

## Summary of Testimony of Sean Clarkin, The Partnership at Drugfree.org

The abuse of prescription medications – legal substances of tremendous benefit if used appropriately – is the single most troubling phenomenon on today’s drug landscape. According to the 2010 Partnership Attitude Tracking Study sponsored by the MetLife Foundation, teen abuse of Rx medicines continues to be an area of major concern, with abuse rates holding steady over the past five years at levels that should be worrisome to parents. The data found one in four teens (25 percent) reported taking a prescription drug not prescribed for them by a doctor at least once in their lives, and more than one in five teens (23 percent) used a prescription pain reliever not prescribed for them by a doctor.

Why have we as a nation not been able to reduce this risky behavior? There are several reasons:

**The first is availability.** These substances are readily available to teens -- in their own medicine cabinets and the medicine cabinets of friends -- and very often they are available for free.

**Another key factor is the relatively low perceived risk of abusing prescription drugs.**

Partnership research shows that less than half of teens see “great risk” in trying prescription pain relievers such as Vicodin or Oxycontin that a doctor did not prescribe for them.

**A third aspect is the set of reasons why young people are abusing prescription medications.**

Research conducted by the Partnership in 2007 suggests a wider range of motivations for young people’s abuse of prescription drugs, including an emerging set of “life management” or “regulation” objectives.

**Fourth is the fact that parents** – who are usually our most valuable ally in preventing teen drug use – are generally ill equipped to deal with teens’ abuse of prescription drug use, a behavior that was probably not on their radar when they were teenagers.

**Finally,** the reason why we have not yet been able to reduce teen abuse of prescription medications is that our efforts as a nation have been inadequate – at least to date.

If our nation is going to reduce teen abuse of prescription medication we need to step up efforts dramatically. We need a sustained, multi-year effort funded by the pharmaceutical industry, the generic drug manufacturers and other key stakeholders to (1) support a major, independent paid media campaign alerting consumers to the risks of abusing medicine and the importance of safeguarding and safely disposing of medicine. This effort might include tagging the pharmaceutical industry’s large inventory of direct-to-consumer advertising and pointing viewers towards an objective and comprehensive online prevention resource. (2) educate and enlist prescribers, pharmacists and other healthcare professionals about addiction and pain management; (3) coordinate outreach by employees of all the relevant stakeholder companies and other interested parties to increase awareness about Rx abuse and disposal at the local level; (4) educate policymakers at the local, state and federal level about this problem so that we can promote policies that will help reduce both the supply of and demand for prescription drugs to abuse, and (5) implement an evaluation tool that will measure and hold the program accountable.

Testimony of Sean Clarkin, Executive Vice President

The Partnership at Drugfree.org

*“Warning: The Growing Danger of Prescription Drug Diversion”*

Subcommittee on Commerce, Manufacturing and Trade

United States House of Representatives

April 14, 2011

Chairman Bono-Mack, Ranking Member Butterfield, Members of the Subcommittee, thank you for inviting me to testify about the problem about prescription drug abuse and the diversion of prescription medications.

## **Overview**

The Partnership at Drugfree.org is a nonprofit organization that helps parents prevent, intervene in and find treatment for drug and alcohol abuse by their children. My testimony today will be focused on teens and young adults since that population is the focus of the Partnership's work.

When the Partnership addresses prescription drug abuse, we also consider over-the-counter cough and cold remedies which some teens use to get high. The abuse of prescription medications and over-the-counter remedies are both examples of beneficial medications being used in risky, unhealthy ways. Because today's hearing is focused on the diversion of prescription drugs, I will restrict my remarks to the non-medical use of Rx medications.

The abuse of prescription medications – legal substances of tremendous benefit if used appropriately – is the single most troubling phenomenon on today's drug landscape. The misuse and intentional abuse of a diverse range of prescription medications has become a significant health threat and entrenched consumer behavior in American society.

According to the 2010 Partnership Attitude Tracking Study – or "PATS" study -- sponsored by the MetLife Foundation, teen abuse of Rx medicines continues to be an area of major concern, with abuse rates holding steady at levels that should be worrisome to parents. The data found one in four teens (25 percent) reported taking a prescription drug not prescribed for them by a doctor at least once in their lives, and more than one in five teens (23 percent) used a prescription pain reliever not prescribed for them by a doctor.

## **Contributing Factors to Teen Prescription Drug Abuse**

Why have we as a nation not been able to reduce this risky behavior? There are several reasons:

1. **Access.** These substances are readily available to teens -- in their own medicine cabinets and the medicine cabinets of friends -- and very often they are available for free. The Partnership's data are similar to the findings of the National Survey on Drug Use and Health (NSDUH) which shows that over 70% of prescription drug abusers say that they got those drugs from family or friends. In addition, nearly half (47%) of teens in our PATS survey say that it is easy to get these drugs from parents medicine cabinets and more than a third (38%) say it is available everywhere..

That is why the Partnership worked with Abbott to create "Not In My House," a website to educate parents of teens about the need to monitor their medications, safeguard them and dispose of them properly when no longer needed.

It is also why we strongly supported the Drug Enforcement Administration's first prescription drug "Take Back" day last fall -- where they collected 121 tons of pills from

4,000 locations in 50 states – and why we are supporting their next “Take Back” day on April 30. If we are able to get people to properly dispose of unneeded medications, we can make a significant dent in the supply of prescription medications that are being abused.

The proliferation of “pill mills” in certain areas of the country -- where, for a price, individuals are able to obtain prescriptions for controlled substances without legitimate medical need – is a growing concern. Closing pill mills, having interoperable prescription monitoring programs to curtail doctor shopping, and educating prescribers about both addiction and pain management would likely go a long way towards reducing the supply of these medications in America’s medicine cabinets.

2. **Perception of Risk.** Teens’ perception of the risks associated with abusing prescription drugs is relatively low. Partnership research shows that less than half of teens see “great risk” in trying prescription pain relievers such as Vicodin or Oxycontin that a doctor did not prescribe for them. The University of Michigan’s “Monitoring the Future” survey data going back over thirty years demonstrates that teens’ perception of the risk associated with any substance of abuse, along with perceptions of “social disapproval,” correlates significantly with actual teen abuse of that substance. Low perception of risk, coupled with easy availability, is a recipe for an ongoing problem.
3. **Motivations.** Research conducted by the Partnership in 2007, with support from Abbott, cast new light on the motivations of teens to abuse prescription drugs. We have traditionally thought of teens abusing illegal drugs and alcohol either to “party”, or to “self-medicate” for some serious problem or disorder: adolescent depression, for example.

But our 2007 research, like the research done among college students by Carol Boyd and Sean McCabe at the University of Michigan, suggests a wider range of motivations for young people’s abuse of prescription drugs, including an emerging set of “life management” or “regulation” objectives. Teens appear to be abusing these drugs in a utilitarian way, using stimulants to help them cram for a test or lose weight, pain relievers to escape some of the pressure they feel to perform academically and socially, tranquilizers to wind down at the end of a stressful day. Once these substances have been integrated into teens’ lives and abused as study or relaxation aids, it may become increasingly difficult to persuade teens that these drugs are unnecessary or unsafe when taken without a prescription.

This research also showed that prescription drug abuse is not a “substitute” behavior. That is to say, teens generally do not use prescription medication to get high *instead of* taking another substance. What we have found is that prescription drugs may act as a kind of “bridge” between the use of alcohol and marijuana, which many teens see as relatively benign substances, and harder “scarier” drugs such as cocaine.

4. **Parents.** Parents – who are usually our most valuable ally in preventing teen drug use – are generally ill equipped to deal with teens’ abuse of prescription drug use, a behavior that was probably not on their radar when they were teenagers. They find it hard to understand the scale and purposefulness with which today’s teens are abusing medications, and it’s not immediately clear to them that the prime source of supply for abusable prescription drugs is likely to be their own medicine cabinet. Further, many parents themselves are misusing, or perhaps abusing, prescription drugs without having a prescription. In our study with Abbott, 28% of parents said they had used a prescription drug without having a prescription for it, and 8% of parents said they had given their teenaged child an Rx drug that was not prescribed for the teen. Our recent PATS study revealed that 22% of parents said there were situations where it would be OK for a parent to give a teen a prescription drug not prescribed for him or her.

Our 2010 PATS study also showed that teens continue to report that their parents do not talk to them about the risks of prescription drugs at the same levels of other substances of abuse. Fewer than one in four teens reported that a parent had discussed the risks of taking a prescription pain reliever (23%) or any prescription drug (22%) without a doctor’s prescription. Contrast that to the relatively high number of teens who say their parents have discussed the risks of alcohol (81%) and marijuana (77%).

Much more work needs to be done to motivate parents to discuss the risks of prescription drug abuse with their teens. Partnership research through the years has demonstrated that kids who learn a lot at home about the risks of abusing drugs are half as likely to use. Encouraging these conversations and ongoing parental monitoring is key to reducing teen Rx abuse.

5. **Need to Do More.** Finally, the reason why we have not yet been able to reduce teen abuse of prescription medications is that our efforts as a nation have been inadequate, at least to date. There has simply not been sufficient public attention or resources devoted to this threat.

The backdrop to all of this is that the national drug prevention infrastructure has been eroding for the past few years as the budget for the National Youth Anti-Drug Media Campaign has shrunk significantly, the Safe and Drug Free Schools and Communities State Grant program has been eliminated, and changes have been proposed to the state prevention and treatment block grant that could put prevention funding in jeopardy. With dwindling resources, it is impossible for government alone to mount the kind of effort that is needed to turn the tide on this problem.

Director Kerlikowske, Administrator Leonhart, Commissioner Hamburg, Director Volkow and others have done an excellent job of calling attention to this problem, both within government and among the public. Director Kerlikowske identified Rx abuse as one of his top three priorities and he has been working with all of the national drug control agencies to develop a targeted strategy to address the problem; the DEA prescription

drug “Take Back” days have begun the essential task of educating the public that old unneeded medication must not remain in the medicine cabinet; the FDA is putting the spotlight on this issue as part of the Safe Use Initiative; and NIDA is engaged in targeted research, education and outreach that will be critical to curbing this behavior. The Community Anti-Drug Coalitions of America and the Treatment Research Institute are also doing important work in this area and should be commended for their efforts.

We know that when there is a well-funded effort to educate parents about the dangers of Rx abuse, we can increase awareness. In the first half of 2008 ONDCP’s National Youth Anti-Drug Media Campaign devoted \$14 million (a \$28 million value with the media match) to a parent-targeted campaign aimed at raising awareness about the risks of Rx abuse and motivating parents to take action. The campaign, which ran from February to July 2008, yielded significant and impressive results: parent perceptions about the prevalence of teen Rx abuse increased 10 percent and belief that it is a serious problem among teens jumped 17 percent. The likelihood that parents would take action also changed significantly: the number of parents who said that they would safeguard drugs at home increased 13%; monitor prescription medications and control access increased 12%; properly dispose of medications went up by 9%; and set clear rules about all drugs, including not sharing medications was up by 6%.

This shows that a major public education campaign can help to turn the tide on this entrenched behavior. The ONDCP Media Campaign’s funding is in jeopardy and may even be eliminated in the coming year so we cannot assume that it will be able to help deliver this message. The private sector – pharmaceutical companies, generic drug manufacturers, wholesalers, distributors, retailers, etc – will need to help finance a campaign of the magnitude necessary to change the attitudes that underlie the behavior of nonmedical use of prescription medicine.

A number of individual pharmaceutical companies have stepped forward to work with the Partnership and other national organizations. Purdue Pharma funded some of our initial research to get our arms around this problem in 2004. They have also helped to fund a number of the parent intervention and treatment resources at drugfree.org as well as some of our community education efforts. Abbott underwrote the in-depth consumer research conducted in 2007 to assess the attitudes and beliefs underlying the behavior of prescription drug abuse. We also worked with them to create “Not In My House,” a website designed to educate parents of teens to monitor their medications, secure them properly and properly dispose of them when no longer needed.

While we are grateful for the efforts of our partner companies, if our nation is going to reduce teen abuse of prescription medication we need to step up efforts dramatically. We need a sustained, multi-year effort funded by the pharmaceutical industry, the generic drug manufacturers and other key stakeholders to:

- (1) support a major, independent paid media campaign alerting consumers to the risks of abusing medicine and the importance of safeguarding and safely disposing of medicine. This effort might include tagging the pharmaceutical industry’s large inventory of direct-to-

consumer advertising and pointing viewers towards an objective and comprehensive online prevention resource;

- (2) educate and enlist prescribers, pharmacists and other healthcare professionals about addiction and pain management;
- (3) coordinate outreach by employees of all the relevant stakeholder companies and other interested parties to increase awareness about Rx abuse and disposal at the local level;
- (4) educate policymakers at the local, state and federal level about this problem so that we can promote policies that will help reduce both the supply of and demand for prescription drugs to abuse; and
- (5) implement an evaluation tool that will measure and hold the program accountable.

## **Conclusion**

We believe that the abuse of prescription medications – legal substances of great benefit when used properly – is the single most troubling phenomenon on today’s drug abuse landscape. We remain committed to a long-term effort to educate the public on the risks of intentional medicine abuse and to reducing the level of abuse in society. We have laid important groundwork in this area but feel that there needs to be a major paid media and public relations campaign over the next five years in order to change the relevant attitudes and behavior of not only teens but also parents, policy makers, and prescribers. This effort must be focused not only on raising awareness about the risks of taking medications without a doctor’s prescription but it must also be a call to action to all adults to take responsibility for what is in their medicine cabinets and dispose of unneeded prescriptions in a timely manner.

This education campaign needs to be accompanied by coordinated community education efforts and public policy changes. And, of course, it should be rigorously evaluated.

The misuse and intentional abuse of a diverse range of prescription medications has become a significant health threat and entrenched consumer behavior in American society.

We appreciate the time and attention that the Subcommittee is giving to raising awareness and looking for ways to reduce the abuse of prescription drugs in our country. The Partnership at Drugfree.org stands ready to work with the Subcommittee on this and other substance abuse matters.

## **About The Partnership at Drugfree.org**

The Partnership at Drugfree.org is a nonprofit organization that helps parents prevent, intervene in and find treatment for drug and alcohol use by their children.

By bringing together renowned scientists, parent experts and communications professionals, we not only translate current research on teen behavior, addiction and treatment into easy to understand, actionable resources at drugfree.org, but we offer hope and help to the parents of the 11 million teens and young adults who need help with drugs and alcohol.

Our website allows parents to connect with each other, tap into expert advice and find support in their role as hero to their kids.

And, across the nation via our community education programs, we have trained more than 1,500 professionals who are working daily with local leaders, concerned citizens, parents and teens — in neighborhoods, schools, civic organizations, community centers and churches — to deliver research-based programs designed to help communities prevent teen drug and alcohol abuse.