

Episode 243: Prison Cell or Treatment Center?

Lizzy: Hi, I'm Lizzy Ghedi-Ehrlich

Lisa: And I'm Lisa Hernandez

Lizzy: And we're your host for Scholar Strategy Network's No Jargon. Each month we'll discuss an American policy problem with one of the nation's top researchers without using jargon, and this month we're talking about drug policy reform, specifically in the state of Maine.

Lisa: Well, is the war on drugs still happening, Lizzy? How is that going? Did you talk about that?

Lizzy: Yes. All appearances seem to say that yep, that war is still on. Um, but of course for those who don't know, that's the term used to describe the United States's overall, last few decades of policy towards drug use, substance use, and it mostly involves criminalization. And different states have interpreted that in different ways, including the state of Maine, and now a few decades into it, I think a lot of researchers and community members are feeling very strongly that it's not working very well if your goal is to reduce drug abuse and death.

Lisa: I don't know if excited is the right word, but I am interested in noticing this sort of change and the stigmatizing portrayal of people who use drugs and, seeing how people are viewing it less as an individual or a criminal issue, and more as a overall health issue and how that maybe will translate to policy.

Lizzy: Yeah, that definitely has been a change that I think a lot of people can attest to. I mean, part of it has to just be the prevalence of drug use and how it affects people, how it affects families and communities. The more that happens to everyone, the harder it is to act like this doesn't touch you, it doesn't touch the people you care about.

Criminalization really got brought home for lots of folks, and we're gonna have to see what that means for the state of Maine, which lots of people probably don't think about when they think about the states, but we're talking about a really big place with really rural populations. And yes, they're part of New England, but uh, they're really far up there and a really interesting kind of policy landscape.

So I'm interested to learn what researchers have to say and what the folks in Maine have to say, uh, which is actually the subject of the research of the person we're talking to today. It's gonna be longtime SSN member Rob Glover, he's an associate professor of Honors and Political Science at the University of Maine.

Professor Glover's Research focuses generally on political engagement, democratic theory, and public policy, uh, with specialties in immigration and drug policy. Like today's topic. Currently, he's working on a project looking at determinants of public attitudes towards drug policy reform in Maine. Here's our conversation.

Lizzy: Rob. Thanks for joining us.

Rob: Thanks for having me. Happy to be here.

Lizzy: Yeah, so exciting to talk to an old friend, someone who's been around since really the beginning of SSN.

Rob: Yeah. OG SSN member here.

Lizzy: That's right. And really what comes out for me in your work is that, you know, you do all these things about civic engagement and about, you know, politics and political science generally with your students. But you're someone who's a real model of what publicly engaged research that relates directly to policy can look like.

So we love showing that, you know, to our members and our listeners. Um, so thanks for joining us. And today of course, we're just picking out one piece of the things that you do. You and a colleague of yours, uh, Karen Sporer, another SSN Maine member, have been pretty busy working on the project I just mentioned, focused on people's attitudes toward drug policy reform.

So before we get into your research, I wanna step back and talk about drug policy in Maine. You know, first of all, I had to look this up myself. What do, what do we mean when we say drug policy? And then looking back at the last several decades, you know, what's been going on in Maine? What has drug policy looked like there? Why are we studying it now?

Rob: Yeah, so drug policy for this project encapsulates a lot. And it could be everything from, what we're doing to the overdose crisis, which our state is experiencing like a lot of places across the country, virtually everywhere. It could be criminal justice reform, it could be providing support for people who are on a path to recovery. So ensuring that they have access to employment and access to the services that they need, or ensuring that they're not going to be discriminated against in terms of housing. So, policy recommendations that we're exploring in this study actually came to us from a coalition of different groups in the state working on these issues and really working with kind of a critical urgency on the overdose crisis and trying to prevent people from dying.

But it encapsulates a lot more than that. And Maine is an interesting state because, in some ways, we harbor some of the same kind of rural conservative attitudes towards radical policy

change. And there's a lot of places across the state where, you know, people think about these sorts of issues through a very criminal justice sort of lens.

But we've traditionally been out in front on some other issues. For instance, marijuana legalization, medical marijuana and eventually, adult recreational use. We're one of the states that we're kind of out in front of that. So it's this weird blend of progressive attitudes in certain areas when it comes to certain substances and thinking differently in other areas and really trying to think with a broad lens about what would we do if we wanted to address these issues in a kind of a holistic way and taking our cues and really drawing on a lot of information from the folks that are engaged in advocacy on these issues.

Lizzy: Yeah. You know, I think people don't think a lot about the size of Maine, the demographics of Maine. You're left out of conversations maybe, and of course this, the opioid crisis, as I think it is, is broadly known, touches everyone, but you're not necessarily first on the list. So thank you for, you know, walking us a little bit through what's going on right now. I think that's good context. And of course to sort of skip ahead a little bit. Spoiler alert, you're not a huge fan of the current drug policies that are in play in the state of Maine, and it sounds like neither are some of the folks in this coalition that have been working together to make some improvements.

Can you give us some detail on what the research has shown about the current policy scape, why it's not working, what harms are involved or going unchecked?

Rob: Sure, yeah. I think there's a general sense, and Maine is certainly not alone in this respect, but there's a general sense that trying to approach this from the lens of criminal justice and solely criminal justice is problematic on a lot of fronts. It's problematic in the attitudes it produces towards people who use substances and stigma. It's problematic in terms of its outcomes. So, putting someone in jail for a low-level drug offense disrupts their life and, and kind of causes, all sorts of issues in other areas. It can lead to them, you know, losing their children. It can lead to them having struggles, getting housing, or finding employment.

And we know, for instance, that a strong community based social network is really important for people who are struggling with substance use and, our criminal justice oriented approach pushes people out of those community supports and actually makes their life more difficult. So there's a general sense I think in lots of different areas that incarceration and criminal charges, especially for people who are struggling on a personal level with substance use, are not getting the job done.

And that the war on drugs has created havoc in a lot of states and communities across the country. But the issue is, that federal change is unlikely. And so a lot of the change that we're going to see is going to happen at the state level. And the people that are doing the policy advocacy work and the people that are working with folks with substance use disorder don't necessarily know what the attitudes are, or what the climate is for policy change across these

different areas. And so our project was an attempt to kind of bring clarity to, where is the general public at on some of these issues, and what sorts of policy reforms would they be supportive of, in an effort to address this issue statewide.

Lizzy: Got it. Let's go ahead and explain the kind of vision that you and Karen had for the research that you're talking about. you know, you conducted and, uh, you know, how did you go about conducting it? What was this actual study?

Rob: Yeah, so my colleague Karen Sporer is a criminologist and she's a qualitative researcher, and so she does a lot of really interesting research in talking to people about their experiences. And in this case, she was talking to people who were involved in various aspects of substance use disorder and the crisis that our state has been facing, just, you know, face to face.

And so she was interviewing people in law enforcement, lawmakers impacted individuals, about their attitudes towards drug policy writ large and how those attitudes have changed and what was the catalyst for change. So that was kind of the qualitative piece of the research. And then we did a statewide survey and we were lucky enough that there's this tremendous network of people doing work across the state on drug policy and benefited from them.

Our research questions and our impulse to do this research were really informed by people working in policy and people providing service and support for people who are suffering from substance use disorder. And there was a coalition, it's called the Coalition for Sensible Drug Policy in Maine and they had put together a pretty impressive report in 2019 that was kind of laying out the issue, the policy issue here in Maine. They then had a series of recommendations and quite a few different policy recommendations. I think there were about 20 in all. And they really kind of wanted information about, where does the general public in Maine stand on these sorts of issues? Things ranging from decriminalization of drugs for personal use to expanding the definition of housing discrimination to include people with substance use disorders, a wide range of policies.

Um, where do—

Lizzy: Lot of different things

Rob: —they stand?

Yeah, I mean, it encapsulates so much. So where do they stand on these different issues?

And so we collected some information in the survey about people's demographics, their party ideology, socioeconomic status, things like that. Just general information that you'd collect in the survey. And then we ask them a series of questions about these different policies. And we also collected some information, just kind of general attitudinal information.

So, you know, people's exposure to, to substance use disorder, for example. And we were kind of trying to measure like stigma and to what extent had people been exposed to substance use disorder? Did they have people in their lives with substance use disorder and what were their overall sentiments?

As well as some measures drawn from social psychology, things like attitudes towards hierarchy which can be a good indicator of where people stand in terms of thinking certain groups within society are inferior to other groups. We also asked some questions about authoritarianism.

And these are interesting because they can be a good metric for whether or not people kind of unquestioningly accept certain roles within society. Like, you know, what the police are saying about substance use as an issue is kind of unquestioningly accepted. So we had this whole range of measures and it was a pretty, sweeping survey that we conducted. And we did this mixed methods research where at the same time that Karen was talking to people really in depth about their experiences with substance use disorder, we were also conducting survey research to get a really broad picture of where in particular Maine voters, people who are voting age, stood on a range of policy issues.

Lizzy: And so of course, you know, conducting qualitative research can be an adventure. You're engaging with real people and their stories, and that can lend a layer of unpredictability sometimes to things, or at least, it can surprise you, right? It can take what maybe your hypothesis was and then when you're out in the field kind of talking to folks, maybe you find things that you weren't expecting.

Did you come across any surprises?

Rob: I mean, I'll be honest about a lot of our impetus to do this research. I mean, obviously we care deeply about the issue and we knew that there was this network of tremendous folks in the state working on this issue. But a lot of the kind of survey research that had been done was in the context of public polls. And they were usually done, at least in part, funded by advocacy groups, and they were producing results, for instance, with regard to things like drug decriminalization. That, we were skeptical of. So for instance, there was a poll done in 2016 that showed, over 60% of Mainers, were essentially saying that the war on drugs has failed in our communities and we need policy alternatives.

And we're thinking about that. We're saying, "Wow, Maine is a really rural state, and there's some pretty significant pockets of conservative sentiment and we just can't imagine a scenario where over 60% of Mainers are supportive of these sorts of policies." And so we kind of leapfrogged the sequencing of the research in such a way that Karen was out there doing field research before we had deployed the survey.

And as she started to talk to people who were kind of unlikely champions for progressive reform in drug policy— so she's out there talking to people in law enforcement and conservative

lawmakers from rural districts— she was saying like “No, there's a, a groundswell of support for really significant change here, and it might be the case that the survey results are going to bear that out.”

And then of course when we ran the survey, our results, which were a little more nuanced in terms of how they asked people, a degree of support as opposed to a simple yes or no, showed that even more than that, support some of these reforms. So, for instance, almost 74% of our survey respondents showed some sort of support for drug decriminalization for personal use.

So below a certain threshold, this obviously won't be people who are engaged in trafficking or sale of drugs, but if somebody's picked up with a minor possession charge, the overwhelming majority of folks did not want to see that person be locked up for that offense which was really surprising. I mean the results surprised us in terms of that we weren't expecting that initially, but once we had started to do some of the interview research, our perspectives changed.

Lizzy: Yeah. Well, that's a big one. Give us the rundown. What did your findings show?

Rob: Yeah. So across the board, pretty much we, we found that there was a general recognition that this sort of criminal justice oriented approach had not worked and was in fact doing more harm than good in a lot of Maine communities. And so the big one that we were interested in was the decriminalization question because there had actually been a piece of policy in the main state legislature a few years back that was a decriminalization question and would do something similar to what just happened in Oregon, where a lot of those resources would be.

Being focused on criminal justice enforcement and incarceration would be shifted to services and getting people access to treatment. And that did better in the legislature than anyone expected. It made it out of committee. It passed the house and it failed in the Senate that it probably would've been vetoed by the governor.

But, we were really interested in that one and we saw overwhelming support. The folks that we surveyed, which was, a sample of Maine voters, and what was also surprising is that when we dug down and we started to look at the characteristics of the people who were supportive, party ID and ideology and whether somebody was in a rural space or a more urban space, those things mattered to an extent.

But for some of these questions, regardless of one's ideology or even their religious affiliation, we had huge majorities of republicans for some of these questions saying that they would support some sort of change to the approach. So decriminalization, access to things like, case management and getting people access to what are called recovery community centers, where usually it's, kind of peer led recovery support for people who are on a pathway away from a substance use disorder or problematic drug use, we saw, quite a bit of support for, what has been a huge issue in our state, which is, the provision of overdose reversal medication, what's called Naloxone or Narcan. Our numbers on overdose in this state are pretty harrowing.

Every year, it's a new record. So in 2021, we had over 600 Mainers die of overdose and we're on track to actually beat that this year. So the overdose crisis is really salient for folks. But we saw overwhelming support for providing access to overdose prevention medication and training people on how to use it regardless of political party or affiliation.

And then, other things, for instance, like, getting people access to medication assisted treatment—so ensuring that they have access to, methadone or some of the other medications that are available to help people transition off of opioids— the support for these sorts of policies and the investment in these policies by the state, like I said, really transcends any sort of social or political grouping.

What we're seeing is the creation of a broad based constituency for reform that doesn't really align with some of the caution we see from policymakers. I've talked to policymakers that are relatively progressive policymakers, but have been hesitant or skeptical on some of these policy shifts, and what they typically say is, "I'm getting there, I understand the need for a shift in how we're approaching this from a policy perspective, but I'm worried that if I take this step and I kind of come out in full throated support of something that seems this radical to my constituents, that, I could pay a heavy price for, for having done this." So there's a caution. I think, at least from our results and what Karen's hearing in her interviews is, perhaps too cautious. I think a lot of Mainers are in a place to think really expansively about what types of policies we need to confront this issue. And I think a lot of folks are basically at a point where they're saying all hands on deck and the approach we have isn't working.

And so, we need to try some new things.

Lizzy: Yeah. How useful to be able to know that, to think of research that says not just, here's the problem, here's some potential solutions, here's an evaluation of this intervention, but really like, here's actually what the people think. Because I think so often in politics we're sort of just playing with ideas about what the people think. And I love research that brings that a little bit closer to something actionable. And of course, you know, it was Karen, your colleague who did the field research talking to people. But were there any stories that stuck out to you? Any anecdotes that you care to share from her interviews?

Rob: Sure. So, the stories I know are secondhand from Karen who was out there doing the hard work, but, I do recall, she was telling me about this lawmaker in a conservative, relatively rural district here in Maine. And, he was talking about his approach for, for instance, for things like harm reduction and recognizing that people are going to use drugs, and we need to figure out ways in which they can do that as safely as possible. And we can try to ensure that if someone is using a substance that's high risk, that we minimize the risk to them. So that would be things like, you know, naloxone, Narcan, overdose prevention, medication, things like that. But for him and for a lot of the interview respondents, what did it was, exposure to somebody who they knew, right?

That could be a community member, that could be a family member, if I recall correctly. In this case, it was a family member who had struggled with substance use. And I think it's for a lot of people and for this individual, it was once he could put a human face on this crisis, it was very hard to stigmatize or assign a certain narrative, and particularly to assign a certain narrative that's rooted in someone's bad decisions or someone's poor judgment or their lack of morals.

I think when we're not exposed to the crisis and we don't know someone. We can attach a kind of a moralizing narrative to this, where we know somebody and we've seen diligent attempts to grapple with, with substance use or to seek recovery, right? And people really struggle on that pathway. It's by no means a linear narrative. It's much harder to cast blame, and it's easier to think about, okay, what can we do to support that person and potentially support them for the long term, right? Because recovery doesn't happen overnight. Sometimes it can take years or decades while somebody's on the path to recovery.

So in that instance, for him, it was that personal experience and that's what we've seen in other places as well. I have done some research in Portugal and Karen and I will actually be leading a faculty-led study abroad over to Portugal with students. But Portugal was very much out in front of these sorts of policies that think about substance use as a public health issue as opposed to a criminal justice issue. And there it was, just the scale of the crisis and people started to know individuals who were personally affected that didn't fit their typical narrative of who has problems with substance use. And I think that's happening in Maine. Unfortunately, it's happening because people that we know and love are dying and members of our community are leaving these gaping holes. But it does mean that people's policy attitudes are shifting as a result.

Lizzy: Yeah, and Maine is not alone, as you've already said. This is a national crisis and you're talking about an international one too. And so there's lots that we can learn from different states and from different countries. Are you seeing specifically similar trends in the US that you think Maine specifically can relate to and can teach other policymakers?

Rob: I think so. I mean, I think part of this story we could zoom in on is the opioid crisis and the overdose crisis. But I think there's a broader narrative that if we zoom out and we look even over the past 15 or 20 years, and we look at the ways in which different states are kind of trial ballooning, different ideas with regard to decriminalization or legalization of certain substances.

We've just seen this kind of shift in attitudes and it really began with cannabis legalization, and it's now we're seeing proposals for therapeutic use of psychedelics, for example, those sorts of things. But I think this is part of a broader trend that will continue to see shifts. And that's one of the things that I think is interesting about Maine—Maine is in many ways very distinctive, but I think there's lots of states like Maine that are extremely rural and have been hit really, really hard by issues with substance use disorder and overdose. And I think there's probably a lot of communities that have the same sorts of gaping holes that unfortunately have been left by people dying as a result of preventable substance use issues. And so I think as more and more communities experience that loss and collectively experience that grief, I think you will see

people realize that doubling down on a criminal justice approach is not necessarily the right way to go. And so, we haven't done that research. We can't say for sure, but I bet there are lots of places in which you would see surprising levels of support for these sorts of reform measures from very unlikely supporters, People that you would not necessarily expect to have these sorts of attitudes. That could be people who are evangelical Christians. That could be hardcore conservative voters. That could be people in law enforcement. But I think there's probably lots of places where there's just a recognition that what we've done and what we've doubled down on and invested a lot of money on is not working.

Lizzy: I mean, you've got so much here. You've got great definitions of the problem. You've got evidence that there's all these different coalition members, some unexpected who are really willing to work together and do things. You've got plans, you've got evidence of what actually works, what reduces overdoses, what just improves community health outcomes when you're talking about substance abuse.

So, what would you do? Like what are you listed? So many things that that coalition came up, with so many parts, moving parts of policies that could help folks in the state of Maine. What would be your dream next steps knowing what you now know after doing this study?

Rob: Well, I think with a crisis like this, I think it's almost kind of like you think in terms of triage, right. So, when I talk to people within the policy coalition, they say, the first step of getting people on a path to recovery is ensuring that they don't die, right? Because you can't recover if you're dead. So, I think for a lot of these, what we would prioritize in terms of policies would be getting people access to treatment. And in some cases just even ensuring that people have a space available if they want to move away from drugs, right? If they're at a point in which they say "I want to seek recovery."

In our state, there's very few spaces in facilities where they can go through medically monitored withdrawal because somebody who has a serious opiate problem is going to get really sick, and we just don't have the capacity. So if somebody is ready to seek recovery, in some cases, that could mean, driving to New Hampshire, driving to Virginia. It's also a focus on overdose prevention. So, I think every major institution, every major employer, places like public libraries should be distributing naloxone and training people on its use. Because we've seen it's saved hundreds of lives within our state, and it should be available everywhere.

It should be like a fire extinguisher or a defibrillator. So, I think those sorts of critical measures just to stop the worst impacts of the overdose crisis would be first. And then I think we'd shift towards things like decriminalization. There's too many people who are going to jail for low level drug use or low level drug possession that we should have a different approach to it.

And it seems to me that a majority of people have kind of recognized that this approach of locking people up for low level offenses is one, it's not effective, right? It's not achieving the results, it's not like people come away from that experience and change the path in their life.

and two, I think it's driving stigma and it's driving, this kind of dehumanization of people who use drugs.

When I went over to Portugal, one of the things that surprised me—I was talking to different people who had knowledge of the reform approach, which is now, you know, a couple decades old— but they said one of the first things that they focused on was language and how we talk about substance use and people who use drugs.

And in particular, with law enforcement, they said there was certain terminology that just kind of cast people as inferior cast people, as lacking in dignity, and kind of dehumanizing people. And so there was an enormous effort right at the outset to shift the language that we use when we talk about substance use disorder.

And as I've worked with all of these different people in the policy coalition and, and nationally and internationally doing this work, that's one of the things, it's just changing how we talk about substance use. So I'd say the starting point would be let's just try to stop the, almost apocalyptic nature of people overdosing on a daily basis and then eventually shift towards broader based policy reforms and hopefully change the culture and the language that we use around substance use so that it resembles something closer to a public health issue.

You know, there's policy implications for how we think about substance use as a policy issue through the lens of public health, but it's also the language that we use to talk about substance use.

Lizzy: So, you know, as a longtime SSN member, we're always talking about just the huge impact that local and state level research can have, and being able to inform state policy is just such a huge deal that we really like when it happens. And we want folks to be proud of that. But from your personal experience, what's most rewarding for you about doing policy-directed research in your state, the state where you've been living and working for a while?

And also, what are there limitations? Do you sometimes think “Well, I'm in Maine, so I guess I'm doing Maine now,” you know? Or is that all a pleasure?

Rob: It's funny you should say that. When I initially took this job, here at the University of Maine, my position has built into it the expectation that I do this type of research. So I know for a lot of folks in SSN, you know, the engagement aspect of their research is something that they're personally invested in and they do it because they want to impact policy and they want to impact public understanding.

Whereas I'm in a unique position where it's actually part of my job. And I remember someone saying to me, “Well, you know, this could be really time consuming and complex, and you're not gonna be in a situation in which you can say easily what you'll be working on in five years or 10

years.” right? Cause your research focus is gonna shift based on what the needs of those community partners will be. And I've always viewed that as kind of a treasure. Like that's a great thing about my position that, in our case, we get to go to people who have research needs and we have a certain capacity and we're able to learn from them about a policy issue in a really kind of rich and dense way about what's happening on the ground. And then we're able to craft research in such a way that aligns with their needs and potentially is going to have a public impact. And particularly here in Maine, you know, we have a very accessible legislature. It really is like a big small town. So there are these, really rich networks of people in the advocacy space and the public policy space and so it really is just a treasure to do this sort of work in some places like Maine, and particularly this project has been personally meaningful, because I've lost people I know over the course of doing this research to overdose.

And so it has an urgency that makes it personally meaningful and the fact that we can do something that in any small way supplements the tremendous work people in advocacy organizations and doing direct service for the recovery community and lawmakers who are invested in this issue that it supplements and in some way, helps enrich the work that they're doing.

It's just incredibly rewarding.

Lizzy: Yeah, more jobs like Rob's— that's our position. Any final thoughts? What else do you want to say to non-Mainers that you want to point people who are building their own coalitions, that we know are already active in other states and other places? Like what's your message for Americans thinking about these policies and the legislators thinking about these policies?

Rob: Yeah, I guess kind of the big takeaway, and this wouldn't be limited to substance use or our attempts to address the substance use crisis or the overdose crisis, but we should be skeptical of being told that there are certain issues that the voting public is not ready for. And I think politicians have an incentive to be cautious and to be risk averse. And, sometimes they can be too timid and too cautious. And that's a place where we can step in as researchers and try to supplement their feeling of where voters are at and what the political landscape is with research and ensure that good public policy emerges from it.

So I think the broader kind of call is to recognize that politicians are doing a difficult job and they have an incentive to be risk averse, but it's an important role that we can play to provide them with evidence so that they can seek public policies that will address some of these issues and they're not too overly cautious, and too timid to address those issues in a meaningful way.

Lizzy: Yeah, let's get out there and do it. Thank you so much, Rob. It's been an absolute pleasure to talk to you.

Rob: Yeah, it's been great to talk to you.

Lizzy: And thanks everyone for listening. For more on Professor Rob Glover's work, check out our show notes at scholars.org/nojargon. No Jargon is the podcast of the Scholar Strategy Network, a nationwide organization connecting journalists, policy makers, and civic leaders with America's top researchers to improve policy and strength and democracy.

The producer of our show is Mandana Mohsenzadegan, and if you liked the show, please subscribe and rate us on Apple Podcasts or wherever you get your shows. You can give us feedback on Twitter [@nojargonpodcast](https://twitter.com/nojargonpodcast) or our email address, nojargon@scholars.org.