

***Dopesick* Book Study ~ Sanctuary**

6:00 to 8:00 pm

Refreshments 6:00 – 6:15 pm

Week One – Introduction, Prologue, Overview, & Chapter One

Week Two – Chapter Two, Three, & Four

Week Three – Chapter Five, Six, Seven, & Eight

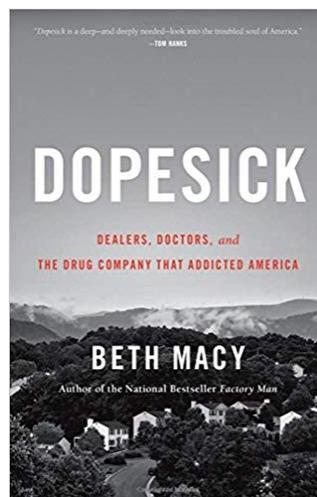
Week Four – Chapter Nine, Ten, & Eleven

Week Five – Chapter Twelve, Thirteen, & Epilogue

Week Six – Guest Speakers in Recovery (No Small Group Discussion)

Week Seven – Beth Macy Question and Answer Session & Book Signing
(No Small Group Discussion)

*Each week should start with answering questions which were asked the prior week. A guest speaker is a great way to place a face on this epidemic.



Moderator/Leader Role

- *Keep the meeting on track time wise
- *Be aware of people with agendas and try to politely redirect conversation
- *Introduce new topic of discussion when conversation begins to lag
- *Allow different perspectives, but encourage constructive ways for people to disagree
- *Keep track of all questions asked and send them to Heather to research answers prior to next meeting
- *Pick up folder each night with list of questions for the week, attendance sheet, and cheat sheet with names/companies/definitions found within each chapter.

Room Structure/Set-Up

- *Tables with numbers to allow for people to sit with people close to them while encouraging church members to intersperse around the room.
- *Sign-Up Sheet with E-mails, phone numbers, addresses. These will be given to group leaders each night for people to complete.
- *Each room needs post-it paper on the walls, markers to write questions, pens, & highlighters.
- *Alternate Locations: All rooms should be clearly labeled, so people can switch groups from week to week if they would like to.
- *We will encourage congregational members to disperse throughout the room rather than all sitting within the same group.

Discussion Guides

- *Questions will be e-mailed ahead of time each week allowing moderators to prepare prior to attending.
- *Ensure everyone knows the questions are there to spark discussion and there is no need to move through all of them.

Week One Questions

*Brief Introductions to begin the night

1. Why do you think “Dopesick” has created such a buzz in Roanoke?
2. What drugs are considered opioids?

Opioids are a class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, morphine, and many others.

3. Why has the nation’s response to the opioid crisis been so slow in moving forward?
What do you know about current treatment plans and their effectiveness?
4. Mothers are asking Beth Macy to search out the answer to one question: What exactly led to the death of their children? As parents search for answers, can these answers help prevent further addiction/death?
5. Many families have suffered in silence. Why does the discussion of heroin and pill abuse carry such a stigma and shame?
6. Cocaine and crack started in the big cities and spread throughout the countryside. What do you feel is a factor for allowing the opioid epidemic to begin in the exactly opposite manner?
7. Does the fact that heroin was laced within cough drops and baby soothing syrups as early as 1899 shock you?
8. In the 1914 when heroin was severely restricted, addicts were reclassified to criminals rather than patients. How does that change the way we treat addiction?
9. In Chapter 1, one doctor notes, “I can remember telling my residents, ‘A patient can’t get hooked on fourteen days’ worth of [opioid] pills.’ And I was absolutely wrong.”
Should doctors have done their own research rather than relying on the pharmaceutical companies? Who should be required to research addictive effects of medications?
Pharmaceutical companies or doctors?

Next Week: Read through Chapter Four

Week Two Questions

1. What are your thoughts on the marketing strategies employed by Purdue in which they specifically sought out physicians to determine which ones prescribed large levels of painkillers and also used gifts such as conferences at resorts free of charge, free lunches, golf trips, and additional swag? Pg. 32 & 47
2. Cancer doctors prescribed the largest number of long-acting opioids prior to 2000, but family doctors were now the largest single group of OxyContin prescribers. What factors do you feel contributed to this change from oncology to family practitioners? Pg. 32
3. Statistics are provided within the book that 24% of Lee County High School juniors reported trying OxyContin and 9% of the county's seventh-grade. How do we seek to educate our children? What age should this begin? Pg. 43
4. In the video Purdue Pharma produced in 2000, "pseudo addiction" is coined which means patients look like drug addicts only because they are pursuing pain relief when in reality it is actually pain relief seeking behavior mistaken as drug addiction." Is there any truth behind this statement? Pg. 48
5. Why was the book *Pain Killer* written by Barry Meier not enough to sound the alarm in 1996? Pg. 37-38
6. When Ed Bisch created his online memorial message board online, he was flooded with parents who had lost their children to drug overdoses. How was this happening within our neighborhoods and no one knew? Pg. 61
7. Art Van Zee persistently asked the question, "what do you consider acceptable collateral damage?" Recent studies put the addiction rate among prescribed opioids at 56% which is much higher than the addiction rate of less than 1% claimed by Purdue. Do these drugs have a place in the medical realm? Pg. 65
8. How do politics play into this epidemic if "federal regulators weren't moved by memorials to dead Americans from grieving mothers and fathers?" pg. 68

9. The \$634.5 million fine was divided among law enforcement, state, and federal Medicaid programs (as reimbursement for claims resulting from misbranding), created the VA Prescription Monitoring Program, and settled \$130 million in civil claims. Should this money have been distributed to local counties to combat the epidemic on the front lines? Pg. 97

Next Week: Read Chapter Five through Chapter Eight

Week Three Questions

1. What are your thoughts on this statement, “Nothing’s more powerful than the morphine molecule, and once it has its hooks in you, nothing matters more”? Agree/Disagree? Pg. 106
2. Beth was asked the questions, “what can your book do to help me keep my daughter alive?” How does reading this book help the Roanoke Valley community overall? Pg. 107
3. After Robin Roth lost her son Scott to a drug overdose, she felt people viewed her as a “parenting failure”. As a society, how do we remove the judgement and support parents struggling with addiction in their children? Pg. 115
4. Spencer Mumpower shared prevention advice tips: rid your medicine cabinets of anything that has *codone* and set rules and hold kids accountable when they break them. How can we put these into practice within our communities/households? Pg. 117
5. “We were safe in our ignorance, or so we thought-content to stereotype drug addiction as the affliction of jobless hillbillies, a small group of inner-city blacks, and a few misguided suburban kids.” Now that the dragon is out of the bag, how do we keeps our eyes open and remain educated? Pg. 126
6. Discuss as a group the link between attention-deficit medication and addiction. Several of the people mentioned in the book took Adderall or Ritalin as children/teenagers. Pg. 133-135
7. Cellphones are mentioned as the glue that holds everything together for the modern user. Discuss cell phone usage in teenagers. Pg. 137
8. Much is discussed about the criminal aspect of addiction and law enforcement arrests, but is this a law enforcement issue? Are prisons where addicts belong? pg. 140
9. What are your thoughts on Medicated-Assisted Treatment (MAT)? Pg. 144
10. Some cities are beginning to go to a needle exchange program where health department vans drive around providing clean needles. What are your thoughts on needle exchange programs? Pg. 155

11. Do you agree there is a conflict of interest with the FDA being responsible with both approving drugs and serving as a watchdog over those drugs? Pg. 185

Next Week: Read Chapter Nine through Eleven

Week Four Questions

1. The Gloucester Police Assisted Addiction and Recovery Initiative essentially says “you turn your drugs in and the police will help you with treatment instead of jail.” What are your thoughts on the Roanoke Valley employing similar techniques? Pg. 203
2. Does the introduction of Medication Assisted Treatment create another type of problem since buprenorphine is the third most diverted opioid in the country? Pg. 214
3. How did it make you feel to know Tess Henry was pointing out drug dealers to Beth Macy while awaiting entry into her Narcotics Anonymous Meetings? Pg. 216
4. Statistics state graduates of Drug Court are a half to a third less likely to return to crime or drugs. If this program is producing success rates, why do you have to commit a crime and be arrested to be provided help via Drug Courts? Pg. 220
5. The words “tough-love” and “enabling” are used often in the book when parents are describing going back and forth with how to handle their child’s addiction. Based on the research, do either of these approaches offer a better outcome in your opinion? Pg. 224
6. Such a short opportunity is available when an addict decides treatment is possible and is ready to undertake treatment is known as the liminal phase. How can we as a community better support families spending time in this phase? Pg. 227
7. Bills are increasingly being introduced which allow someone to involuntarily commit a user to treatment. What are your thoughts on forcing someone into a treatment plan? Pg. 235
8. Interestingly, parents also have “the disease of addiction too” adding to the complexity of the issue. How can our community provide education to parents to guide them through seeking help and assistance? Pg. 236
9. What are your thoughts on the free exchange of used needles for clean ones, providing areas for people to use drugs while a nurse stands by, or distributing naloxone to addicts which is a practice implemented in Canada? Pg. 238

10. The latest research says it takes a typical opioid-addicted user eight years-and four to five different plans- to achieve one year of remission. Does that number seem staggering to you? Pg. 243

Next Week: Finish Reading the Book

Week Five Questions

1. Discuss some of the challenges and barriers ex-offenders face when they are released from prison. Pg. 255-263
2. Discuss how racial profiling affects the mindset of the non-white population. Pg. 255
3. Ronnie Jones predicted that 10 more dealers would take his place. "It was hard to envision a future where shit in fact stopped." Can you envision a future without opioids? What needs to be put in place to see this idea come to fruition? Pg. 265
4. Ronnie Jones did not even recognize the name of Kristi Fernandez's son Jesse. He failed to see the harm the drugs he sold were causing. How can someone be so uncaring? Was he any different than the Perdue Pharma executives or the over prescribing doctors? Pg. 266
5. Beth Macy tells her thoughts if it was her child, what she would like in place. Do you agree or disagree with her? *Read this section out loud Pg. 270
6. Macy compares rural America to third world countries. The health of RAM patients is far worse in her opinion. How can it be that the health in America in Appalachia is worse than in a 3rd world country? Pg. 274
7. Sue Ella Kobak said over and over again, the answer is always community when solving the opioid crisis. What can we as a community do after reading this book? Pg. 291
8. When Steve Loyd was meeting in Gray county attempting to gain support for Overmountain, a treatment center, he was flooded with opposition. One woman asked the question, "Just how many chances are we supposed to give somebody?" How many chances should we give a person? Pg. 295 (Allow people to answer and share how Beth Macy signs her books. 70 times 7. When Peter asks Jesus how many times should he forgive his brother who sins against him, Jesus replies not seven times, but seventy times seven. Matthew 18:21-22)

9. As we finish the book, a thought occurred to me while writing these questions. How do we help recovering addicts begin to process the trauma from the addiction? Not only were they using drugs, but once they begin to process all that has occurred to purchase their drugs, people around them who have died, the families in turmoil because of the addiction, etc... Getting help to get off drugs seems to be only part of the problem. How do we as a faith community instill HOPE back into their lives?

Next Week: People in Recovery Panel

Following Week: Beth Macy Question & Answer Session

*Heather W. Case has created this work as a study aid to go along with Beth Macy's book "Dopesick" in 2019 for the sole purpose of facilitating a community book study within a faith based setting. Unauthorized use and/or duplication of this material without express and written permission from this site's author and/or owner is strictly prohibited. The documentation may be used, provided changes are not made to material which would change the author's original intent.