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[Budget Cuts Will Hurt Progress on Drug Crisis](#)

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VIRGINIA AND NATION'S SUCCESSFUL REDUCTIONS OF FENTANYL DEATHS FACE HURDLES FROM PROPOSED NATIONAL BUDGET CUTS

By Robert Weiner and Katherine White

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West Virginia has been successfully reducing fentanyl deaths, but the effort now could face hurdles from slashes of government support proposed by the White House and Congress. Cutting funding for treatment, prevention, and enforcement programs, as well as firing federal employees who expedite the assistance, will have adverse effects on overdose numbers, especially for West Virginia, which has the highest proportion of people dying from fentanyl.

Fentanyl deaths in the United States have decreased an estimated [21.3% from 2023-2024](#), the lowest it has been since 2020. West Virginia still has the highest number of drug overdoses per population, with the CDC ranking it the highest death rate in the country at [80.4 per 100,000 deaths](#). In West Virginia, fentanyl holds a significant percentage of drug-related mortalities, with fentanyl being involved in [76%](#) of drug overdose deaths.

Historically, West Virginia has been at the [epicenter](#) of drug overdose mortality. It moved from heroin, then opioid painkillers like oxycontin, to finally what we face now, fentanyl. Former Governor Joe Manchin had made it a priority to provide treatment to the citizens of West Virginia, partnering with former U.S. Drug Czar, Four-Star General McCaffrey, who visited Manchin and the West Virginia legislature back in 2007. We joined in those meetings. History is more than repeating itself now if the White House, DOGE, and Congress do what they are proposing -- slashing critical infrastructure providing treatment, rehabilitation, law enforcement, and prevention for fentanyl.

Drastic cuts and pauses in federal agencies spearheaded by the Musk-DOGE team will hurt the reduction of drug trafficking by the cartels and dealers, as well as drug usage. The U.S. State Department Bureau of International Narcotics and Law Enforcement has been [frozen](#) from DOGE's spending freeze. This includes a [counternarcotics program](#) aimed at screening cargo in busy Mexico ports that trafficking chemical precursors and drugs globally. This freeze also impacts organizations across multiple

government agencies aimed at the treatment and rehabilitation of drug addiction; they would be [cut or severely defunded](#).

At the Substance Abuse and Mental Health Services Administration under the Health and Human Services Department (HHS), the Trump administration plans to cut their budget by [\\$8 billion](#) over 10 years, and three other programs aimed at treatment and prevention of opioids have been cut entirely. Medicaid treats about [50,000 West Virginians](#) annually with a substance abuse disorder. Now even Medicaid, another avenue of government-funded treatment and healthcare coverage for substance abuse, is proposed to be cut by [\\$880 billion over a 10-year span](#). This will have a significant impact on treatment centers and healthcare coverage for those seeking help. Programs for drug treatment and healthcare are now at risk, foolishly guaranteeing increased overdoses. The recent death reductions are not happenstance.

Most [fentanyl distribution](#) arrives from Mexico, and its precursor chemicals and other materials from China. Longstanding action and cooperation between the U.S., China and Mexico has aided in information sharing, joint-led participation programs, and health and education programs that raise awareness of the dangers of fentanyl and disrupt supply of the illicit substance.

Mexico, on the other hand, has had a decades-long struggle for control and enforcement over drug cartels. The [Sinaloa and Jalisco Cartels](#) are the two most powerful groups responsible for the flow of fentanyl between the United States and Mexico. Mexican President Claudia Sheinbaum is focusing heavily on [law enforcement action](#) to break down cartel distribution routes and prosecute those involved.

Canada and Mexico are both at risk of tariffs that could cut U.S. funding to decrease and deter drug trafficking. Alienating both of our neighbors will certainly have an adverse effect on our relations, and ironically, worsen the fentanyl crisis.

The key to decreasing drug trafficking and use is a combined mix of education, treatment, prevention, law enforcement, and foreign policy. Instead of firing people and defunding agencies with no rhyme or reason, Trump must look at the benefits these programs provide for vulnerable populations in the United States, like West Virginia. [General McCaffrey](#), as Drug Czar for the White House, suggested in 2007 that methadone clinics in West Virginia aided in the rehabilitation of those impacted by drug addiction. These clinics, along with other mental health centers, are also at risk of defunding by the aforementioned [\\$880 billion](#) cuts proposed to Medicare, and [\\$8 billion](#) specifically for drug abuse-disorder treatment and rehabilitation. If individuals cannot access the help they need, overdoses will increase.

The most important lesson the Trump administration must learn on drug policy is that cutting budgets and employees from programs that educate, prevent, and treat those who struggle with drug addictions will not help in saving lives. Canada and Mexico also struggle with opioid use. There is an opportunity to continue collaboration in intelligence sharing and law enforcement. Instead of isolating ourselves and firing and defunding valuable institutions. The administration must carefully consider the consequences.

Robert Weiner is the former Public Affairs Director under Drug Czar/ Four-Star General Barry McCaffrey, and spokesman for the House Narcotics Committee under Chairman Charles Rangel. He has personally visited West Virginia with General McCaffrey and joined in the visit to the legislature and the reception with Governor Manchin. Katherine White is a

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