

Massive Mobilization Needed To Combat Meth Epidemic

By Susan Gaertner

Meth has emerged as Public Enemy No. 1 in the minds of most law enforcement officials, and it's no wonder.

Meth abuse has fueled horrible, violent crimes, and the number of meth offenders in our state prisons has more than doubled in two years. This incredibly destructive drug also has taken a terrible toll in abused and neglected children. Approximately one-fourth of all child protection cases in Ramsey County involve a parent using meth.

The 2005 Minnesota Legislature took significant steps to combat this epidemic. One very important measure put Sudafed and other pseudoephedrine medications (an essential ingredient for meth) behind the pharmacy counter. Based on the results of similar legislation in other states, we can expect the number of meth labs in our state to diminish.

But shutting down homegrown meth labs will not eradicate meth. Even before we put Sudafed behind the counter, 80 percent of the meth in Minnesota came from drug cartels outside the state.

Meth use in Oklahoma, the first state to restrict pseudoephedrine sales, has not declined. The addiction is still being fed by supply lines from Mexico, according to the Oklahoma Bureau of Narcotics. We can expect the same dilemma in Minnesota.

So, where do we go from here? The solution is simple enough, but it's going to require enormous political will. We, as a community, a state and a country, need to mount a massive offensive against meth. We need to mobilize on three fronts -- education, treatment and blocking the supply of meth ingredients at national and international levels.

Education means an all-out campaign to inform the public, and young people, in particular, about the devastating effects of meth addiction. It means before-and-after pictures of skeletal-looking, sunken-eyed meth addicts and graphic images of meth-fried brains. I show these pictures whenever I speak to students about meth, and believe me, it gets their attention.

As one young recovering addict said, "If I had know what meth does to you, I never would've tried it."

Hawaii, with perhaps the worst meth problem in the country, is spending \$14.7 million in public and private funds for a drug prevention and education effort over the next two years. Minnesota's meth legislation allocated no money for education. We need to make education a priority before the problem gets worse.

Investing in treatment of meth addicts is another essential strategy. We can't just keep filling our jails with addicts without trying to end the cycle of addiction. Meth addiction can be treated with good results, but it takes time and money.

A successful meth treatment program in Dodge, Fillmore and Olmsted counties costs about \$6,500 per addict. At this rate, treatment for 1,000 offenders is a \$6.5 million investment. But that's what it is -- an investment -- because prison for those same 1,000 offenders will cost \$22 million a year -- over three times as much as treatment.

Education and treatment are keys to stopping demand, and we have the power to act on these strategies at the local and state level. A third strategy, interdiction -- halting the flow of meth ingredients -- requires a major commitment by the federal government, working with other countries.

Enormous amounts of meth are fed into Minnesota from superlabs, primarily in Mexico. These labs can't operate without huge supplies of ephedrine or pseudoephedrine -- synthetic chemicals that are produced by only nine companies in the world, in four countries -- Germany, the Czech Republic, China and India.

Meth production is completely reliant upon the diversion of these chemicals from these nine companies. When the chemicals are scarce, so is meth and its accompanying devastation, according to compelling research by reporter Steve Suo of *The Oregonian* newspaper in Portland. But the federal government hasn't shown much resolve on this issue.

Each year, the federal Drug Enforcement Administration spends \$700 million destroying the plants that produce cocaine in South America. By contrast, only \$20 million is spent to track the flow of ephedrine and pseudoephedrine, Suo reports. The agency employs 45 times as many people to apprehend drug dealers as to prevent diversion of meth ingredients, he says.

The federal government must reprioritize where meth falls on the agenda. It comes down to political will -- lots of it. Pharmaceutical lobbyists in our nation's capital outnumber members of Congress. But we, as concerned citizens, far outnumber the lobbyists. Together, we must create the political will to acknowledge that the meth epidemic impacts us all and must be stopped.

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