
Finding Common Ground: Deliberative Solutions to the Opioid Crisis in Ohio



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Executive Summary

What do Ohioans think we should do about the opioid epidemic? Despite widespread acknowledgement that opioid addiction and abuse are serious issues facing the United States and Ohio in particular, there has been little systematic inquiry into how the public thinks we should address the problem. Just as importantly, simply asking opinions on a poll is likely to produce uninformative responses, since few in the public understand the benefits and tradeoffs of different policies. This report addresses these problems.

Over the course of April 2018, our team created and moderated over 60 online forums in which groups of up to 12 Ohioans discussed a set of policy proposals designed to address the opioid epidemic. Participants were recruited for deliberation by a survey company via a pre-survey and were invited to take a post-survey following their forum. There was at least one person from more than 95% of Ohio counties that completed both surveys and participated in an online discussion. The policy actions participants discussed were based on a national issue guide compiled by the Kettering Foundation, which was then tailored to Ohio based on consultation with relevant experts and stakeholders, including: public health scholars, law enforcement, health professionals, and legislative staff.¹ Up to a month before each forum and directly after each forum, participants completed surveys measuring their factual knowledge on the opioid crisis, political partisanship, and support for each policy proposal. Using these surveys allowed us to compare participants' knowledge and views on the epidemic before and after they discussed this issue with other citizens. These are the central findings of this research:

- **Some policies are polarizing, but many aren't.** The policy with the highest post-forum prioritization, establishing recovery networks, had similar levels of prioritization among Democrats, Republicans, and Independents. Other actions that were relatively popular, such as implementing medical marijuana and sharply increasing our investment in law enforcement, were given significantly higher post-forum priority among Democrats and Republicans, respectively.
- **People think engaging in online discussions with other Ohioans is beneficial and important, and reported being more likely to take action on this issue after the session.** A vast majority of study participants found the session to be helpful and informative, felt like they learned a lot from their session, thought it would be useful for their state legislators to see the results of their session, and agreed that discussions like this are important in our democracy. Many participants also reported being more likely to contact their representatives about the opioid crisis, volunteer for organizations tackling the problem, attempt to persuade others of their position on the opioid crisis, and vote for candidates who share their favored opioid crisis actions in their platforms as a result of participating in the forum.
- **People don't know much factual knowledge about the opioid crisis, but deliberation increases knowledge.** The average participant who completed both survey waves only answered

¹ The full text of the issue guide is provided as an Appendix to this document.

one of the four knowledge questions correctly in the pre-survey. However, average levels of opioid knowledge increased by half a point in the post-survey, a statistically significant increase.

What's the Issue?

According to data from the Center for Disease Control, more than 42,000 Americans died from opioid overdoses in 2016, and provisional estimates from 2017 indicate that there were over 49,000 opioid deaths nationwide last year, representing a 16% increase. The sheer numbers of people dying from the opioid epidemic, a seemingly unstoppable upward trend in overdose deaths, and the secondary effects of addiction and death on communities has led many experts to label it a public health crisis. While this crisis impacts nearly every community in the United States, it has been felt more acutely in some parts of the country. Ohio is often listed as one of the states that has been hit hardest by the crisis, with good reason: In 2016, more people died in Ohio from opioid overdoses than any other state (3,613), and Ohio had the third highest age-adjusted rate of overdose deaths in the country -- behind only West Virginia and New Hampshire.

While there is widespread agreement among government officials and the mass public that the opioid crisis is a serious problem, there has been little systematic evidence about ordinary citizens' views on possible solutions. This presents a problem for all stakeholders because policy and other efforts to mitigate the crisis will be ineffectual without buy-in from the public. Thus, our team gathered this important data in Ohio through a study conducted in the spring of 2018.

Background

Participants were recruited into the study through the research firm Naviscent via an email inviting people to take a survey about the opioid epidemic. On this survey, respondents were asked if they would be interested in discussing the issue in an online group. Interested participants were then scheduled and invited to an online forum within a month after completing this survey. The Kettering Foundation's Common Ground for Action platform was used to conduct these forums.

In each forum, participants began by sharing their "personal stories" with other participants, explaining how their experiences with the opioid epidemic shaped their policy views on the issue. Next, participants discussed the set of policy proposals in the issue guide with each other by typing into a text interface. Discussion of policy proposals was divided into four sections, which represented general approaches towards action on the opioid epidemic. At the end of each forum, participants reflected on their common ground, or the proposals that a vast majority of people supported in their session.

Upon completion of the forum, participants completed a post-survey. Both the survey taken prior to discussion and the post-survey contained items measuring respondents' factual knowledge on the opioid crisis, partisanship, and their support for each policy proposal. Our measure of support for each policy proposal came in the form of "budget" questions that asked respondents to allocate a finite amount of

points to each policy proposal out of 120 total points, based on how much they prioritized taking each action.

Why Deliberation?

Recruiting ordinary people to spend time discussing the opioid epidemic with their peers takes a lot of time, is costly, and is logistically challenging. So why do it? Why not just send out a survey? First, past research has shown that deliberation produces benefits for citizens: It increases their knowledge on the issue they are discussing as well as social trust, and leads to greater familiarity with the reasons why people hold the views that they do. Second, lawmakers should care about people's opinion post-discussion more so than opinion expressed on surveys because citizens' attitudes after discussing the issue with others is likely to be more crystallized and robust to further changes. Throughout discussion, other participants communicate competing considerations, alternative viewpoints, and make arguments on policies which may change people's minds. Thus, looking at opinion post-discussion is more akin to opinion after a policy is put in place than regular survey opinion. Moreover, by tracing changes in people's views from before and after the forum, we can get a sense in how people might change their minds if a policy became salient in public discourse.

Why the Budget Question?

Why is our measure of policy support in the form of a budget question which asks respondents to allocate points from a lump-sum total into each of 12 potential policies? Measuring policy support in this way forces people to make choices between alternative policies -- putting many points into one policy means that you are taking away points from another policy. This measure thus combines the general support (yes/no) people have towards each proposal with the priority they attach to getting the proposal enacted. On a topic like opioids, in which almost everyone agrees on the scope of the problem, this prevents people from articulating a "throw-everything-at-the-wall" approach and forces them to consider which policies are most important to them.

What We Learned

There are three major findings from this research: First, though support for many policies was polarized along party lines post-forum, several policies got support from across the political spectrum. Second, participants not only enjoyed the process of deliberating about solutions to the opioid epidemic, but felt like these discussions were important and indicated they were more likely to take action as a result of the forum. Third, participants gained knowledge on the issue by discussing it with other Ohioans.

Establishing Recovery Networks Had Popular Appeal Across the Political Spectrum

As might be expected in the current political climate, several policies received differential levels of prioritization from participants who identified with different political parties. For example, Democrats allocated more of their political capital to requiring health insurance companies to cover opioid-related treatment and legalizing medical marijuana than Republicans, on average; Republicans allocated more of their political capital to increasing drug enforcement and giving judges discretion in sentencing, on

average.

However, several policies had similar levels of prioritization across the political spectrum. Support for decriminalizing opioid use had low levels of support among Democrats, Republicans, and Independents, while diverting all those who are arrested for opioid use from prisons to mandatory treatment centers received middling levels of support among all partisan groups. However, most importantly, short-term interventions designed to prevent addiction and the creation of recovery networks integrating people in recovery into their communities were widely popular policies among all partisan groups, on average. This can be seen in *Table 1*, which shows post-survey budget allocation for each partisan group.

Furthermore, not only were recovery networks given high priority across party lines in the post-forum survey, there is evidence that the discussion *increased* participants' support for this policy relative to their pre-forum attitudes. *Table 2* shows the pre/post difference in Democrats', Republicans', and Independents' average priority allocations. While most policies saw only slight average differences prioritization between the pre- and post-survey, recovery networks saw increased average prioritization among Democrats, Republicans, and (especially) Independents. Average prioritization decreased for drug courts and the health insurance mandate on a cross-partisan basis following deliberation.

This is particularly noteworthy because we included this policy in deliberations because public health experts, members of the law enforcement community, and ex-addicts had emphasized its importance at solving this crisis, but it has not yet gotten much attention from political institutions. All of this suggests that supporting the creation of recovery networks may be an especially fruitful path forward to combating the opioid crisis, as it has widespread support among experts and among Republican, Democratic, and Independent citizens.

People Thought the Process was Beneficial

Using several measures, our data suggest that participants not only enjoyed the process of deliberating about this important public health crisis with other Ohioans, but felt like the session was valuable and important. Nearly every respondent in the post-survey either agreed or strongly agreed with the statements “I found this session to be helpful and informative” (93%) and “Discussions with my fellow citizens on topics like this are important in our democracy (99%). A vast majority of respondents (82%) agreed or strongly agreed that they felt like they learned a lot from participating in the session, and 97% agreed or strongly agreed that it would be useful for their state legislators to see the results of their session. In short, participants felt that the deliberative forums were useful, informative, and worth sharing with their elected officials.

Additionally, participants in the deliberative forums reported that they would be more likely to take specific actions with respect to the opioid crisis after participating. 42% reported that they would be more likely to contact their elected representatives about the opioid crisis, 45% indicated that they would be more likely to volunteer for an organization doing work to address the opioid crisis, 50% said that they would be more likely to try and persuade others of their position on the opioid crisis, and 85% said they would be more likely to vote for candidates who included their favored opioid crisis actions in

their campaign platforms. These findings indicate that discussing the opioid crisis with their peers increased participants' interest in and confidence discussing the issue. Furthermore, participants indicated that they were more likely to take meaningful political actions related to the opioid crisis after having participated in the forums.

Table 1: Policy Priorities as Measured by Means on Budget Allocation Item on Post-survey

Policy actions	Democrats	Independents	Republicans
Create recovery networks that focus on integrating people in recovery into their communities, including: faith-based, family-based, and twelve step programs.	14.1	15.7	14.9
Require that all treatments be fully covered by government-sponsored health insurance and private health insurance plans.	10	7.4	5.4
Divert all who are arrested for opioid use from prisons to mandatory treatment centers through drug courts.	9.5	10.1	10
Sharply increase law enforcement action and sentencing for drug dealing and distributing.	7.4	12	14.2
With consultation from law enforcement and prosecutors, give judges several options in the sentencing for misdemeanor drug possession.	8.9	9.5	11.6
Use the potential punishment for possessing illegal opiates to incentivize the completion of treatment programs and cooperation with police.	5.8	7.6	9.5
Set up sterile needle exchange programs where people who are addicted can inject drugs safely.	6.9	4.8	3.8
Decriminalize the use of illegal opioids entirely for anyone who voluntarily seeks treatment.	7.5	7.7	6.9
Equip all police with naloxone, an overdose treatment drug, and make it available cheaply and without prescription.	10.6	8.7	8.3
Heavily regulate the pharmaceutical industry to limit the excess production and advertisement of pain medication.	12.8	15.9	11.3
Legalize the prescription of marijuana for medical pain management as a substitute for addictive painkillers.	14.7	8.8	11.8
Increase investment in short-term intervention programs to prevent long-term addiction.	12.7	11.9	12.8

Table 2: Change in Policy Priorities as Measured by Means on Budget Allocation Item (Post – Pre)

Policy actions	Democrats	Independents	Republicans
Create recovery networks that focus on integrating people in recovery into their communities, including: faith-based, family-based, and twelve step programs.	1.2	4.1	1.1
Require that all treatments be fully covered by government-sponsored health insurance and private health insurance plans.	-2.4	-1.9	-2.4
Divert all who are arrested for opioid use from prisons to mandatory treatment centers through drug courts.	-4.1	-3.5	-3.5
Sharply increase law enforcement action and sentencing for drug dealing and distributing.	-.1	.7	-1.7
With consultation from law enforcement and prosecutors, give judges several options in the sentencing for misdemeanor drug possession.	1.1	1.1	2
Use the potential punishment for possessing illegal opiates to incentivize the completion of treatment programs and cooperation with police.	.8	1.8	.8
Set up sterile needle exchange programs where people who are addicted can inject drugs safely.	.5	.8	.15
Decriminalize the use of illegal opioids entirely for anyone who voluntarily seeks treatment.	-.8	-1.4	-.6
Equip all police with naloxone, an overdose treatment drug, and make it available cheaply and without prescription.	.6	.3	1.1
Heavily regulate the pharmaceutical industry to limit the excess production and advertisement of pain medication.	-.7	-1.3	-.3
Legalize the prescription of marijuana for medical pain management as a substitute for addictive painkillers.	2.3	-2.6	1.5
Increase investment in short-term intervention programs to prevent long-term addiction.	1.2	1.9	1.5

Deliberation Increases Knowledge

Prior academic work has found that interpersonal deliberation increases the knowledge people have about the issues they discuss, so we expected participants in our study to be more knowledgeable about the opioid epidemic after the study than they were before. And indeed, this is what we found. On both the pre-survey and the post-survey, we asked participants four factual knowledge questions about the opioid epidemic. Before the forum, participants answered almost exactly 1 out of 4 questions correctly, on average (1.06), but this increased to about 1.5 (1.45) after deliberation. Moreover, these knowledge gains came from a sizeable proportion of the sample. 47% of our sample answered more knowledge questions correctly after deliberation than they did beforehand, compared to 38% that answered the same number of questions correctly and 19% that answered more questions correctly before deliberating.

This knowledge gain represents a statistically significant increase. But what caused this knowledge gain? There are three potential mechanisms at work. First, before each session, participants were encouraged to read an issue guide that contained information about the opioid epidemic and the potential policies that they would be discussing within the session. Second, it could be that when people know they are going to be discussing an issue with others, they do some research ahead of discussion to be more knowledgeable. Third, it could be that information presented within the deliberation itself made people gain knowledge on the issue.

Going Forward

The results of this work suggest several paths that should be pursued by policy-makers. First, recovery networks are popular, regardless of political ideologies, and become more popular after people learn more about them. This is an area of common ground that ought to receive broad support. While it is not a complete solution to the problem, it may prove an easy place to start.

Second, these discussion sessions are seen as valuable by citizens and improve their knowledge of the issues. This suggests that a broader popular discussion of the opioid problem would be both appreciated and fruitful among citizens. As we moderated these sessions, it became clear that the average citizen had a lot to offer to this discussion. They often provided useful comments about the relationship between policies and how policy-makers could address their concerns. An effort should be made to incorporate these voices more directly into the policy-making process.

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