

2014 State of the State Address

Governor Peter Shumlin

January 8, 2014

Mr. Speaker, Mr. President, Mr. Chief Justice, members of the General Assembly, members of our National Guard, and fellow Vermonters:

Thank you for the privilege of serving as your governor. We are lucky to live in the best state in the Union, where people work hard, trust and take care of each other, and strive to keep Vermont a place where our children and grandchildren will grow up and thrive. The state of our state is strong and growing stronger. Vermonters are working. Companies are expanding. Home values are rising. Opportunities for good jobs are growing. We enjoy the fifth lowest unemployment rate in America. We've added over 11,000 jobs since I first spoke to you three years ago. As I crisscross Vermont, most people I meet are hopeful and optimistic about the direction our economy is headed.

There remains more work to do. Our challenge is not only to create good jobs; we share an obligation to deliver a better quality of life for everyone. All Vermonters deserve to live in a state where we know our schools are among the best in the country and our families are safe in their homes. Where we have a clean environment with a bright, renewable energy future. Where we have good jobs that pay fair wages. Where we all have affordable, high quality health care.

You will hear from me on many of these topics next week when I present my budget. Today I will focus exclusively on another matter of great concern to our state's future.

During the tenure of every governor there are numerous crises. Some are created by natural disasters when we all need to pull together to provide immediate relief from pain and heartbreak. After Irene, Vermonters needed to feel relief quickly in order to know that a return from disaster to normal life was in fact possible. Hope is born in such efforts.

There are other crises that confront us that are actually much tougher because they are more complicated, controversial, and difficult to talk about. Vermont is confronted by one of these right now.

The crisis I am talking about is the rising tide of drug addiction and drug-related crime spreading across Vermont.

In every corner of our state, heroin and opiate drug addiction threatens us. It threatens the safety that has always blessed our state. It is a crisis bubbling just beneath the surface that may be invisible to many, but is already highly visible to law enforcement, medical personnel, social service and addiction treatment providers, and too many Vermont families. It requires all of us to take action before the quality of life that we cherish so much is compromised.

The facts speak for themselves.

- In Vermont, since 2000, we have seen a more than 1700% increase in treatment for all opiates.
- What started as an Oxycontin and prescription drug addiction problem in Vermont has now grown into a full-blown heroin crisis.
- We have seen a nearly 400% increase in people receiving heroin treatment here in Vermont since 2000, with the greatest percentage increase, nearly 30%, in just the past year.
- In 2013, there were twice as many federal indictments against heroin dealers than in the prior two years, and over five times as many as had been obtained in 2010.
- In the first seven months of last year, we had nearly as many deaths from heroin and opioids in Vermont as we had in the entire preceding year.

Some of you may have seen the film made by Bess O'Brien, "The Hungry Heart," which focuses on one Vermont community's struggle to save its children from this growing epidemic. **Bess is here today ...**

Bess tells the story through Dr. Fred Holmes, a pediatrician who spent 43 years taking care of young Vermonters in St. Albans, some of whom became addicts. When Dr. Holmes first investigated opiate addiction in an effort to help, he learned just how devastating it can be and how little most of us understand it. Dr. Holmes said, "these kids don't look different, walk different, talk different. It's just the nature of their disease that's different."

He said, "I was clueless. I figured that it was something I ought to be able to do something about, just like diabetes or epilepsy or ear infections." But he quickly learned about addiction, recognizing that his patients, as he put it, had "a relentless relapsing illness that is potentially fatal."

He realized that his obligation was to help them treat that illness. When he retired last summer, he had treated more than 80 kids for opiate addiction in his small practice. **Dr. Holmes is here today too...**

The stories of these young Vermonters break your heart.

Dustin Machia **(May-She)**, one of Dr. Holmes' patients, was raised by his hard-working, supportive family on a dairy farm. Dustin started using drugs in 10th grade, during a 15-minute break between school exams when a bunch of his friends offered him Oxycontin. He became an addict, hard and fast. His addiction quickly went from \$100 a week to \$3500 a week – that's \$500 a day. He found, like most opiate addicts, that drugs transformed his way of life and altered his moral compass. He needed drugs to survive, and he stole to pay for his addiction. He even stole \$20,000 worth of farm tools and equipment from his own parents. Dustin said, "be careful because your addiction is waiting out in the driveway, just getting stronger, just waiting for you to slip up and take you away." His family knows too well the crushing hurt and harm that comes from opiate addiction, even as they have stuck with him throughout his disease. As his mom said, "My son is an addict, and I love him with all my heart." Dustin has now been clean more than 5 years. **Dustin and his mom Cheryl are here today; thank you for your courage in joining us here today.**

Addiction comes at people insidiously. Sometimes it comes through a dealer looking to get someone hooked to make more money. It starts as a way to feel good, a rush that may seem harmless at first, since you are often doing it with your friends. It quickly devolves into an uncontrollable, unrelenting addiction, and those who become addicts are sentenced to a lifetime battle. As one person now in recovery said, "the first thing you think about in the morning is not how I'm going to feed my kids. It's how am I going to get high now."

Heroin is a drug that does not only grip those who are born into poverty. Consider the life of Will Gates, who went to UVM but died of a heroin overdose before he could graduate. He was a neurobehavioral science major and ski racer. He was born to opportunity. His ashes were spread on one of his favorite ski trails.

Will's father Skip speaks for all grieving families when he says: "I never knew anything in human experience could be this hard. I never knew anyone could feel this much pain. It has redefined the rest of my life." Skip felt powerless to stop the overwhelming impact of drugs on his son. Since Will's death, Skip has worked with our U.S. Attorney Tris Coffin, dedicating his life to warning others of the

circumstances that stole Will. Skip, I am so sorry for your pain but I am so thankful for your efforts [gesturing to balcony]

We often hear in the news about the criminal side of drug addiction, about the robberies or the busts in our communities. Our police, prosecutors, defense attorneys, and judges do an extraordinary job under tough circumstances. But as Chief Justice Reiber and so many others who are in the thick of this struggle have concluded, we must bolster our current approach to addiction with more common sense. We must address it as a public health crisis, providing treatment and support, rather than simply doling out punishment, claiming victory, and moving onto our next conviction.

I am not naïve and I know you aren't either. Terrible crimes – murders, armed robbery, sex trafficking and others – are committed by those in the drug trade and by those who are supporting their drug habits. These crimes have victims and devastating consequences. But Dr. Holmes got it right when he noted that addiction is, at its core, a chronic disease. We must do for this disease what we do for cancer, diabetes, heart, and other chronic illness: first, aim for prevention, and then eradicate any disease that develops with aggressive treatment.

Getting this right is not just a matter of compassion. It is also the right thing to do for our pocket books. Let's put aside our hearts for a moment, and with our heads look at the math:

- Every week, nearly \$2 million dollars of heroin and other opiates are being trafficked into Vermont.
- Due to our proximity to Boston, New York, Philadelphia, and other cities where heroin is cheap, dealers can make a lot of money off addicts in Vermont. A \$6 bag of heroin in New York City can go for \$30 here. So think about that: a \$6 dollar purchase sells for five times as much, just a few hours' up the interstate.
- That means that a heroin habit in Vermont can cost an addict tens of thousands of dollars a year, and that's before they put a roof over their head, food on the table, or sneakers on the kids.

Nearly 80% of our incarcerated population are either addicted or in prison because of their addiction. And listen to this math: a week in prison in Vermont costs about \$1120, but \$123 dollars will buy a week of treatment for a heroin addict at a state-funded center. Today, our state government spends more to imprison Vermonters than we do to support our colleges and universities, and our prison spending has doubled in the last nine years.

You do not have to be a math major to realize that we can't afford our current path. We have to figure out how to spend taxpayer money more wisely, while we treat the disease more effectively.

We have made some headway. We have opened treatment centers in nearly every region of our state, considered to be national models. Thanks to your good work last year, we have expanded our efforts to combat Oxycontin and prescription drug abuse and to offer safe harbor to those reporting overdoses. We have lessened the penalties for small amounts of marijuana, acknowledging that we can better use our limited resources. Through a partnership between the Vermont State Police, the state drug taskforces, our state's attorneys, local police, the federal government, and our Attorney General Bill Sorrell, we are getting tougher, using drug busts that disrupt dealer networks distributing drugs that kill our neighbors and kids.

This important work must continue. Yet despite all of these efforts, we continue to lose too many Vermonters to drug addiction, and the crime that comes with it.

Today, I propose action in four areas to help us gain ground in this battle.

First, let's start treating drug addiction as the immediate health crisis that it is by dramatically increasing treatment across Vermont. Right now, we have hundreds of Vermonters who are addicted and are ready to accept help but who are condemned to waiting because we still do not have the capacity to treat the rising demand.

Our largest waiting lists of over 500 addicts are in Central Vermont, the Northeast Kingdom, and Chittenden County. Today I ask you to approve an additional \$200,000 in the Budget Adjustment Act to help slash those waiting lists. The money will allow treatment centers to immediately staff up and bring on additional resources to begin eliminating the existing backlog, while preparing to serve a growing number of patients going forward. I am also proposing increased resources for our statewide recovery centers, and additional funding for substance abuse and mental health treatment services for Reach Up recipients. In total, this funding will represent more than \$1 million dollars of additional support for treatment and recovery.

I am also pleased to announce that our final regional treatment center – this one providing services in St. Johnsbury and Newport – has just opened. These expanded services will help the Kingdom meet its increased demand.

I know that we have more work to do to provide the right treatment and support to those who are addicted, not just using maintenance drugs as a Band-Aid for this

complicated disease. I also know that treatment facilities have not always been embraced by our local communities. But the time has come for us to stop quietly averting our eyes from the growing heroin addiction in our front yards, while we fear and fight treatment facilities in our back yards.

This is tough stuff. But this is about getting help to those who are desperately sick, and giving hope to those who wish to get better. Help and hope are what we Vermonters do best.

Second, let's do a better job of convincing drug users who wind up in our criminal justice system that getting help is a better path than addiction. This too is not easy work. Drug addicts are the best deniers and the best liars you will ever meet. Some will do just about anything to continue using. But all the research tells us that an addict is most accepting of treatment right after the bust. It's when the blue lights are flashing and cold reality sets in that we have our best shot.

Here's the problem. Our current judicial system is not well-equipped to seize this moment. It can take weeks or months to wind your way through the court system from arrest to conviction, leaving an addict time to settle back into old habits.

I want to give our prosecutors and judges the resources needed to strike immediately. My 2015 budget will include \$760,000 to provide objective, evidence-based assessments to help our state's attorneys and our courts determine who may qualify for immediate treatment and services, and then hire the necessary personnel to monitor their recovery.

In this new system, a third-party team chosen in conjunction with local prosecutors, defense counsel and court personnel but contracted through the State would promptly, after arrest, conduct an evidence-based risk and needs assessment for prosecutors, defense counsel, and our judges. Our state's attorneys in every county will be enabled to establish a rapid intervention program, paid for by the State, where those addicts accused of low-level, nonviolent property and other drug-related crimes could agree to seek immediate treatment for their disease and avoid criminal prosecution if they successfully adhere to the strict requirements imposed. For any individual not suitable for early intervention, our judges can choose to use these same assessments to set conditions of release and monitoring before trial that include immediate treatment and other services. One's success or failure in recovery would be considered during sentencing.

I am confident we can do this. State's Attorneys T.J. Donovan in Chittenden County and David Fenster in Addison County, among others, have been

implementing prosecutor-lead intervention programs with good results. Some of our courts have used grants and pilots to experiment with ways to better address addiction in the criminal justice system. Senators Sears, Ashe, Flory, Fox, and Snelling have sponsored tri-partisan legislation, S.295, which seeks to build upon some of these efforts. My proposals today expand upon all of this good work, taking us farther and faster to bring evidence-based assessment and intervention programs statewide as quickly as we possibly can, and I ask for your support.

Third, we have to couple enhanced treatment and intervention with even stronger, more coordinated law enforcement.

That is why we have just launched a new mapping portal, led by my Department of Public Safety, to share and analyze data statewide to determine where our hot spots are and where our resources can be most effective in stopping the flow of drugs. To further aid in our coordination efforts, I am also reorganizing the Governor's Criminal Justice Cabinet to include substance abuse prevention so that its membership reflects the broader challenge we face.

I also ask you to make two important statutory changes that will help ensure that high-volume dealers who bring drugs into our state to prey upon Vermonters in pursuit of profits will suffer the consequences, and that those who break into our homes with weapons in hand to rob us to feed their habit will face enhanced criminal penalties. Creating tougher sentences when anyone transports illegal drugs into Vermont will help send a clear message to drug dealers that our state will not tolerate their trade. Enhancing penalties for people who carry weapons into our homes to feed their habits by violating our security and stealing property that does not belong to them is good Vermont common sense.

Finally, we know that the best way to fix this problem is to prevent addiction in the first place. This is the toughest challenge we face; the one without a clear national model or consensus on what works best. We need Vermont ingenuity; we need all of us thinking big together. Later this year, I will be facilitating a statewide community forum here at the State House to help us share creative ideas about how we can do prevention better.

It is also critical that we continue to engage our health care providers in this challenge. In August, Vermont received a \$10 million federal grant over 5 years to help medical providers intervene earlier with patients who are beginning to suffer from substance abuse. Just like we taught people to heed the warnings of heart disease or diabetes, we need our medical community to educate their patients on how to better avoid addiction.

We also need more providers trained to offer emotional support and help to those who become addicted; not just dole out maintenance drugs that sometimes find their way back into the drug market. The Affordable Care Act will help us do this because for the first time it requires coverage for substance disorders and treatment, and the federal support to pay for it.

Our schools also have a greater role to play. We know that risky behaviors develop early in life and too often accompany family difficulties and dysfunction. When parents struggle, children suffer, and we all pay the price for years to come. This is why we must continue our focus on the earliest years. Our recent success in securing the \$37 million Early Childhood Education Race to the Top grant will be a huge help in making Vermont a leader in these efforts. And if you send me the bill that passed the House last spring, we can make sure all Vermont children have access to quality universal pre-kindergarten to help set them on the right path.

I am also providing a grant from my office to enable Bess O'Brien and those whose stories are featured in "The Hungry Heart" to visit every high school in Vermont to talk to our students directly about their difficult journeys.

If you listen to the voices of addiction, you hear the underlying cause of this disease for too many: a lack of hope and opportunity. So while we should celebrate that our unemployment rate is low, and that our economic outlook is bright, none of us should be content until all Vermonters, including those who are born into poverty, have the same opportunities to succeed and flourish as the most fortunate. Our best prevention against drug addiction is to create jobs and opportunity for all Vermonters, by providing the best early childhood education in America. By continuing our good work on early college, dual enrollment, and flexible pathways, and passing my STEM scholarship proposal so that more of our kids can afford higher education and are able to move beyond high school. By building the training and resources for continued job growth. By creating a sensible, affordable, universal health care system for all Vermonters. By ensuring that every Vermonter, regardless of income, has the chance at success – living, working, and raising their family right here in Vermont.

All of the proposals I have discussed today are designed to reframe the way we solve drug addiction and drug crime in Vermont, attacking it first as the health crisis that it is, while simultaneously retooling our criminal justice system and strengthening law enforcement. This will not happen overnight. But these actions represent basic, good government responses to an emergency. Just as you

expected us to work across agencies and across state and local government to help us all recover from the devastation of a tropical storm, so too should you expect us to approach this crisis of drug addiction with coordination and effective action. All of us, together, will drive toward our goal of recovery by working with one another creatively, relentlessly, and without division. We can do this. I have tremendous hope for Vermont; for our efforts to overcome this challenge and keep the Vermont that we cherish for generations to come. Thank you.