America’s relationship with pain management dates to the Civil War era. Physicians relied on morphine, an extract from the drug opium, to reduce discomfort and promote sleep after surgical procedures. Although historic references, such as Dr. Horace B. Day’s book *The Opium Habit* (1868), hinted at the idea of opioid addiction, weak policy, easy access and behaviors linked to addiction continued. Fast-forward to 1971—President Nixon coined drug abuse as “public enemy number one” and leaned on a high moral code to fight the war on drugs. Consequently, as documented in books such as *Punishment and Inequality in America*, a boost in law enforcement and racial disparities led to disproportioned criminal arrests among low-resourced, minority communities.

The National Institute of Drug Abuse (NIDA) defines opioids as, “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, hydrocodone, codeine, morphine, and many others…which trigger pleasurable effects and pain relief throughout several parts of the brain.” The 1990s introduced new medical research findings that suggested opioid pain medications were safe and a more humane alternative for post-surgery and terminally ill patients. Consequently, a shift in medical oversight, rise in pharmaceutical sales profit, and lack of public health knowledge formed a quiet storm now called the opioid epidemic.

Present-day college students face a surplus of issues: rising debt, mental health, loneliness, global competition, and the opioid epidemic—one of the most devastating prescription and street drug crises the United States has witnessed. Although little data exist to capture the gravity of opioid drug usage on college campuses, studies show an alarming uptick of usage in middle class neighborhoods, small towns and working communities nestled around higher education institutions. As the relationship between campus and community continues to intersect, one might wonder, “How is the higher education community responding to the threat of opioid creep on campus?”

### Looking Back

### Changing Ideas and Attitudes

The Substance Abuse and Mental Health Services Administration’s (SAMHSA) 2016 National Survey on Drug Use and Health found that over 11 million Americans misused prescription opioids, in which nearly 1 million used heroin, a much cheaper, stronger and accessible street drug. Between 1999 and 2015, according to data published in the Centers for Disease Control and Prevention’s *Morbidity and Mortality Weekly Report*, U.S. cities reported more than 183,000 prescription drug overdose deaths, followed by a whopping 64,000 additional opioid-related deaths reported in 2016. To further grasp the effects of this public health emergency, studies show opioid-related overdose deaths have claimed more lives than AIDS at its peak in 1995, and teenagers are not immune.

Researchers suggest casual attitudes toward prescription opioids develop before freshman students ever arrive on campus. Just a few life changes, such as social or academic setbacks, have the potential to weaken a student’s ability to cope.

The College Prescription Drug Study conducted in 2015 by Ohio State University recorded the opinions and experiences of nearly 4,000 undergraduate, graduate and professional students enrolled at eight four-year public and private institutions in the United States. The