, high impact communications



## Case Study: HIV/AIDS Movement

- 32 years since release of MMWR identifying unusual illness in gay men
- FasterCures sponsored a symposium in 2009 on the “lessons learned” from the HIV/AIDS movement.
- From \$0 to \$2 billion in 10 years, to \$27 billion in federal funding in 30 years (16K annual deaths).
- **“Most successful public policy change model ever.”**





- Attention, Knowledge & Solutions, Community, Accountability and Leadership
- Most Important: **Generating Attention and Creating the Will to Transform Policies**
- Getting attention changed public opinion and created the political will to transform policies.
- Model: Civil Disobedience
  - Extreme, but effective



Organizations need to analyze their existing communications strategies.

**We're not advocating that you block the Brooklyn Bridge.**

But a new level of urgency is needed to make decision-makers understand the consequences of inaction or the status quo.





Access and face time do not mean that you have decision-makers' attention. In some instances, it only means that they can “check the box” about consulting with the community without having really listened. They have met with and listened to the advocate and the outreach is done. That is NOT getting their attention.





[Most] organizations shy away from actions that make policymakers uncomfortable.

Instead, they focus on building relationships and engaging in activities that make policymakers feel safe.

The focus on working within the system without challenging the notion that the rules might not be in their best interest.





## Can you believe it worked?

- President Reagan could not even bring himself to utter the word ‘AIDS’ in public,” Vicki Brower, European Molecular Biology Organization Reports.
- This changed when a critical mass of patients, friends and families, and spokespeople made their presence known on Capitol Hill and in the White House.
- By 1989, spending on AIDS reached more than \$2 billion, compared to \$74.5 million on breast cancer, although breast cancer killed more than 40,000 women that year, compared with 22,000 deaths due to AIDS.
- Then, using some of the same grass-roots techniques used by AIDS activists, breast cancer advocates successfully pushed for an increase in federal funding for breast cancer research.



## Are We That Different than HIV/AIDS in 1981?

- A marginalized community...
- A misunderstood disease...
- Scientific knowledge about the disease that no one is paying attention to...
- Sounds like a match...



## Not the end of the story

- prostate cancer kills more men than breast cancer kills women
- There is always going to be a disease that kills more people than the one you advocate for (ever heard of the flu?)
- We are not here to assure that diseases find the right place in the funding line. We are here to assure that addiction receive its rightful share, and that is it.



**One SMALL difference for the HIV community**

NATIONAL CONFERENCE ON  
**ADDICTION**  
DISORDERS

HIV found a champion...





**Who will be ours?**

NATIONAL CONFERENCE ON  
**ADDICTION**  
DISORDERS





- Take advantage of the networks you have in place and strengthen them.
  - No need to reinvent the wheel
- We can bring the people to Capitol Hill, no doubt. It's the message that may need to change- and how we deliver it.
- One size fits all does not work any more.
- In a day and age where so much data is available, and everyone knows it, you must take advantage of it.

.



- Anecdotal evidence does work, especially from a member's home district
- It must be coupled with evidence based solutions
- It must be followed up on
- “One and done” is exactly that



## The bad news...

- This will never be any group's #1 priority. (or #2 or #3 or #147...)
- Progress will be difficult given the seriousness of our budgetary problems and the stigma we fight
- This is an approach we've not tried previously





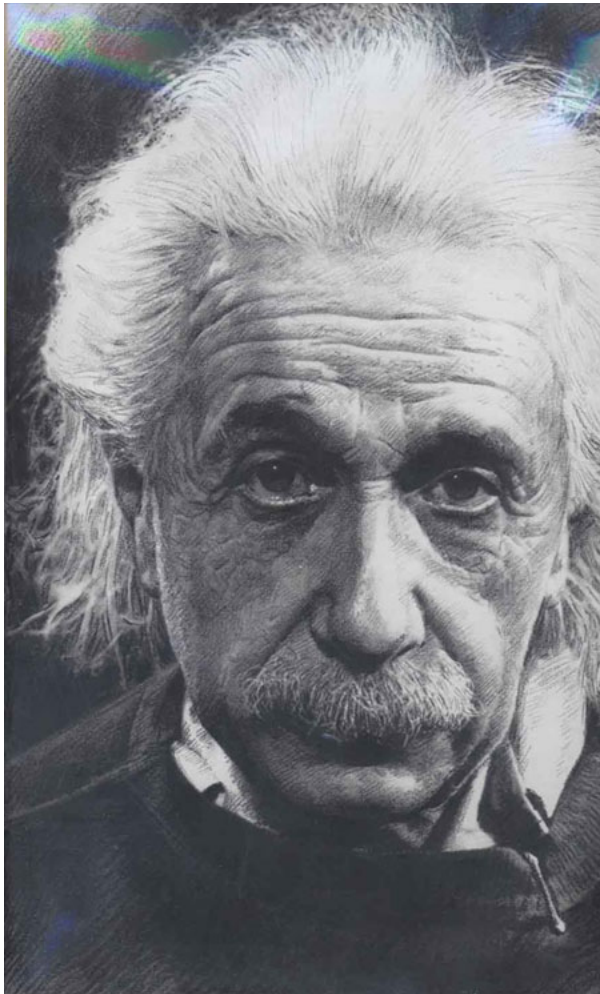
## The good news!

- Our members have a huge collective voice.
- We don't need millions of people (even though we have them)
- Agreement on goal (fight discrimination/roadblocks) and strategy, mobilize members)





## Can't argue with a genius



- Insanity is doing the same thing over and over and expecting different outcomes.
- The times they are a changin', and we need to change as well.
- If we don't lead, who will? What will happen to all the good we've accomplished?



## What to take away?

- Members of Congress don't like being the target of these campaigns. What can they do about it?
- Gives you leverage when seeking their support.
- Creates the political will needed to push for the changes we support.
- There's no better way to secure the support of elected officials (HIV/AIDS model)



## This is the Slide Title

Can add a deck here if needed

- [Andrew@slingshotsolutions.net](mailto:Andrew@slingshotsolutions.net)
- Hey, I just met you...and this is crazy...but...  
here's my number...so call me maybe!  
(571) 426-0297
- and follow me on Twitter! @SlingshotDC or  
on Facebook, "Slingshot Solutions."
- (See? Bombarded with messages and social  
media!)



# THANK YOU!

(I'm off to the Angels game!)