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Dual Panics: A Media Analysis of Narratives on the Role of Unauthorized Migration in
America's Overdose Crisis

by

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Introduction

Historically, drug policy and immigration policy have been intricately connected. Drug regulation and prohibition originated with xenophobic and racist sentiments, while restrictive immigration policy has, at times, been rationalized with drug policy objectives. Current public discourse surrounding the southwestern border (SWB) is part of that legacy. Panic around drugs has complicated the implementation of evidence-based approaches and justified hyper-punitive responses. (Dasgupta et al., 2017) Broad misconceptions about how drugs are introduced into the United States have fueled anti-immigration sentiment. (Dunn, 2001) The “border crisis” and the “overdose crisis” are being causally linked in media reports, despite no empirical support for the narrative blaming “illegal immigration” for America’s overdose emergency.

In the face of the lack of evidence-based drug policy, fatal overdoses exceeded 93,000 deaths in 2020. (*Products - Vital Statistics Rapid Release - Provisional Drug Overdose Data, 2021*) Law enforcement and drug interdiction have been the methods preferred by the United States government to address drug harms. Evidence-based practices to reduce rates of drug overdose death, such as harm reduction, have been historically underfunded. The first-ever federal funding allocation for harm reduction occurred in July of 2021 and totaled \$30 million dollars. Contrast this with the \$26 billion the federal government spent on the drug war in 2015. (Foley et al., 2019)

The current overdose crisis has complex chains of causality, but inflows of migrants on the SWB is not among those pathways. Contrary to popular belief, drugs are introduced into the United States primarily through legal points-of-entry. (*2019 National Drug Threat Assessment*) (*2022 Drug Threat Assessment*) Checkpoints are supervised by Customs and Border Patrol (CBP) officers, where all persons and vehicles are subjected to inspection and law enforcement supervision. The most common method of drug introduction is private vehicles driven by US citizens, permanent residents, or foreign citizens with US-issued tourist visas. The second-most common method of introduction is commercial vehicles that are making otherwise-authorized commercial crossings of freight. Vehicles and persons are subjected to inspection by CBP upon attempting to cross the border.

The DEA admits desert crossings (between points-of-entry) are an insignificant minority of drug importations into the United States. (*2019 National Drug Threat Assessment*) Between border crossings are rarely used to import the drugs considered the “greatest threat” to communities: methamphetamine and heroin. (*2022 Drug Threat Assessment*) Nevertheless, it is the method of importation often seen in media depictions.

Waves of migrants fleeing climate change, violence, corruption, and economic insecurity have been arriving on the southwest border. Some are seeking legal asylum and others attempting unauthorized crossings. US-sponsored drug interdiction efforts abroad have supported repressive regimes and violence in their home countries. The destabilization caused by US and US-sponsored efforts is a known factor promoting outmigration. (“Defund the Global Policeman,”

2020; Lovell, 2010) The data are clear: attempted border crossings have increased, creating a political debate.

	FY17	FY18	FY19	FY20	FY21 TD JUNE
Office of Field Operations (OFO) Total Encounters¹	216,370	281,881	288,523	241,786	199,496
U.S. Border Patrol Total Encounters²	310,531	404,142	859,501	405,036	1,078,226
Total Enforcement Actions	526,901	683,178	1,148,024	646,822	1,277,722

Figure 1: Customs and Border Patrol Monthly Apprehensions

(<https://www.cbp.gov/newsroom/stats/cbp-enforcement-statistics> - accessed 9 August 2021)

Drug overdoses have been rising steeply for a decade. Illicitly manufactured fentanyl have spurred much of the surge in overdoses. The proliferation of IMF is posited to be a result of prohibition itself via the “iron law of prohibition.” (Beletsky & Davis, 2017) Absent in the literature is a causal relationship between increased migration and increased drug trafficking. Detailed government reports do not generally associate migration with drug trafficking, instead focusing on seizures made at points-of-entry. (*2019 National Drug Threat Assessment*)

Despite incendiary inferences in media of a causal relationship between migration and drug trafficking, said relationship has not been shown to exist. The increase in drug overdoses is improperly associated with the increase in migration in media accounts. Politicians’ false statements are often repeated verbatim without critical analysis or subsequent correction in news stories. Analyzing the frequency and source of media misinformation is critical to countering it and reestablishing a factual basis for public policies.

The field of media analysis is predicated on the acknowledgement that media have a profound impact on public knowledge. Media reports also impact public policy. (King et al., 2017) Misinformation in the media therefore has potential impacts on public health and policy. Factual narratives by legitimate subject matter experts are crowded out by the proliferation of repetitious media stories that disseminate misinformation. (Foley et al., 2019) To identify misinformation in media stories regarding the southwest border, drugs, and migration, we performed a media analysis.

Analyses have been performed on the media framing of migration in various regions, including Europe and Southeast Asia. (McAuliffe & Weeks, 2015) No such analysis has been performed regarding perceived methods of drug importation. There is a gap in the literature where the discourse of migration and drugs intersect, as they so often do in public conversation. To our knowledge, a media analysis on the association between the southwest border, migrants, and drugs has not been conducted.

Methods

In July of 2021, we utilized the Media Cloud information ecosystem to identify mainstream media content published between June 26th and July 26th of 2021, related to drug importation/trafficking, migration, and the southwestern border between the US and Mexico. Media Cloud (www.mediacloud.org) is an open-source free web-scraping tool that generates content collections by topic, providing results that can be further modified using search operators. Within the database, we queried three terms, enhanced by Boolean wildcard operators: drug* OR fentanyl AND border.

We reviewed the resulting dataset for relevance and duplication. Articles not referring to the US-Mexico border were excluded. Articles were coded as “misinformation,” “corrective,” “partially corrective,” or “neutral.” To be considered misinformation, the content was determined to either explicitly or implicitly link increases in the frequency of border crossings or migrants with increases in drug seizures, drug overdoses, or fentanyl prevalence in communities. Explicit association made a direct causal supposition, implicit association placed information about increases in unauthorized migrant crossings adjacent to a sentence or paragraph about increases in drug importation, drug seizures, or drug prevalence. If a media article quoted a politician without fact-checking their statement or countering misinformation with facts, it was deemed misinformation.

Content that accurately communicated the nature of drug importation into the country—through legal points-of-entry—was deemed corrective. Content that presented both misleading and corrective narratives (by either incompletely characterizing the nature of drug importation or providing anecdotal accounts without addressing broader patterns) was deemed “partially corrective.” Content was deemed neutral if it neither misled nor countered but still discussed the SWB and drugs, such as content calling for more CBP resources to increase drug interdiction efforts without specifying if referring to legal points-of-entry.

Building on the methodology developed by Beletsky et al., (Beletsky et al., 2020) search terms were input into Media Cloud. Out of the initial batch of results, articles were analyzed and omitted for irrelevance and redundancy. Of the remaining articles, coding followed a protocol of reading each article individually and categorizing it based on the above-mentioned criteria. It was conducted solely by the first author of this paper.

Results

The query produced 102 relevant news articles. Content included coverage of “the border crisis,” the overdose crisis, and politicians and their statements regarding the aforementioned topics. Many articles found were directly or indirectly quoting politicians and their statements.

In a June disaster declaration, Texas Governor Greg Abbott said, “President Biden's open-border policies have paved the way for dangerous gangs and cartels, human traffickers, and deadly drugs like fentanyl to pour into our communities.” Variations of his original statement were identified repeatedly in the results. “...Texas Governor Greg Abbott said that the Biden administration’s relaxed immigration policies are to blame for the massive influx of fentanyl infiltrating the Texas interior.” (Downey, 2021) Statements repeating misinformation are themselves misinformation.

The journalistic tactics to convey association between migrants and drugs varied, with the following *Fox News* article illustrating a common tactic. The assertion of politicians is repeated without further context. “Republicans have accused the Biden administration of incentivizing illegal activity at the border with laxer immigration and border policies, which they say has contributed to the massive spike in migrant encounters and a surge in drugs as well.” (Shaw, 2021)

In a *Daily Caller* article, which is otherwise factually based and informative regarding the overdose surge, fentanyl proliferation and the overdose crisis are implicitly linked with the border crisis. “Meanwhile, at the southern border, Fentanyl seizures are reaching record levels as the Biden administration struggles to deal with the ongoing border crisis. CDC officials said the synthetic opioid fentanyl, which is 50 times more potent than heroin, is a key factor in skyrocketing overdose deaths.” (Housman, 2021) The border crisis is referring to the documented influx of migrants on the southwest border. The next sentence refers to the overdose crisis, implying causation.

The search period coincided with two drug policy-related data releases by the CDC. Provisional data indicating 2020’s drug overdose deaths exceeded the previously established historic high was released by the CDC, followed by an announcement that US life expectancy declined by a year and a half. The second-most influential factor in the decline was drug overdose. Both data releases proved newsworthy and spawned many articles addressing them within the analyzed range.

Articles linking the increase of fentanyl with the increase of migration were common. Overall, only six articles were found to be either corrective or partially corrective—only 6% of the total dataset. A full 80% of media articles about drugs and the southwest border in the date range were found to be misleading. Only 2 articles—less than 2% of total articles found during the range—were found to be corrective in that they asserted that drugs are introduced to the country primarily via legal points-of-entry, therefore via areas already subjected to Customs and Border Patrol inspection and law enforcement supervision.

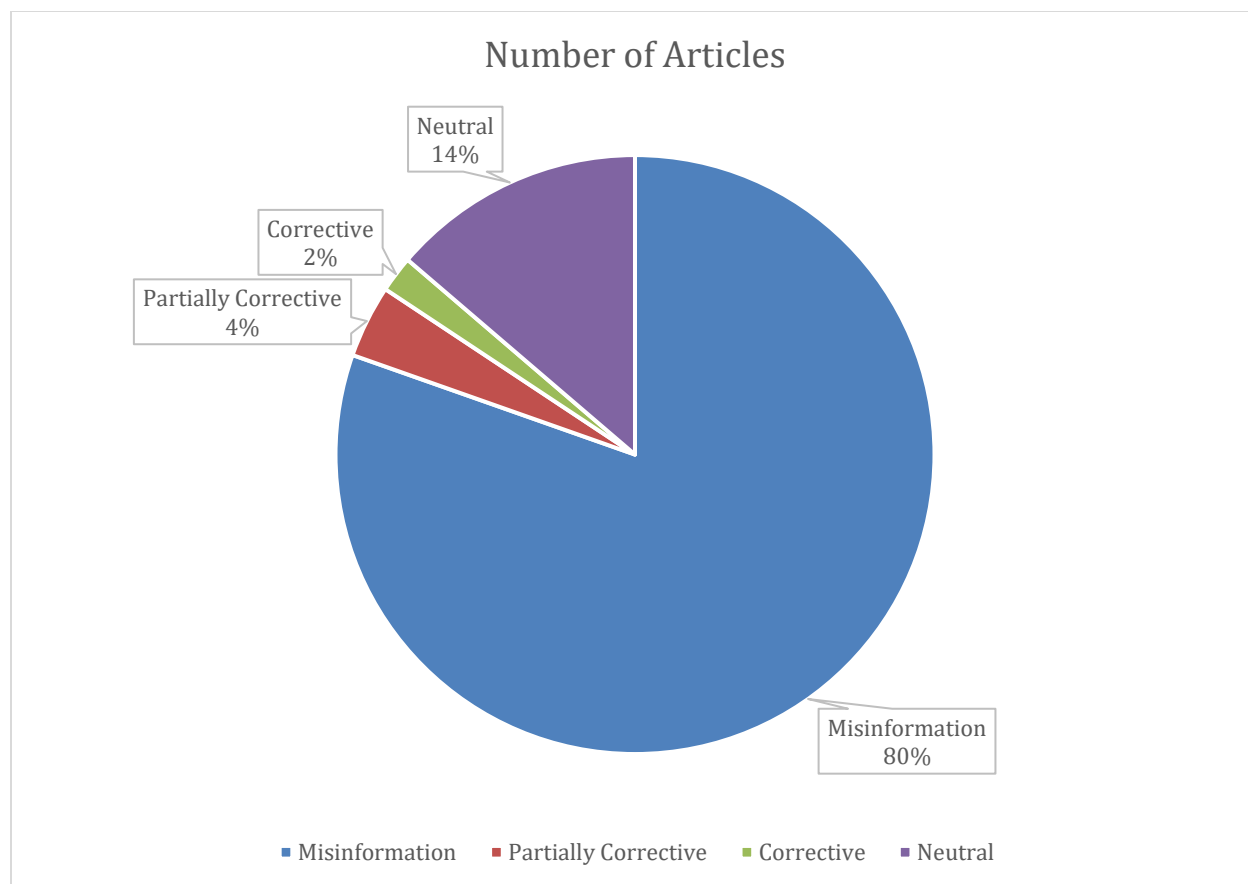


Figure 2: Proportion of articles by category

Discussion

Racist, anti-immigrant and anti-immigration sentiment have long been associated with drugs and drug panics. (Wensley, 2020) The race, country of origin, and the drug producing panic have morphed through the eras. The harmful association of a particular group of people with illicit drugs, implying criminality, has remained remarkably consistent.

The high prevalence of misinformation within the media is one explanation as to why the gulf between evidence-based interventions and current practice is so wide. Medications for opioid use disorder remain exceedingly difficult to access. Treatment services are poorly regulated, prohibitively expensive, and provide inconsistent results. Overdose prevention education and supplies remain controversial and scarce. The previously listed interventions are proven to save lives. Current practice and budgetary priorities focus on supply-sided interdiction and incarceration. Incarceration has been shown to dramatically increase rates of fatal overdose. (Beletsky, 2015)

The DEA's annual budget is \$2.98 billion dollars and CBP's annual budget is \$15 billion dollars. Both budgets have increased substantially year-over-year, right along with overdoses. When state, county, and city expenditures are included, it is calculated that the War on Drugs has cost more than \$1 trillion. (Lee, 2021) Meanwhile, the field of harm reduction celebrated the first-ever allocation of federal funds at a mere \$30 million. (Larue, 2000) Substance use disorder

funding more broadly reached the unprecedented height of \$4 billion in 2021, still a fraction of total drug war expenditures.

Today's drug panic is fueled by fentanyl, a synthetic opioid that is supplanting heroin in the drug supply. It is frequently pressed into pills and sold as oxycodone or alprazolam. (Ciccarone, 2017) The proliferation of fentanyl in the drug supply is a feature of drug prohibition, whereby smaller and more compact substances are preferred for their ease of concealability. This concept is titled the "iron law of prohibition" is the predictable result of increased interdiction efforts. (Beletsky & Davis, 2017) Linkage to the border crisis is not the only myth that is proliferating in the media. Reports of the mythical powers of fentanyl are spread by law enforcement. (Beletsky et al., 2020)

Fentanyl seizures along the southwest border—at ports-of-entry—have increased steadily since 2016. (*2020 National Drug Threat Assessment*) Drug seizures alone are a murky proxy for the drug market itself. They could reflect either increased importation attempts, increased efficacy of law enforcement interdiction, or some combination thereof. Seizure data is a highly flawed metric that reveals little meaningful information. Fatal overdoses have more than doubled in five years due to the increased volatility of drug purity, mostly motivated by fentanyl.

While immigration has long been a priority in conservative politics, the fervor was increased under the Trump administration's campaign promise and presidential foil of constructing a border wall. After Biden assumed office in January of 2021, a different kind of misinformation fueled a large surge of migrants arriving on the southwest border. (Spagat, 2021) CBP detained over 180,000 people in June of 2021. This figure includes people who presented at points-of-entry seeking asylum and those attempted unauthorized crossings. (*Southwest Land Border Encounters | U.S. Customs and Border Protection*, accessed 2021)

While the existence of both a "border crisis" and an "overdose crisis" have been asserted, one is not causally related to the other according to the data. (Cobian, 2019) Pre-COVID, American citizens were identified by CBP as attempting to illegally import drugs into the United States more often than foreign citizens. (Bjerk & Mason, 2014) The proportion of illegal importation attempts perpetrated by US citizens rose substantially during COVID, when foreign citizens with tourist visas were prohibited from attempting land crossings at points-of-entry. (McFall, 2021) As early as the year 2000, NAFTA was cited as a driving force behind increased drug importation as it provided infinitely more commercial opportunities to smuggle drugs in otherwise legitimate loads. (Larue, 2000)

A review of the literature indicates that drugs enter the country most often through legal points-of-entry, either in passenger vehicles—most likely driven by an American citizen—or in commercial loads. (*2020 National Drug Threat Assessment*, Bjerk & Mason, 2014) A review of the media results presents a far different picture, with drug smuggling most often associated with unauthorized foot crossings through the desert. There is little factual basis for this recurring representation and the government's own reports contradict it. The pernicious repetition of this myth may serve a political aim, detached from any factual basis.

Admitting that drugs are coming through points-of-entry in areas supervised by agencies with annual funding in the billions would be an indictment of law enforcement failure. It may be considered embarrassing if the public understood that drugs come into the country under the watchful eye of law enforcement officers.

In the beginning of the overdose surge, prescription opioids were largely blamed in media stories. Prescriptions have declined precipitously while overdoses have more than doubled. This has challenged what was once the dominant and widely accepted narrative about who or what is to “blame” for the crisis. Lacking the ability to continue scapegoating opioid prescribing and the pharmaceutical industry, the media have identified a new scapegoat: migration.

American drug policy has long needed to identify the villain-of-the-moment to justify costly and punitive policies that would otherwise be considered inhumane. Overly simplistic “solutions” fail to provide meaningful results as they fail to address both the proximate and underlying structural causes of addiction. (Dasgupta et al., 2017) Addiction is a complex social and biomedical phenomenon rooted in culture and impacted by socioeconomic status, race, and class. Supply-sided interventions do little more than shift the burden of harm and make the drug supply increasingly toxic.

Public policy based on misinformation crowds out evidence-based policies that would provide health benefits if implemented. Drug interdiction is funded at rates many times higher than harm reduction, treatment, and initiatives to address the structural drivers of addiction. Realigning budget priorities to emphasize evidence-based policies is imperative to address our crises.

A physical border wall and enhanced border security have not been shown to have a statistically significant effect on drug overdose but has been shown to increase the rate of migrant deaths. (Leon, 2015) The reality of drug importation is discarded in favor of fear-mongering claims that increased migration rates are fueling our overdose crisis. This inaccurate linkage fuels anti-immigrant sentiment and policies. The proliferation of drug-and-border myths has a deleterious effect on public health.

Migration and drug trafficking need not be discussed in tandem for they are separate phenomena. The ubiquity of media reports linking the two is most likely a byproduct of anti-immigrant and xenophobic sentiment. Scapegoating drugs on migration justifies bloated budgets and infers that the “solution” is simply more law enforcement. To effectively address our overdose crisis, we must dispel misinformation and base public policy based on evidence and outcomes. Regarding the southwest border, this approach has the dual effect of tamping down misinformation-fueled anti-immigrant sentiment.

Limitations

Media Cloud has known limitations; its results are sometimes hindered by paywalls and archival practices. There are also methodological limitations; redundant coding was not performed. There are many different keywords that could have been searched to provide relevant results, but terms such as “narcotics” and “illegal alien” introduced inherent bias in the results. The most unbiased terms were selected to produce more representative results. Due to the narrow time window selected, the sample size is small. A comparative analysis with another period of time could

provide additional information. Even in view of these limitations, this article adds new empirical basis for understanding the lopsided coverage these dueling crises have received in the media. This is important formative data.

Future research may also address the spread of misinformation on social media, the linkage of China with fentanyl and the ongoing process of using fentanyl to fuel xenophobia, and how the phenomenon of linking migrants with drugs is related to the linkage of migrants with infectious disease.

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