

Criminal Justice Issues and Prisoners' Rights

<https://www.acluohio.org/en/news/ohio-misusing-inducing-panic-law-one-overdose-time>

Public Facing Advocacy Writing

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Cities across the state are using an old philosophy to address the current opioid crisis: charge drug addicts with a crime. Specifically in Ohio, cities are charging overdose victims with inducing panic, which includes a first degree misdemeanor, up to 180 days in jail and a \$1000 fine. It doesn't, however, prevent re-offense or address the underlying issues that lead to drug use in the first place.

It's been the government's response for generations to combat drug use with criminal prosecution, but that strategy hasn't worked. The War on Drugs that began in the 1980s resulted in a steep [increase in mass incarceration](#) but failed to address people's underlying addiction issues, which lead to [high rates of recidivism](#), death, and [disproportionately impacted people of color](#). But beyond that, charging overdose victims with inducing panic simply for relying on emergency help during a medical crisis is an inappropriate use and a misapplication of the law.

In 2016, more than 4,000 Ohioans died from unintentional overdoses, 86% of whom overdosed on opioid drugs. According to preliminary governmental data of nationwide drug deaths, about 64,000 people in the United States died from drug overdose. This represents a 22% rise in overdose deaths from 2015.

To date, ten cities have implemented this charging practice, resulting in more than 150 at-risk, vulnerable Ohioans facing criminal charges, who now must deal with the criminal justice system without being provided the resources necessary to treat their drug addiction.

So why are cities resorting to this?

Washington Court House, the first Ohio city to charge an overdose victim with inducing panic, responded to a [letter from the ACLU of Ohio](#) with a [press release](#) explaining that it would not change its policies; that this practice is necessary to connect people in need of treatment with treatment opportunities.

There's no doubt that cities play an important and difficult role in addressing this crisis. It's the city's police and Emergency Medical Services (EMS) that respond to emergencies involving overdoses; it's the city's resources that pay for Narcan, the drug used to revive an unresponsive person who overdosed on opioid drugs; and it's the city and county court systems that are inundated with cases relating to opioid drug overdoses.

But, it is illogical, inappropriate, and unlawful for cities to criminalize a person's reliance upon emergency services during a medical crisis.

This practice doesn't address the core issues of addiction. Charging an overdose victim with a crime will [not deter](#) that person from using drugs again in the future. Drug overdose is common among drug users, and Ohio cities are not seeing a reduction in overdoses as a result of this charging practice. Some Ohioans have now been charged with inducing panic multiple times. For example, in June, 2017, Samantha M. of Austintown Township was charged with inducing panic for the second time in two months related to overdosing on opioids. Samantha's boyfriend told the police that Samantha had a long history of heroin use. Samantha's story shows that the city is failing at achieving its goal of connecting people in need of treatment with treatment opportunities.

Likewise, this policy instills a real fear in the hearts and minds of loved ones who witness an overdose, with this policy in place, they are afraid and reluctant to call for help. **Can you imagine seeing your mom or dad, son or daughter on the verge of dying, calling for help, and then come to learn that your mom has been charged with a crime?** Our cities don't use this tactic with other emergency scenarios, why are they using this untested strategy with some of our most vulnerable members of society?

This is also an inappropriate use of the inducing panic law.

The law prohibits people from acting in a way that causes serious inconvenience or alarm. The state legislators who passed this law did so in order to prohibit someone from inducing chaos, such as making a bomb threat at an airport, causing mass evacuation from planes, causing air traffic control to stop planes from landing at that particular airport, and causing chaos in the air travel schedule.

But here in Ohio, overdose victims and their loved ones are calling for help during a real medical emergency. This is not the kind of chaos envisioned by the legislators that passed the inducing panic statute in the first place.

We have some insight into the types of facts officers rely upon when they recommend an inducing panic charge, and through these facts, we see just how inappropriate and ridiculous the charges are.

In some cases, the so-called serious inconvenience or alarm occurs when police, fire, and medics use sirens when responding to a possible overdose. Under this theory, every emergency response would warrant inducing panic charges.

In other cases, people experiencing the serious inconvenience or alarm are the witnesses who called for help. For example, in February, 2017, Melinda T. of Washington Courthouse took what she believed to be heroin, she overdosed, and became temporarily unresponsive. A family member called 911, and police and emergency medical services responded to Melinda's home. **When police and EMS arrived, Melinda had regained consciousness, and volunteered information about her condition, including admitting that she had consumed opioids. EMS did not need to revive her, and police found neither drugs nor drug paraphernalia in her home. The police charged her with inducing panic on the theory that when her loved one became concerned for her safety and called 911, she caused an annoyance to the public.**

Other cities have found creative, more effective, approaches to addressing the opioid crisis. In Lakewood, Ohio, the city launched a program called [Project SOAR \(Supporting Opiate Addiction Recovery\)](#). Through this program, the city deployed four peer support specialists, who are people in long-term addiction recovery themselves, to advocate for fellow advocates in the emergency department, probation office, and local fire station. The city is also opening funds to provide rapid access to treatment and recovery resources.

In Alexandria, Kentucky, the police chief hired a social worker who put together the [Alexandria ACTS Angel Program](#). This social worker responds to every overdose in the town, talks to the residents, makes connections with recovery facilities, works with insurance companies to make it easier and faster for people in need to sign up for coverage, and she offers overdose victims treatment.

Ohio cities can do better by our at-risk friends and family than to funnel them into the criminal justice system for relying upon emergency help during a medical crisis.

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