

**Nancy Hale**  
**President and CEO of Operation UNITE**  
**Subcommittee on Labor, Health and Human Services,**  
**Education, and Related Agencies**  
**Statement for the Record, April 5, 2017**

Good morning. Chairman Cole, Ranking Member DeLauro and members of the subcommittee, Thank you for giving me this opportunity to speak with you today. I am Nancy Hale, president and CEO of Operation UNITE.

UNITE is an acronym for **U**nlawful **N**arcotics **I**vestigations, **T**reatment and **E**ducation. It is a three-pronged, comprehensive approach to create long-term success in combating substance abuse.

Operation UNITE was launched in April 2003 by Congressman Hal Rogers shortly after a special report, "Prescription for Pain," was published by the *Lexington Herald-Leader*. This series of articles exposed the addiction and corruption associated with drug abuse in southern and eastern Kentucky, which largely included Congressman Rogers' Fifth Congressional District.

Many of us were shocked to learn that, per capita, we were the top pain killer users in the entire world. Tragically, as a result, our commonwealth has been the epicenter for the explosion of opioid abuse: The drug overdose rate in Kentucky currently is more than 1.5 times higher than the national average. Rates in several counties are triple the national average.

Congressman Rogers and other local leaders feared that if we did not take swift and decisive action, an entire generation would have been wiped out. We held community meetings to find out the scope of the problem and what should be done. Teachers, preachers, parents, judges, and cops. Everyone we spoke to had stories – personal stories. And they were ready for action.

Based on their feedback, Operation UNITE pioneered a holistic approach that has become a model for other states and the nation. This comprehensive method involves law enforcement, treatment, and education/prevention initiatives working together.

Through collaborative partnerships, UNITE's progress in our 32-county region is evident. Fourteen years later, more than 100,000 youth have participated in UNITE's programs, tens of thousands of community members have volunteered, and more than 4,000 people have entered treatment using a UNITE voucher.

**Let me start with the first pillar: Investigations and Enforcement.**

UNITE has long been a leader in the state, participating in or overseeing many of the largest drug busts in Kentucky history.

For example, UNITE had one-fifth of the cases in Operation Flamingo Road -- a federal, state, and local law enforcement effort to arrest 518 people suspected of obtaining or distributing prescription pills from here to Florida. Over the last 14 years, UNITE detectives have:

- Removed more than \$12.3 million worth of drugs from the street,
- Arrested more than 4,400 bad actors,
- Achieved a conviction rate of more than 97 percent, and
- Received and processed nearly 22,000 calls to our drug tip line.

But we have also long recognized that we cannot arrest our way out of this unique epidemic. As one law enforcement official so powerfully observed: Investigations will grab headlines. Treatment and education will result in long-term results.

### **That is why Treatment is our second pillar.**

Getting justice is only part of the equation. Getting into long-term recovery is what transforms substance users into healthy and productive members of their families and communities.

Many of the drug abusers who have their first experience with UNITE's law enforcement officers then benefit from our multi-faceted approach that includes treatment. We staff a treatment help line to connect people to resources and have supplied vouchers to help more than 4,000 low-income people enter long-term drug rehabilitation.

The UNITE treatment team responds to approximately 1,200 inquiries per month. Although the vast majority of these inquiries are seeking information about applying for a UNITE treatment voucher, a substantial number of inquiries are from individuals wanting information about Casey's Law (involuntary commitment), general information about the signs and symptoms of addiction, types of treatment available, or people who simply want to speak to someone about the addictive behavior of their loved one.

In addition, UNITE's assistance has helped increase the number of Drug Court programs in the region from five in 2003 to one in all 32 counties we serve. Participants obtain treatment and are more likely to return to productive lives, stay gainfully employed, pay child support, and meet other obligations.

Drug Courts in our service area have collected more than \$1.4 million in fines, restitution, and court costs, along with more than \$900,000 in child support. Participants also complete thousands of hours of community service each month.

UNITE has provided more than \$4 million to create 30 new Drug Court programs in 24 counties in addition to programs operated by the Kentucky Administrative Office of the Courts. Kentucky drug courts currently operate in 113 of the state's 120 counties.

### **The final pillar is Education and Prevention.**

To make progress, we must not only cut off the supply, but decrease the demand as well. Education and prevention are the keys to reducing the demand for abusing or misusing legal substances or using illegal drugs. When demand is high, users are willing to use what is most available and affordable, and suppliers are creative in meeting these needs, whether it is prescription pills, heroin, meth, or synthetic drugs.

Offering youth alternatives to drug use through programming and hands-on education makes a huge difference. We must give them the facts. Children should be taught the effects of drugs on their minds and bodies from K-12. Repetitive, consistent messaging is needed.

And our focus should not only be on presenting facts and providing information on the effects of drugs on their bodies and brains, but should be on helping our youth make that one decision to not use any addicting substances, including alcohol, tobacco, marijuana, and other drugs. That focus holds great promise of a stronger, clearer, and more effective goal for public education and prevention.

UNITE's education programs and activities introduce youth and adults to a life without drugs. Some programs are geared to help youth avoid the dangers of the streets, but, for many, the danger is much closer – it is at home. UNITE shows children a different path, and it also helps them teach their parents or caregivers. For example, one Leslie County parent sought help for an addiction after her 4<sup>th</sup>-grader told her about UNITE and what she was learning in her “Too Good for Drugs” class.

Thus far, we have reached more than 100,000 students through various drug education programs and summer activities.

Our anti-drug programming includes “On the Move,” a mobile and interactive one-of-a-kind education initiative. It provides a hands-on experience to simulate distracted and impaired driving. “Life With A Record” is a prevention initiative that helps youth examine the criminal justice system and how seemingly harmless acts can impact their futures.

Camp UNITE is a free, weeklong leadership and adventure camp that provides middle school youth with an opportunity to engage in fun, constructive activities using a small group, peer mentorship format. Many participants have been directly impacted by substance abuse or are unable to afford a traditional summer camp program.

Other summer activities include “Shoot Hoops Not Drugs” and “Hooked On Fishing – Not On Drugs.”

Federal funding has been critical. It has helped UNITE reach across jurisdictions and county lines – and across professional territories.

For example, ARC grants have enabled us to educate prescribers on addiction, pain management, and state monitoring systems for prescription drugs known as PDMP's.

SAMHSA has helped us provide treatment resources through UNITE's vouchers, which is vital in a region faced with high poverty and unemployment. It also funded substance abuse counselors in the middle school and high schools, which was extremely effective. The impact was large, not only in the schools but also in the community. Unfortunately, schools were not able to sustain that effort when the grant money ran out.

In addition, AmeriCorps has been an invaluable part of our education efforts. Our 54 UNITE ServiceCorps members serve 17 school systems in 14 counties. They provide math tutoring, teach anti-drug and wellness curricula, have recruited more than 8,200 volunteers, and sponsor anti-drug UNITE clubs that have impacted more than 4,000 students in the last year alone.

And the results are dramatic: Last school year alone, the more than 1,500 students they tutored showed an average 30 percent growth in math knowledge. And the 3,300 students who took the anti-drug and health information curricula showed an average of 35 percent growth in drug awareness and healthy decision-making knowledge.

I am pleased that the federal CARA legislation enacted by this Congress last year will enable regional organizations like UNITE to take advantage of these new federal funds focused on addressing the opioid epidemic, and I am grateful to each of you who supported that bill.

Congress' collaboration on CARA must be replicated elsewhere. In the anti-drug world, we certainly have to collaborate with stakeholders across a variety of professions, institutions, schools and faith-based organizations. Not just law enforcement. Not just treatment. Not just education. Everyone must work together.

We were founded on community input, and that involvement continues and grows. Our nonprofit UNITE Coalitions in each of our counties know what their communities need. These coalitions are the key to after-care. People in recovery will eventually come back to their communities. They need support when they come home. Our coalitions make that happen. UNITE provides guidance and small amounts of funding to create those strong, local partnerships.

As a result, tens of thousands of people have participated in UNITE events and coalition activities to educate and deter people from taking drugs.

When it became unfortunately clear that the challenges we had been experiencing in rural Kentucky had exploded across the country, we worked to share UNITE's holistic approach through the establishment of the National Rx Drug Abuse & Heroin Summit – now the largest gathering of medical professionals, advocates, law enforcement and policy makers in the United States.

Our next Summit is April 17<sup>th</sup> through 20<sup>th</sup> in Atlanta. Many of your colleagues have attended in the past, and I hope to see you there this year.

That is a quick overview of some of Operation UNITE's strategies. Now, I would like to touch on several of the lessons we have learned over the last 14 years that may benefit similar organizations in your home districts.

The first is that you must bring all stakeholders to the table at the beginning. For example, we did not engage the medical community early enough. It was not until a local physician was tragically murdered for refusing to give a patient pain medicine that we all rallied together at the same table.

The second lesson learned is that UNITE should have done a better job working with families and helping them understand that addiction is a chronic disease that their loved ones would deal with for the rest of their lives. We needed to do more to help the families understand the disease and how to support their loved one when in long-term recovery.

A third lesson learned is that you must have a champion to lead, to motivate, to encourage, and to fight alongside you. For us, that champion is Congressman Rogers. Today, there are bipartisan caucuses in both the House and Senate to facilitate bringing a unified national approach to this difficult effort.

A fourth lesson is that you cannot expect short-term treatment to yield long-term results. Models of recovery should be based on long-term goals.

The final, and most important, take-away is that education and prevention are the tools to achieve those long-term results. The longer I am involved in fighting this epidemic, the more I am convinced that education – particularly K-12 prevention education – is the key to saving our next generation.

Through private donations, we are able to provide \$1,500 need-based scholarships to youth who have been actively involved in UNITE programs or have been impacted by substance abuse in their families.

It is only through collaboration and a holistic approach that we will succeed. And there is no better illustration of this than that of a young woman who was awarded an “I Am UNITE” college scholarship last year. I’ll call her Sarah.

*Sarah is a scholarship recipient who devoted 300 hours of service learning during high school. She also was one of only four students in the country selected by Jobs for America’s Graduates for the honor of placing a wreath at the Tomb of the Unknown Soldier.*

*But before those successes, she had some stumbling blocks – like when she had to step over her father who was passed out on the floor from a drug overdose. Her father later was arrested as part of a UNITE drug investigation. But UNITE’s efforts in her life did not end there. If they had, her story – and his – might have turned out differently.*

*Her father went to jail, but UNITE provided a voucher for him to enter long-term treatment. After he successfully completed treatment, he addressed an assembly at her high school. Sarah confessed that she was proud of him for the first time.*

*Sarah is now headed to college, and her father is making strides of his own with his recovery.*

*The day after she received a UNITE scholarship, a gentleman called us inquiring about funds to get a Celebrate Recovery group started in his county so he did not have to travel to a neighboring county. He explained he did not know anything about computers and was illiterate, so he would need help downloading and completing the forms. That man was Sarah’s father.*

Sarah and her family illustrate why the multi-pronged approach is the key to saving our families and communities. They also offer us hope, which is another important part of recovery.

That is why we created the Hope Wall, which features dozens of people who have been drug free for at least 18 months. When I look at those faces and think about these men and women returning to their families, my eyes are always drawn to one photo in particular – that of my own son. Knowing how each of these people, in long-term recovery, are giving back and helping others, is what should give us all hope.

Thank you for your time.