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Purdue Pharma and the Making of the Opioid Crisis

Positionality Statement: It is important to note that I am approaching this conflict from the perspective that despite pharmaceutical companies being for-profit organizations, they should prioritize the safety of their product over the speed with which they are able to sell it. However, I will attempt to treat all sides of this conflict equally and fairly, beginning with the acknowledgement that the opioid crisis is a systemic issue, rather than one perpetuated by a single company.

Section I: Conflict Introduction

In 2018, the Massachusetts Attorney General's office filed a lawsuit against the multibillion dollar pharmaceutical company Purdue Pharma and its executives, accusing them of intentional deception regarding the addictive nature of opioids. At this point, the opioid crisis in the U.S. was severe, with many people abusing prescription opioids, which often led to overdose, or acted as a gateway to more lethal drugs. The suit alleged that the company knew about the highly addictive and potentially lethal effects of their drug, OxyContin, but intentionally misled doctors and the general public in order to make a greater profit (Mass.gov, 2025). This was not the first lawsuit against Purdue Pharma. It was, however, one of the many that contributed to the company's end. In 2019, following a continuous barrage of lawsuits from more than half of the

US states, in addition to hospitals, insurers, and individual victims, Purdue Pharma filed for bankruptcy (Hoffman, 2024).

In addition to the thousands of lawsuits, the media also played a significant role in emphasizing Purdue Pharma's role in perpetuating the opioid crisis. In 2021, HBO released a two part documentary called *The Crime of the Century*, Hulu released its miniseries *Dopesick*, and the film *All the Beauty and the Bloodshed* became an Academy Award nominee. In addition, author Patrick Radden Keefe published his award- winning novel *Empire of Pain*. These pieces of media portrayed the dark realities of the opioid crisis and addiction in a stark and unflinching light, received critical acclaim, and succeeded in reaching many different sectors of the American public. This, in addition to prolific news coverage, played a significant role not only in Purdue Pharma's eventual bankruptcy, but also in ensuring that the company and its founding family, the Sacklers, were villainized to the point of being dubbed "the most evil ... in America" (Mulvihill, 2020).

To the Americans affected by the opioid crisis, this period was the beginning of a reckoning long overdue – OxyContin was approved by the FDA and released to the general market in 1995, and studies have shown that since then, more than 400,000 people in the US have died from an opioid addiction, with around 115 deaths a year (Kolodny, 2020). In addition, it is estimated that 2 million people are currently living with an opioid-related substance use disorder (American Bar Association). One study found that almost 50% of patients who take opioids for chronic noncancerous pain become addicted, and another found that opioids are the leading cause of accidental death in the US (Salmond & Allread, 2019; Kolodny, 2020).

Many members of the public understandably place blame for the opioid crisis on Purdue Pharma and the Sackler family. For many years, Purdue Pharma was the primary seller of

prescription opioids, promoting the drugs as non-addictive, despite many scientific studies proving otherwise (Chow, 2019). It is important to note, however, that the opioid crisis does not begin or end with a single pharmaceutical company. Regulatory failures and governmental oversight also played significant roles in allowing the opioid epidemic to get so out of hand. Additionally, despite the fact that Purdue Pharma has declared bankruptcy, the abuse of prescription opioids continues to be a problem. In many places, other pharmaceutical companies have taken over Purdue Pharma's role, increasing their own opioid production and selling them in counties where opioid dependency is the strongest (Kirschman, 2023). In order to fully understand all of the intricacies and systems involved in the opioid crisis, it's important to begin in the mid-1900's, with the founding of Purdue Pharma.

The Sackler Family & The Founding of Purdue Pharma

Purdue Pharma's origins can be traced back to 1952, when Arthur Sackler, a New York descendant of Galician Jewish immigrants, bought the Purdue Frederick Company along with his two brothers, Mortimer and Raymond Sackler (Rosenfeld, 2025). The Purdue Frederick Company was a relatively small business, dedicated mostly to selling ear wax removers and laxatives. The brothers, all of whom had attended medical school, swiftly shifted the focus of the company to the production of "pain management medications," most of which were opioid-based (Chow, 2019). The company developed several other hit drugs before creating OxyContin, which they made by developing a controlled-release formula for oxycodone, which is a heroin derivative with pain-relieving effects that are "twice as powerful as morphine" (Rosenfeld, 2025). From the beginning, OxyContin was marketed as a "wonder drug" that was supposed to be superior to other pain relief medications and last for twelve hours – much longer than standard pain relief medications (Chow, 2019).

By the time OxyContin was released for general public use, Arthur Sackler and many of his direct descendants had distanced themselves from Purdue Pharma. His two brothers remained CEOs of the company, and many of their relatives remained closely involved (Walters, 2018). The family profited heavily from the sale of OxyContin, generating billions of dollars in revenue for themselves and their company in a matter of a few short years. From the beginning, there were glaringly obvious signs that OxyContin was a dangerously addictive and potentially fatal drug (Rosenfeld, 2025). Despite this, Purdue Pharma and the Sacklers continued distributing OxyContin as they had been doing since its initial approval for widespread use. In the lawsuits brought against them, the company maintained that they didn't know about the addictive nature of OxyContin, despite legal evidence suggesting that they were aware as soon as 1996, a year after the drug's release (Meier, 2018). The Sacklers themselves continue to "dispute the allegations that have been made about [their] family," even after their company was forced to declare bankruptcy (Mann, 2021).

Marketing Strategies and "Reputation Laundering"

There are many different factors that contributed to the lack of opioid regulation in the US, despite evidence of its dangerous side effects. Purdue Pharma's savvy marketing strategies were one factor, one of which was lying about the statistics of opioid harm. Spokespeople for the company repeatedly asserted that the risk of addiction to opioids was as low as one percent, in spite of the fact that numerous studies showed the risk reaching as high as fifty percent (Chow, 2019). Additionally, despite the "wonder drug" claims, clinical trials proved OxyContin to be only equivalent to other pain-relief medications, rather than superior (Chow, 2019). The lived experience of patients showed that in most cases, its effects did not last the full twelve hours.

These false claims were given further validity when supported by credited academics and researchers on the topic, who were often directly employed by Purdue Pharma, or paid by the company for their work. Around the same time that the first lawsuit was brought against Purdue Pharma, an article came out asserting that the only people who OxyContin affected in a harmful way were prior drug addicts. According to this article, “[w]hen you scratch the surface of someone who is addicted to painkillers, you usually find a seasoned drug abuser with ... previous habit[s]” (Satel, 2004). While this claim is problematic for many reasons, one the biggest was that scientific evidence did not support it – later investigation found that Purdue Pharma had financially influenced and contributed their falsified data to the study (Armstrong, 2019).

Another one of Purdue Pharma’s successful marketing tactics was giving financial incentives to doctors and sales representatives who prescribed and promoted OxyContin. Using a database, they were able to target the doctors who had already demonstrated an openness to generalized opioid prescription, and use financial incentives to encourage them to prescribe more (Van Zee, 2009). They also specifically trained sales representatives on what to say about the benefits of OxyContin, hosting entire symposiums that falsely educated about the drug’s “low addiction rate” (Chow 2019). In doing so, the company was able to increase their physician call list from approximately 33,400 – 44,500 doctors to approximately 70,500 – 94,400 doctors in its first four years of marketing (Van Zee, 2009). Many of the lawsuits filed against Purdue Pharma on behalf of doctors asserted that they were purposely “deceived” and “misled” about the true dangers of OxyContin, and that the company pushed them to go against their traditional prescribing practices (AG Shapiro Sues Oxycontin Creator, 2019.)

Despite these blatant legal violations, the Sackler family's reputation remained relatively intact until the late 2010's. They were successful in doing so, in part, due to a tactic known as "reputation laundering" (Rosenfeld, 2025). By donating significant sums of money to charities and non-profit institutions, the Sackler family was able to maintain their image of philanthropic goodness, especially within wealthy societies (O'Hagan, 2022). Doing so allowed them to largely evade criticism while their company continued to disseminate opioids on a large scale (Walters, 2018).

Aftermath of Bankruptcy

Despite the fact that the Sacklers still do not publicly recognize their company's principal role in perpetuating the opioid crisis, they have settled many of the lawsuits with payouts worth billions of dollars. Additionally, their bankruptcy stipulation includes specific plans for monetary allocation to states, local governments, and individuals harmed by the crisis, as well as specific funds for research to "abate the opioid crisis nationwide" (Mass.gov, 2025).

Purdue Pharma was not the only company to sell opioids on a large scale, though they are the most infamous. For years, they were the biggest and most successful, far outmatching their competitors' profits (Chow, 2019). Their position as the leading force behind the opioid crisis made them the most obvious target for lawsuits and media attacks, which successfully drove the company's finances, along with their reputation, into the ground. However, it will take more than holding one company accountable to resolve the opioid crisis. Even now, with Purdue Pharma no longer a functional company and the Sackler family scrambling, other pharmaceutical companies are increasing opioid production, using Purdue Pharma's previous tactics of promotion to physicians, targeting counties where the opioid crisis is still severe (Kirschman, 2023). Given

this evidence, it is obvious that bringing one company down will not enact systemic change. The question is, what will?

Power Analysis

Pharmaceutical Companies.

Power imbalances are entrenched in capitalism. Pharmaceutical companies, whose primary goal is to make a profit off of drugs that they develop and sell, benefit from this imbalance. For almost 30 years, Purdue Pharma held significant power over many populations. For one, they held the power to mediate rewards (ie, monetary incentives) for the doctors and nurses with whom they collaborated. In the same vein, they held coercive power to take these rewards away should the doctors stop prescribing OxyContin or the journalists stop reporting on its benefits. Over the general public, they held expert power, based on the assumption that pharmaceutical companies have the ability to make effective, nonaddictive medicines. They also held legitimate power in the eyes of the public, founded on the implicit trust that is needed between a drug company and its consumers. In other words, consumers, doctors, and federal agencies needed to trust Purdue Pharma, and thereby assign them legitimate power, to make drugs that wouldn't send the nation into a crisis costing billions of dollars and affecting millions of lives. Once trust between Purdue Pharma and its consumers was broken – and its legitimate power taken away – it began to lose all forms of power and influence that it had previously wielded.

While taking away the power of Purdue Pharma has abated the opioid crisis to some extent, it has not shifted the basic elements of the system that allowed the opioid crisis to occur in the first place. Other pharmaceutical companies have the potential to hold the same type of power as Purdue Pharma over the same agents – doctors, journals, civilians, etc. And, the actions

of many other companies – even the ones that are currently increasing their opioid sales – have not been widely questioned, meaning they also wield legitimate power in the eyes of the public. When the power of one company is taken away, another will merely swoop in to fill the space that it left behind (Kirschman, 2023).

The FDA & Other Governmental Institutions.

To get to the root of the problem, it is necessary to analyze the power dynamics of the systems that allow pharmaceutical companies to operate in this way. The FDA is one of the most powerful organizations when it comes to drug regulation. According to a US government website, the primary responsibility of the FDA is to “[protect] the public health by ensuring the safety, efficacy, and security of human ... drugs” (USA.gov). There are several exceptions, but most drugs cannot be used in the US without FDA approval (FDA.gov). The FDA therefore wields an enormous amount of expert and legitimate power over doctors and consumers, who must rely on the organization to only approve medications that exhibit a high degree of safety and efficacy.

The nature of the FDA as a regulatory organization means that it holds significant coercive power over pharmaceutical companies – for example, if a drug does not initially meet FDA regulations (or if it’s later discovered not to be safe or effective), the FDA has the power to take that drug off the market, thus removing any profit that the pharmaceutical company would make from it. In theory, this type of coercive power provides incentive for pharmaceutical companies to create drugs that are not widely addictive. However, when the FDA fails, for whatever reason, to regulate drugs correctly, the power they hold over pharmaceutical companies decreases significantly. This failure of the regulatory system is one of the biggest reasons the opioid crisis got so out of hand.

One potential reason for the FDA's initial approval of OxyContin was a lack of resources and a lack of sufficient regulatory guidelines. When the FDA first approved OxyContin in 1995, it was dealing with an influx of more than thirty thousand promotional packages that needed to be reviewed. This excess amount of material combined with less than forty staff members made it extremely difficult for all proposed medications to be reviewed closely. The FDA only reviewed Purdue Pharma's proposal in detail a year after OxyContin was released, which is when they found Purdue Pharma's falsified claims that made the drug appear less addictive than it actually was. Upon discovering this, the FDA obtained an inquiry from the General Accounting Office to begin further investigations into the product; however, the promotional damage had already been done (Chow, 2019). This was due in part to the FDA permitting pharmaceutical companies to market their product to physicians before the product's approval. This meant Purdue Pharma was able to advertise their falsely marketed product to physicians before OxyContin was on the market, thus beginning the flow of mass misinformation (Chow, 2019). Instead of implementing institutional reforms in response to opioid regulation failures, the FDA chose to adopt a defensive stance (Kolodny, 2020). Governmental agencies similarly failed to admit fault or implement change: rather than increasing FDA funding or enforcing a more thorough regulatory process, they were content to focus the blame for the crisis entirely on Purdue Pharma and the Sackler family.

Section II: Psychological Concepts

Overview

In order to more effectively understand the systems involved in the opioid crisis, it's important to first look at how these institutions think – what their primary motivations are and

how they justify their actions. In this section, I will first focus on the strategic and psychological biases that Purdue Pharma and the Sackler family used to protect themselves against acknowledging the harm that they caused through the widespread distribution of OxyContin. I will also examine the psychology that motivated the thinking of the victims of Purdue Pharma, and how they relate to central ideas of blame, responsibility, and justice. Finally, I will examine the factors that keep the flawed regulatory and pharmaceutical systems in place. Examining the psychological forces that these systems exert on victims and perpetrators alike is necessary to understand how certain institutions might be leveraged in the future in order to enact more positive system change.

Purdue Pharma & The Sackler Family

When Purdue Pharma declared bankruptcy, it admitted culpability in “knowingly and intentionally conspir[ing] and agree[ing] with others to aid and abet” the widespread distribution of opioids, even in cases “without a legitimate medical purpose” (Kuchler 2020). While most evidence of the illegal marketing of OxyContin was placed squarely on Purdue Pharma, which the Sackler family owns, the family itself has been found guilty of personally profiting from the company’s opioid sales, withdrawing more than ten billion dollars to put in individual trusts (Rosenfeld, 2025).

Despite this, the Sacklers claim to have acted “ethically and lawfully” in all business endeavors (Isidore, 2020). Neither does the family admit culpability in perpetuating the crimes to which Purdue Pharma confessed, instead expressing “deep compassion for the people who suffer from opioid addiction ... and [a] hope ... to address their critical need” (Isidore, 2020). By stating compassion for the victims of the opioid crisis, the Sacklers are presumably attempting to put forth a public reputation that is respectable and blameless. They may have even convinced

themselves that they are truly blameless; both in their role behind starting the opioid crisis, as well as in taking money from the company for their own personal use. This refusal to admit guilt speaks to the strong core social motive of perceiving oneself in high esteem. In the rest of this section, I will examine the psychological concepts that allowed the Sackler family to stay complicit in perpetuating the opioid crisis while continuing to hold themselves in high esteem.

Purdue Pharma's continued promotion of OxyContin, despite its harmful side effects, shows a lack of empathy towards the victims of the opioid crisis. A recent study on empathy shows that people tend to forgo the emotion more frequently than one might expect (Cameron et al., 2019). The study recruited everyday participants and showed them various situations of strangers in distress. Contrary to expectations, participants tended to avoid empathizing with the strangers, supporting the theory that people tend to be cognitive misers who prefer putting the least possible amount of effort into interpreting complex problems and emotional states (Cameron et al., 2019). When looking at the case of Purdue Pharma and the Sackler family, it becomes obvious how easily they were able to avoid empathizing with victims of the opioid crisis. For these high-up executives and well-off philanthropists, the people who were most affected by opioids were the ones they could relate to the least, strangers from a completely different world.

While it is easy to avoid the cognitive load of empathy when those who require empathizing with are complete strangers, it is even easier to do so when these victims have been dehumanized in some way. It is true that the Sacklers have never issued any public statements dehumanizing those addicted to opioids. However, it is also true that drug addicts are traditionally one of the most dehumanized groups in the US. Often deemed, the "lowest of the low," the public tends to perceive drug addicts as lacking in both warmth and competence (Tipler

& Ruscher, 2014). Drug addicts have frequently been pushed to the margins of society, often inspiring feelings of disgust and disdain (Brown 2020). The stigma that addiction is an active choice made it easy for the public and the media to ignore the increasingly severe effects of the opioid crisis, which gave Purdue Pharma implicit permission to continue their marketing campaign and increase their sales (What led to the opioid crisis, 2022). Additionally, common media phrases such as “drug abuser” or “addict” are inherently stigmatizing and led to less sympathy for victims of the opioid crisis between 2008 and 2018 (McGinty et. al, 2019). It is therefore important to note that while Purdue Pharma and the Sacklers did display a lack of empathy towards the victims of the opioid crisis, the media’s reliance on dehumanizing rhetoric and lack of coverage of the lawsuits against Purdue Pharma implicitly contributed towards the continuation of the crisis as well.

Moral disengagement is another psychological phenomenon that the Sackler family likely used as a way of protecting themselves from their own harmful behaviors. Moral disengagement refers to a phenomenon where people are able to cognitively restructure destructive or reprehensible behaviors and view them as morally acceptable, which frequently happens when these behaviors are perpetuated by members of an ingroup (Castano, 2008). The dehumanization of the victims makes moral disengagement much more accessible, and it likely emerges as a way to reduce or prevent the emergence of shame and guilt (Castano, 2008). The Sacklers’ moral disengagement is particularly obvious in some of their most recent press releases, in which they express “deep sadness” at the state of the opioid crisis (Isidore, 2020).

The ease with which empathy can be avoided, in addition to moral disengagement, are two probable reasons that the Sacklers, as well as the other executives of Purdue Pharma, were

able to market OxyContin so aggressively despite prior awareness of the drug's high addiction rate. By engaging in these psychological processes, Purdue Pharma and the Sacklers were able to protect themselves psychologically from the harm they perpetuated, thereby maintaining their core social motive of esteem. These processes have persisted despite the court system having found both the company and the family guilty of various crimes. While it would be preferable for the Sacklers to admit some degree of remorse or complicity in the opioid crisis, it is ultimately most important that they have been found guilty in the court system and are now being forced to pay for their crimes.

The Victims and Their Lawsuits

When Purdue Pharma declared bankruptcy, they agreed to pay more than \$8 billion in damages and close down the company. Most of that money is currently in the process of being distributed to the victims of the opioid crisis, as well as various treatment programs. The company itself was dissolved, and its assets will be used to create a new “public benefit company,” which has been stated will function “entirely in the public interest rather than [with the purpose of] maximiz[ing] profits” (Isidore, 2020). The public's reaction to this new company was, understandably, mixed. On one hand, it has stated that future profits will be dedicated to paying fines and penalties, “help[ing] to combat the opioid crisis” (Isidore, 2020). Additionally, it will research new drugs to deal with opioid addiction and overdose. On the other hand, this company will continue manufacturing OxyContin, and there is no guarantee that the distribution of the drug will be any more regulated than it was before (Isidore, 2020). In this section, I will identify various actors' reactions to the court decisions from a psychological perspective, with the goal of distinguishing between people's motives of blame, justice, and revenge.

Psychology has found that people tend to view members of outgroups by their differences rather than the things they have in common (Chambers & Melnyk, 2006). When taking this phenomenon into account, the lawsuits against Purdue Pharma were especially unique – individual citizens saw their interests directly aligned with state governments, hospitals, and even insurance companies, all of whom had the principal goal of bringing one company down. This degree of unity despite very obvious differences is one possible reason for why the lawsuits against Purdue Pharma gained so much traction.

Blame is a central motivator for desiring justice and in some cases, revenge. Blame is usually viewed as an emotion-driven concept, and can be heightened by several things. Studies show that blame increases when the harm caused is perceived to be intentional, as well as if the harm was enacted by people who had the power to mitigate the situation, and instead chose not to (Alicke et al., 2018). In the case of Purdue Pharma and the Sacklers, both of these things were true. The legal evidence that emerged citing Purdue Pharma's knowledge of OxyContin's addictive nature, their falsified scientific studies, and the monetary incentives they gave prescribers all supports the idea that Purdue Pharma intentionally perpetuated the opioid crisis, choosing not to fix the problem when they had many opportunities to do so.

Blame is a useful psychological tool that creates accountability measures for those who have broken the rules (Alicke et al., 2018). In this case, blame provided a unifying purpose for the victims of the opioid crisis, which resulted in the dissolution of one of the most harmful pharmaceutical companies in the United States. However, many of the victims of the opioid crisis, particularly state governments, want more from Purdue Pharma than the company can realistically give – what these victims want is revenge.

Although it is hard to narrow down the exact definition of revenge, it can generally be thought of as an anger-motivated “yearning to see a transgressor suffer” (Schumann & Ross, 2010). Since Purdue Pharma dissolved, many state governments have issued statements expressing a desire to make the company pay more than they already have. For example, the state of Connecticut issued a statement opposing the formation of the new public benefit company, stating that “[e]very dollar paid here is one less for states like Connecticut” (Isidore, 2020). This statement fails to take into account the fact that the eight billion dollars Purdue Pharma is required to pay is the maximum amount that they are able to; to request any more would be asking the company to draw from non-existent funds. Connecticut issued an additional statement expressing anger that “[t]he federal government had the power to put the Sacklers in jail, and ... didn’t” (Isidore, 2020). Whether or not the Sacklers have received the punishment they deserve, this statement clearly reflects anger towards the Sacklers, and a desire to see them suffer, which will not benefit the victims in any material way.

While a desire for revenge can be a useful tool to direct anger towards the individuals and institutions who deserve it, it can also be counterproductive, especially when it draws attention away from the bigger issue at hand. Various studies have shown that the energy devoted towards pursuing revenge can be more psychologically harmful than helpful, especially when procedural justice has already been enacted – a phenomenon referred to as the paradox of revenge (Schumann & Ross, 2010). In this particular case, the victims who have received compensation are undoubtedly better off than before, and it makes sense to advocate for the continued compensation and treatment of new victims. However, when certain victims, particularly powerful state governments, demand more than the perpetrators can realistically give, it encourages the public to continue to focus their blame on Purdue Pharma, despite the fact that

the company no longer poses an active threat. Instead, attention should be placed on the system – what, besides one pharmaceutical company, allowed the opioid crisis to get so out of hand? What allows for the continuation of the opioid crisis, despite Purdue Pharma having declared bankruptcy six years ago? In this case, the understandable desire for revenge has the potential to create more harm than good.

System Entrenchment

Much of this paper so far has placed a large emphasis on Purdue Pharma and the Sacklers, which is necessary in order to understand how the opioid crisis began. However, it is necessary to analyze the system, as well – particularly, what factors are allowing for the opioid crisis to continue? By analyzing the psychological forces that various systems exert on individuals and pharmaceutical companies, we can come closer to understanding the deeper causes underlying the opioid crisis.

To begin, regulatory failures of the FDA played a large part in perpetuating the opioid epidemic. The FDA failed to recognize the lack of long-term studies done on the effects of OxyContin when they first approved the drug, and they also failed to recall the drug from the market, despite growing evidence of its addictive nature (Chow, 2019). Despite this, the media focused most of its attention on the Sacklers, rather than questioning the effectiveness of the FDA or calling for its reform (Kolodny, 2020). This kind of selective reporting is an example of omission bias, which refers to the idea that harm caused by omission is preferable to harm caused by action (Baron et al., 2006). In this case, compared to Purdue Pharma's active promotion of the drug, the FDA's non-actions were seen as relatively unarmful, and therefore less worthy of reporting. The media may have also viewed the harm caused by under-reporting

the regulatory failures of the FDA as better than the potential costs of emphasizing the FDA's role in the situation (ie, enacting drastic and costly system change).

Focusing all of the blame on one company could also reflect an intentional effort by the media and federal institutions to divert public outrage, allowing for the systems that exist to remain. This reflects a status quo bias, which refers to the idea that people tend to oppose drastic reforms, even when these reforms have the potential to improve society (Baron et al., 2006). In these cases, omission is preferable to action, and maintaining the status quo is preferable to improvement. Villainizing the Sacklers and dissolving Purdue Pharma did not pose a threat to existing institutions, and was therefore an acceptable issue for the media to report. Placing the blame for the opioid crisis almost exclusively on the Sacklers allowed the equally relevant systemic issues – regulatory failures, pharmaceutical corruption, the underfunding of the FDA – to go largely unexamined.

Finally, blaming the Sacklers was a strong example of moral hypocrisy on the part of the U.S. government. Many psychological articles have defined moral hypocrisy differently, but perhaps the most relevant way of thinking about it in the current context is when an individual's or group's "evaluation of their own moral transgressions differ substantially from their evaluations of the same transgressions enacted by others" (Valdesolo & DeSteno, 2007). In this case, the federal government effectively villainized the Sackler family, to the point of referring to them as "the most evil ... [family] in America" (Mulvihill, 2020). The federal government also exercised its power to punish the Sacklers through financial penalties. The government's moral hypocrisy is evident here, because while they were quick to blame the Sacklers for the opioid crisis, they have yet to acknowledge their own culpability, much less the need for a greater systemic change.

As other pharmaceutical companies continue to distribute opioids on a widespread scale, and as the crisis continues to negatively impact the American population, it will be necessary to consider what tools can be employed to create the ideal environment that will allow for the resolution of this issue. In order to do this, it was first necessary to analyze the factors currently preventing the system from being reformed. According to psychologist Kurt Lewin, “[t]he study of the conditions for change begins appropriately with an analysis of the conditions for ‘no change’ (Coleman, 1997). Only then can we begin to understand how to improve the system overall.

Section III: Solutions for the Long Term

Overview

Although Purdue Pharma invented modern opioids and perpetuated the abuse of the drug for many years, the company’s downfall does not equate to the end of the opioid crisis. Many areas of the United States continue to suffer from the social and economic consequences of addiction, and individuals continue to die daily from opioid overdose (Mass.gov, 2024). In this section of my paper, I propose several resolutions with the goal of abating the opioid crisis over the long term. I then explore potential avenues for achieving these goals, first by examining the factors that led to Purdue Pharma’s downfall. Then, I examine the limitations of the Purdue Pharma case and propose additional leverage points that could be used to address the crisis at a more systemic level. My goal is to understand the current state of “ripeness,” or readiness for negotiation, for all parties involved (Coleman 1997). The leverage points I propose will have the goal of improving that state of ripeness, aiming to achieve a better pharmaceutical climate for the long term.

Resolution Goals

The resolution goals for this conflict need to address the opioid crisis as an issue that continues to be perpetuated by multiple pharmaceutical companies, as well as the government, whose regulatory oversight allowed for the widespread dissemination of opioids in the first place. In addition, the goals need to acknowledge that in order to more effectively address this crisis, there needs to be a paradigm shift in how society conceptualizes drug addiction. Currently, society tends to view addiction as a choice rather than a neurological disease – a distinction that can have extreme consequences in terms of care and rehabilitation research (Heilig et al. 2021). My resolution goals are therefore outlined as 1) decrease drug addiction stigma, 2) increase pharmaceutical regulations to prevent for-profit companies from taking advantage of at-risk communities, and 3) increase regulatory oversight of the FDA to prevent the approval of highly addictive drugs for large-scale use in the future. With these goals in mind, I will first examine the successful resolution tactics used in the Purdue Pharma case, then expand the scope of these tactics as well as propose several others that attempt to address the opioid crisis on a broader level.

The Case Against Purdue Pharma: An Ideal Situation for Ripeness

When Purdue Pharma declared bankruptcy in 2019, it was the result of thousands of lawsuits that forced the company to compensate its victims until it was unable to do so anymore. The involvement of third parties, such as lawyers, judges, and juries, was a vital contributing factor towards the company's end. The third parties involved in the Purdue Pharma cases assumed what Rubin et al. refer to as contractual and formal roles. In other words, the third parties “displayed expertise ... with the issues under discussion” while having “no prior relationship with the disputants.” Their status within the US court system gave them “legitimacy

... to resolv[e] conflicts.” The impartial role of the judge also made the resolution of the conflict “more likely to be successful” (Rubin et al. 2024).

In the case of Purdue Pharma, the involvement of the court system as a third party was necessary to present evidence of the company’s crimes, which included the inaccurate testing of opioids, the tampering of scientific data, and the promotion of those drugs as safe and nonaddictive, despite research indicating otherwise. Having multiple impartial judges and juries deem the evidence as valid in court added legitimacy to the victims’ claims, which in turn discredited Purdue Pharma in the eyes of the public. Additionally, the fact that the company was unwilling to scale back their distribution of opioids, even in the face of these lawsuits, indicates that they probably would not have been willing to negotiate with the victims outside of the legal system. The involvement of third parties was, presumably, the only way to hold Purdue Pharma accountable for their crimes and ensure victim compensation.

Additionally, the far-reaching impact of the opioid crisis played another key factor in increasing the victims’ BATNA, or Best Alternative to Negotiated Agreement, with Purdue Pharma. A higher BATNA equates to more equitable power structures in intergroup conflicts (Fisher & Ury, 1991). The opioid crisis significantly financially impacted powerful institutions such as hospitals, insurance companies, and even the federal government, which meant that these institutions sided with individual victims against Purdue Pharma, thus increasing the power and legitimacy behind their claims. The victimization of powerful institutions also decreased the BATNA of Purdue Pharma, making the company’s claims appear less legitimate and pressuring them to fold by demanding larger sums of money.

The involvement of large institutions was also key in increasing the media coverage and perceived public importance of the opioid crisis. The role of the media is to provide widespread

dissemination of information and knowledge to the public, but media sources also have the power to withhold information should they deem it unimportant or harmful to their own interests. The media therefore holds significant power in terms of what they report and how they report it. Media coverage that was explicitly against Purdue Pharma significantly increased once state governments began suing the company (McGinty et al., 2019). In increasing their coverage of the lawsuits with a clear bias against Purdue Pharma and the Sacklers, the media acted as an additional third party in the conflict – although they were not directly affected by the crisis, they played a key role in stoking public outrage, which in turn increased the victims' BATNA and laid the groundwork for collective calls to find solutions for the opioid crisis (McGinty et al., 2019).

Purdue Pharma's bankruptcy was undoubtedly a victory for many people, brought about due to a combination of factors. The involvement of third parties through the legal system, large institutions, media coverage, and collective outrage, all created a state of ripeness that led to the company's eventual bankruptcy. Although the near-exclusive focus on Purdue Pharma led to the failure to acknowledge many other factors involved in the opioid crisis, the outcome of this conflict has created beneficial change that stretches beyond the bankruptcy of one company. With Purdue Pharma's bankruptcy came efforts to provide compensation for both individual and institutional victims of the opioid crisis, in addition to increased funding for addiction research and rehabilitation programs. It also set a precedent for future pharmaceutical regulations. Companies now know that they are not infallible in the eyes of the law, and (at least in theory) are motivated to take measures to avoid ending up with a fate similar to that of Purdue Pharma. Finally, while FDA regulatory failures have not been widely publicized, they are still acknowledged in various articles related to the opioid crisis, which is more coverage and questioning of the system's efficacy than there had been prior to this conflict.

All of these changes are undoubtedly steps taken in the right direction in terms of addressing the opioid crisis. However, addiction rates are still high, in a large part due to other pharmaceutical companies that have begun to overprescribe opioids to vulnerable populations, particularly in areas that were most affected by the crisis (Kolodny, 2020). In order to ensure that addiction rates decrease over the long term, as well as to prevent other pharmaceutical companies from becoming as powerful and corrupt as Purdue Pharma, it is necessary to think of additional solutions that could be implemented on a more systemic level.

Solutions for the Long Term

Decreasing Drug-Related Stigma.

One of the biggest barriers to achieving long-term solutions for the opioid crisis – as well as other drug epidemics – is the stigma associated with addiction. Society commonly thinks of addiction as a choice reflecting moral failings rather than a neurological disease (Heilig et al., 2021). This stigma, in turn, often leads to suboptimal care in addiction treatment, as well as limited access to rehabilitation services (Tsai et al., 2019). Although this stigma was prevalent in the conflict against Purdue Pharma, it was not as common as in other drug epidemics, in part due to the fact that opioids disproportionately affect the White community. This racial divide contributed to a somewhat different media portrayal of this drug epidemic than most others (Heilig et al., 2021). While stigma narratives were still prevalent, another predominant narrative was that the victims of Purdue Pharma were intentionally misled by the company to believe that opioids were safe for routine use. The framing of this narrative took agency away from the victims – in their case, opioid addiction wasn't a choice, but something thrust upon them by a greedy corporation. While this statement was true, truthful narratives are often overlooked in other drug epidemics. The lack of agency given to the victims – while dehumanizing in its own

right – made it clear that these victims did not actively choose to become addicts. In other words, this media narrative was extremely effective in placing the blame on those who truly deserved it (Heilig et al., 2021).

In order to abate this stigma in the future, it will be necessary for a paradigm shift in the way society conceptualizes addiction. Education is one avenue of doing this. Research has shown that educating about the realities of addiction has been successful in reducing public stigma, as well as improving doctor-administered rehabilitation care (Renner Jr, 2019).

Relatedly, the media can play an important role in reducing stigma – as can be seen in the Purdue Pharma conflict – by simply reframing the language used to describe it. Instead of referring to addicts as “abusers,” using the word “victims” places the blame more heavily on the systems and institutions that have allowed drug addiction to become so prevalent. Having clear perpetrators can also shift the blame from the victims of drug addiction to those who profit from it. One article, which proposes various leverage points for enacting system change, includes paradigm and mindset shifts as vital consideration factors (Meadows, 1997). Doing so will help increase support and funding for opioid addiction research and rehabilitation, as evidenced by previous research.

Pharmaceutical Regulations.

Given that Purdue Pharma was the main seller of prescription opioids, their bankruptcy has had a significant positive impact on decreasing opioid sales. However, other pharmaceutical companies are gradually replacing Purdue Pharma’s role, targeting communities that have been hit the hardest by opioid addiction. In a capitalist economy, it seems only natural that big corporations would promote highly addictive drugs in order to turn a profit. Although the fate of

Purdue Pharma should, in theory, make companies wary of promoting the sale of opioids in such an overt way, no official regulations currently exist that actually prevent them from doing so.

It is possible that these companies would be open to negotiation. Pharmaceutical companies are motivated by profit, and while this means they are motivated to sell opioids, it also means they are motivated to avoid costly lawsuits. Additionally, most parties who need to make concessions in a conflict are motivated to do so “without loss of face” (Coleman 1997). If pharmaceutical companies are presented with a situation in which their only choices are to make concessions to decrease the sale of opioids or face multiple lawsuits, they would hopefully choose to make concessions in order to avoid significant monetary and reputational costs. In order for a negotiation-worthy to occur in the first place, there needs to be more awareness brought towards other pharmaceutical companies’ continued role in the opioid crisis. As seen from the Purdue Pharma conflict, the media and the government significantly impact the amount of importance society places on certain issues. Demanding media coverage via collective action will therefore be necessary to bring the opioid crisis back to the forefront of important societal issues.

Even if pharmaceutical companies are open to negotiation and agree to decrease opioid sales and promotion tactics, it will still be necessary to implement regulations for the future. Legal regulations are necessary to ensure that emergent companies with new administrations will not violate the stated agreements of previous institutions. One such regulation should be the implementation of a “pre-market approval” system that would prevent pharmaceutical companies from promoting their products before obtaining FDA approval (Chow, 2019). The lack of this regulation was a large contributing factor to how opioids were falsely advertised for so long, despite early evidence of severe addiction risk. Additionally, pharmaceutical companies should

not be allowed to provide financial incentives to doctors or sales representatives. While prescribers and sellers of medicines are now discouraged from receiving financial benefits from pharmaceutical companies, there are no regulations that prevent it from happening (Chow, 2019). Implementing such a regulation would work to ensure that prescribers have a well-informed, unbiased view of the medications they prescribe.

Improvements to the FDA.

Although pharmaceutical companies are the ones who have the power to promote and sell potentially harmful products, the FDA has the power to reject these products, or recall them if a problem is later discovered. The main reason behind the FDA's insufficient oversight of OxyContin was severe underfunding – had the FDA been appropriately staffed and funded, the opioid crisis would likely not have occurred because the regulations that should have stopped the widespread dissemination of OxyContin were already in place. Increased funding by the government is necessary to prevent a crisis of this degree from happening again. Additionally, system checks will be necessary to ensure that the regulations aren't being subverted due to time or personnel constraints. Because these reforms would be internal, rather than external, the government may be less motivated to implement them. The involvement of third parties such as the media and legal institutions will therefore need to play necessary roles in creating a state of ripeness that will motivate system change.

Conclusion

In this section, I have attempted to address several goals that could help to alleviate the consequences of the opioid crisis. These are not the only resolution goals that need to be addressed to create a more open and equitable society, but I believe they are some of the most important. Currently, the state of ripeness for achieving these goals leaves much to be desired –

while it is one thing to blame a drug epidemic on a singular company, it is another to challenge the systems and rules that allowed the epidemic to happen in the first place. In his conflict research, Coleman states that institutions may be unmotivated to resolve a conflict because it “enables [them] to to maintain and employ skills, attitudes, roles, resources, and investments that [they have] developed and built up during the course of ... history” (Coleman, 1997). While the outcome of the Purdue Pharma case left much to be desired, it spoke to the power of individual citizens to bring about drastic system change, should they be adequately informed and motivated to do so.

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