**STATE OF IOWA**

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U.S. Senate Caucus on International Narcotics Control Field Hearing

Fighting for Iowans: Examining Drug Control, Prevention, and Treatment Efforts

Cedar Rapids, Iowa – October 14, 2021

Dear Chairman Grassley,

Thank you for the invitation to appear before you. Governor Reynolds shares your passion on these matters, and regrets she cannot be here due to other commitments. We appreciate your active leadership on drug issues at the federal level.

As Director of the Governor’s Office of Drug Control Policy, I’m fortunate to work alongside numerous dedicated professionals and community leaders throughout the State, whose collective efforts improve the quality of life for Iowans and endure, even in a pandemic.

Today, I’ll outline some areas of drug-related challenge, achievement and need in Iowa.

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Based on recent state and federal data, here’s a status summary.

* Iowa ranks relatively low in most forms of current illicit drug use, and 6th lowest in total current illicit drug use. However, Iowans smoke, binge drink and use methamphetamine at rates above the national average. And, polydrug use is rising. (Sources: National Survey on Drug Use and Health and Iowa Department of Public Health.)
* Iowa ranks 11th lowest in the number of drug overdose deaths. But, we saw a nearly 20% increase to 419 last year, led by opioids and stimulants (e.g., pain medicines, heroin, fentanyl and meth). Alcohol-related deaths rose 27% last year, exceeding drug overdose deaths to claim a record 760 Iowa lives. (Sources: Centers for Disease Control and Prevention, and Iowa Department of Public Health.)
* The volume and purity of meth smuggled into Iowa, and the number of Iowans seeking treatment for meth use disorder are near all-time highs, even as meth labs have tumbled to their lowest level in over 20 years. (Sources: Iowa Departments of Public Safety and Public Health.)
* Over the last five years, Iowa’s crime lab reports a 12-fold increase in fentanyl seizure *cases* (312 in 2020 vs. 26 in 2016), and a 625-fold increase in the *total weight* of analyzed substances containing some amount of fentanyl (9,373 grams vs. 15 grams). In addition, counterfeit pills laced with fentanyl have been seized every month so far this year. (The quantity of seized meth analyzed by the crime lab, after declining the last two years, is up this year and on pace to approach the 2018 high-water mark of over 230,000 grams.) Through the first half of 2021, fentanyl was implicated in 87% of Iowa’s opioid overdose deaths. (Sources: Iowa Departments of Public Safety and Public Health.)
* Substance use rates among teens have declined or remained relatively low for several years for all but e-cigarettes or vaping. Alcohol, nicotine and marijuana are the substances most used by Iowa youth. (Source: Iowa Youth Survey.)

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Amid the mix of progress and challenge is what I call the 4-Ps of Change: Products, Potencies, Policies and Pace.

**(Products)**

An increasing number of “gray area” products and combinations are being marketed and consumed before we know much about them. Recent examples include: kratom, synthetic cannabinoids and cathinones; and synthetic opioids (e.g., illicit fentanyl, analogs and combinations).

**(Potency)**

Potencies are rising among a large number of potentially addictive substances. From alcohol in craft beers, to nicotine for vaping, to marijuana edibles, to meth, and illicit opioids like fentanyl…many products are increasing in strength.

**(Policy)**

Drug policy is another area of change. It’s also an area where research and evaluation often seem to be in short supply for informing decisions on how best to meet underserved needs, answer health and safety questions, ensure fairness for all, and avoid unintended consequences.

**(Pace)**

A common theme when discussing the evolution of drugs is the quickening speed with which change happens…and the challenges we face to respond in a timely fashion.

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Senator, I support congressional proposals you’ve put forward to address some of these issues, including promoting research and keeping pace with moving targets such as synthetic drugs.

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Alongside challenges, you’ll find a lot of progress across our state. The list of difference-makers is long, and while time doesn’t permit me to name every worthy partner or initiative, they span evidence-based and innovative approaches in the drug prevention, intervention, treatment, recovery and enforcement space.

Iowa’s collective response is guided by a State Drug Control Strategy. Updated annually, this blueprint for action identifies emerging needs and priorities, and promotes coordination of effort.

(Examples of Iowa initiatives include: Expanded use of naloxone, medication assisted treatment and prescription drug management to address the opioid epidemic; increased utilization of telehealth, access centers and drug courts to improve access to treatment services; 911 co-response partnerships and law enforcement-initiated pre-arrest diversion to treatment; community coalitions; overdose outreach and data sharing; protections for drug-endangered children; mentoring and digital literacy for youth; and others too numerous to mention.)

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In closing, allow me to briefly share what I see as five areas of need.

1. We need help to **slow the flow** of large amounts of illicit drugs originating in foreign lands (e.g., Mexico or Asia) before they are shipped, driven or otherwise smuggled into Iowa. State and community responses are essential, but their full potential won’t be realized until we reduce international drug supplies that fuel addiction and overdose.
2. Treatment and enforcement are a must, but so is **prevention**. Preventing youth alcohol, tobacco and marijuana use today can also serve to prevent meth, opioid and other drug use—and potentially overdose—tomorrow. (Note: October 23is Prescription Drug Take Back Day to dispose of unused medicines, and October 23-31is Red Ribbon Week to promote healthy youth and prevent substance abuse.)
3. Increasing polydrug use underscores the importance of a holistic and **flexible** approach. The move federally to expand opioid funding streams to also apply to stimulants is a positive one.
4. To fill a void with timely public awareness and monitoring of newer unregulated substances of interest with an early indication of abuse potential, a **precautionary** “yellow flag” alert mechanism could be helpful.
5. **Research** must be elevated, expedited and more robust to develop thoughtful solutions, answer important questions, and inform timely policy decisions.

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Senator, I sincerely appreciate this opportunity, and your steadfast leadership on issues important to the health and safety of Iowans.

Respectfully,



Dale R. Woolery,

Director