

Press Release

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SAFE Glen Cove Coalition: NIDA Celebrates 50th Anniversary

In 2024, the National Institute on Drug Abuse (NIDA) celebrates its 50th anniversary. Formed in 1974, Congress established NIDA and since then NIDA has led the world in funding and conducting research on drug use and addiction. NIDA research has been instrumental in shifting the mindset of medicine and the public from viewing addiction as deviance toward understanding it as a health condition that is preventable, treatable, and deserving of compassion and support.

According to NIDA Director Nora Volkow, the institute was founded after Richard Nixon declared that drug abuse was “public enemy number one”—rhetoric that powerfully reinforced the stigma against people with addiction and punishment as the solution. At that time, people with addiction were often regarded, including by many healthcare providers, as morally deficient and weak-willed, and addressing the nation’s drug problems was thought to be mostly a matter of policing. Researchers knew very little about the neurobiology of drug effects or how the brain is changed by addiction. There was little in the way of effective prevention, and the only drug addiction treatment available was methadone. Harm reduction for illicit drug use was not part of the public discourse.

Over the last 50 years NIDA’s investment in basic science has provided detailed knowledge of the neurobiology of reward and reinforcement, the genetics of addiction vulnerability, and the environmental determinants that can worsen or mitigate that vulnerability and that the mechanisms by which they exert their influence. We now understand the ways that the brains of susceptible individuals can be reshaped by drug use and the consequences this can have on their emotions, cognition, and self-determination along with the suffering that addiction entails. This scientific understanding has made it possible to approach addiction as a medical condition and a matter of public health.

The knowledge generated by NIDA research has also led to vast knowledge of drug use prevention. Researchers have leveraged knowledge of risk and protective factors to design effective comprehensive intervention programs to prevent the onset of substance use and its progression to addiction in adolescents and young adults. Shifting toward medical framing of addiction has also facilitated public-private investment in medication

development, and the implementation of policies that have integrated care for people with substance use disorders into mainstream healthcare.

The Drug Abuse Treatment Act of 2002 enabled the newly approved medication buprenorphine, developed through NIDA research, to be prescribed by regular physicians if they obtained a waiver. In 2008, the Mental Health Parity and Addiction Equity Act required insurers to provide benefits for substance use treatment to the same extent they cover other forms of mental health care. During COVID, the ability of clinicians to provide addiction care via telehealth was expanded and the waiver requirement for buprenorphine was removed, further increasing the pool of potential prescribers.

110,000 people are dying annually due to the opioid epidemic. Unfortunately, even though effective tools to prevent and treat substance use disorders are available, they are not deployed widely enough. And although medical science has changed its views on addiction, policies and social structures have been slower in following the science toward a public health-based approach. Most of the fatal overdoses each year involve opioids. Opioid use disorder is treatable with one of the three FDA approved medications, buprenorphine, methadone, and naltrexone, but currently only 18% of people who could benefit from these drugs receive them. Providers who could prescribe buprenorphine still do not, potentially from a lack of confidence in treating SUD, stigma, or inadequate reimbursement. More than a half century after its FDA approval for opioid addiction, methadone is still only obtainable through specialized clinics, despite evidence that it could be dispensed much more widely—and still safely—in doctor's offices or via pharmacies. Presently, there are no medications to treat other drug use disorders such as addiction to stimulants, which are involved in increasing numbers of overdose deaths, or addiction to cannabis, regular use of which is increasing as a function of its legalization by most states.

NIDA is committed to addressing these challenges through scientific research to treat Substance Use Disorders (SUD)'s. The organization is also funding a range of other novel treatment approaches including immunotherapies (vaccines and monoclonal antibodies) and noninvasive neurostimulation that could one day make addiction a thing of the past. NIDA is also investing in research on alternative endpoints to abstinence, such as reduced drug use, as a clinically meaningful treatment outcome, which could lead to a wider range of medications to help people with substance use disorders.

Over the past several years, NIDA has also greatly increased its funding of implementation research, finding ways to overcome attitudinal and structural barriers to SUD prevention and treatment, and to expand access to care where and when people need it such as in emergency departments, primary care, and justice settings. Through our Racial Equity Initiative, NIDA is funding research and capacity building efforts to address racial and other health disparities. The Native Collective Research Effort to Enhance Wellness (NCREW) program is a new initiative that is partnering with Tribal organizations to address opioid misuse and improve pain management in Native communities in ways that incorporate indigenous knowledge and expertise.

Volkow stated that 50 years after NIDA was founded, the science of addiction has ushered in an understanding that we can no longer view people who use drugs in oppositional and punitive terms. The failures of that mindset—the inefficacy of punishment at mitigating addiction and its consequences, its exacerbation of racial and other health disparities, and its creation of stress and trauma for communities—have been well documented. People who use drugs can be allies in the scientific search for solutions, and this must be recognized by addiction science. An important component of developing effective solutions must be a community-engaged approach to science that regards people with lived and living experience of drug use and addiction as research partners with valuable expertise.

The National Institute on Drug Abuse (NIDA) is a component of the National Institutes of Health, U.S. Department of Health and Human Services. NIDA supports most of the world's research on the health aspects of drug use and addiction. The Institute carries out a large variety of programs to inform policy, improve practice, and advance addiction science. For more information about NIDA and its programs, visit www.nida.nih.gov.

The SAFE Glen Cove Coalition is conducting an opioid prevention awareness campaign entitled, "Keeping Glen Cove SAFE," to educate and update the community regarding opioid use and its consequences. To learn more about the SAFE Glen Cove Coalition please follow us on www.facebook.com/safeglencovecoalition or visit SAFE's website to learn more about the Opioid Epidemic at www.safeglencove.org.