

Substance Abuse

**“The Nation’s Number One
Health Problem”**

The Robert Wood Johnson Foundation

A Health & Social Problem

- More Deaths
- Illnesses, and
- Disabilities than any other preventable health condition

1 in 4 of more than 2 million U.S. deaths each year is attributable to Alcohol, Tobacco or Other Drugs
(ATOD)

- Tobacco – 430,700 deaths
- Alcohol – 100,000 deaths
- Illegal Drugs – 16,000 deaths

Scope of the Problem – U.S.

- Lifetime Prevalence of Alcohol Abuse or Dependence or Drug Dependence – 13.5%
- Binge Drinking of Age 12 – 20 Year Olds – 20%
- Three Million of Age 12 – 20 Year Olds are Alcohol Dependent
- 24 Million Need Substance abuse Treatment & Only 3.5 Million Get It

Economic Costs to the Economy Are High

- \$138 Billion on Medical Costs – for Tobacco
- \$166.3 Billion on Lost Productivity - for Alcohol
- \$109.9 Billion on Crime – for Illicit Drugs

Youth Prevalence Rates - 2002 Iowa Youth Survey

	6th Grade	8th Grade	11th Grade
<i>ANY TOBACCO</i>			
Current Use	2%	10%	29%
Ever Used	6%	20%	47%
<i>ANY ALCOHOL</i>			
Current	6%	18%	44%
Ever	17%	38%	71%
<i>ANY DRUG</i>			
Current	2%	7%	19%
Ever	5%	14%	37%
<i>MARIJUANA</i>			
Current	1%	3%	15%
Ever	1%	9%	34%

The Center on Addiction and Substance Abuse (CASA) at Columbia University
1998 estimates state's indirect costs
attributable to ATOD

- 13% of Budget - Alcohol, Tobacco and Other Drugs
- 11% of Budget – Medicaid
- 13% of Budget – Higher Education

Stigma

- Efforts to:
 - Blame
 - Separate From “us”
- Alcoholic
- Drug Addict

Barriers

- Access
- Funding
- Professionalism
- Public Policy

The Essence of Addiction

- Uncontrollable, compulsive drug seeking and use, even in the face of negative health and social consequences.
- For an addict there is no motivation more powerful than drug craving

Substance Abuse Treatment

- JAMA – McLellan T.
- Chronic treatable illness with similar treatment outcomes to hypertension, diabetes and asthma
- Cost Benefit of \$7 to \$1

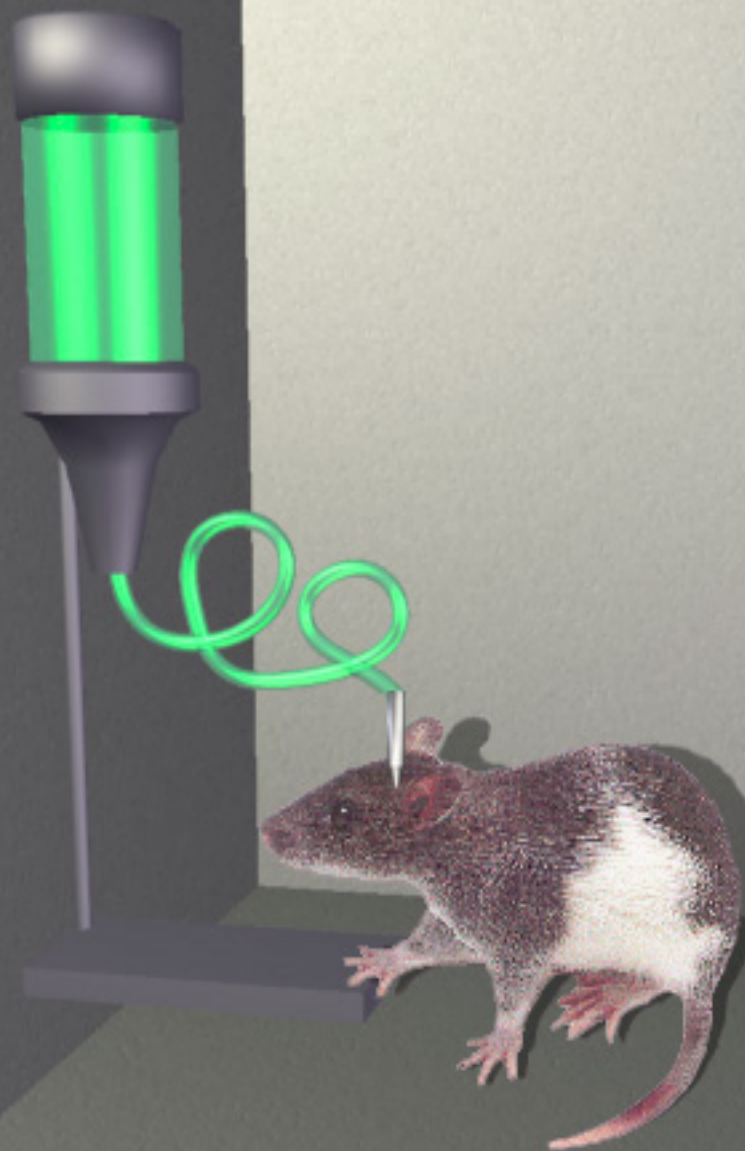
Understanding Drug Abuse and Addiction: What Science Says

*Developed by the
National Institute on Drug Abuse (NIDA)
National Institutes of Health
Bethesda, Maryland*

**As part of the
NIDA Join Together Graduate Fellows Institute
Action Packet**



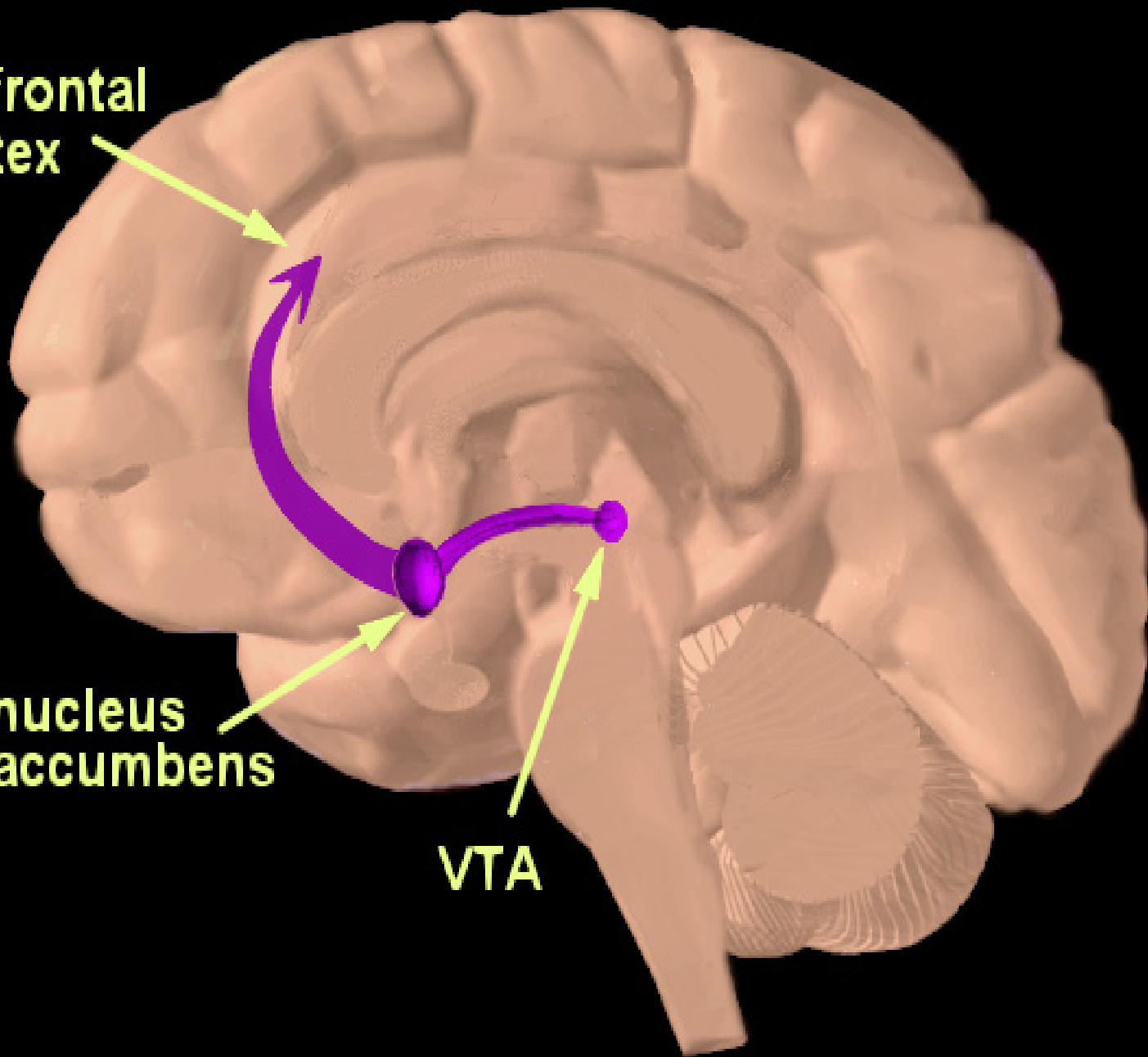
DRUG ADDICTION IS A COMPLEX ILLNESS



**prefrontal
cortex**

**nucleus
accumbens**

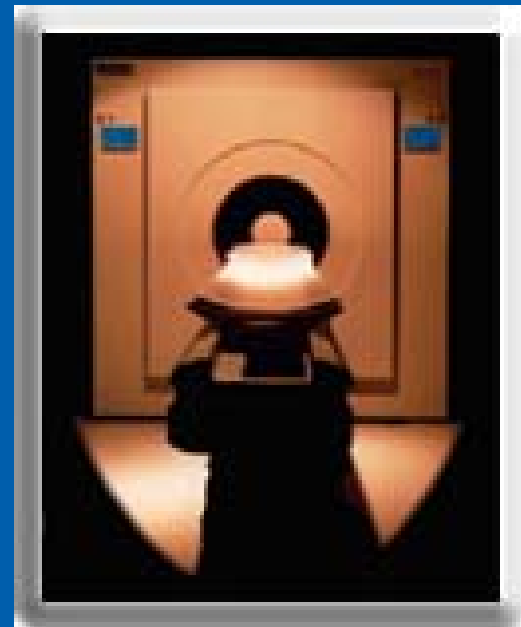
VTA



Homeostasis/Equilibrium

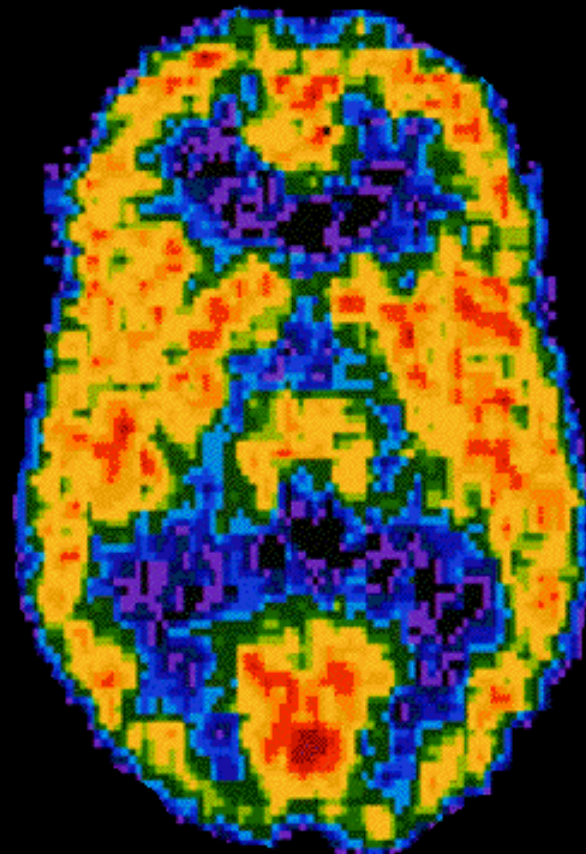
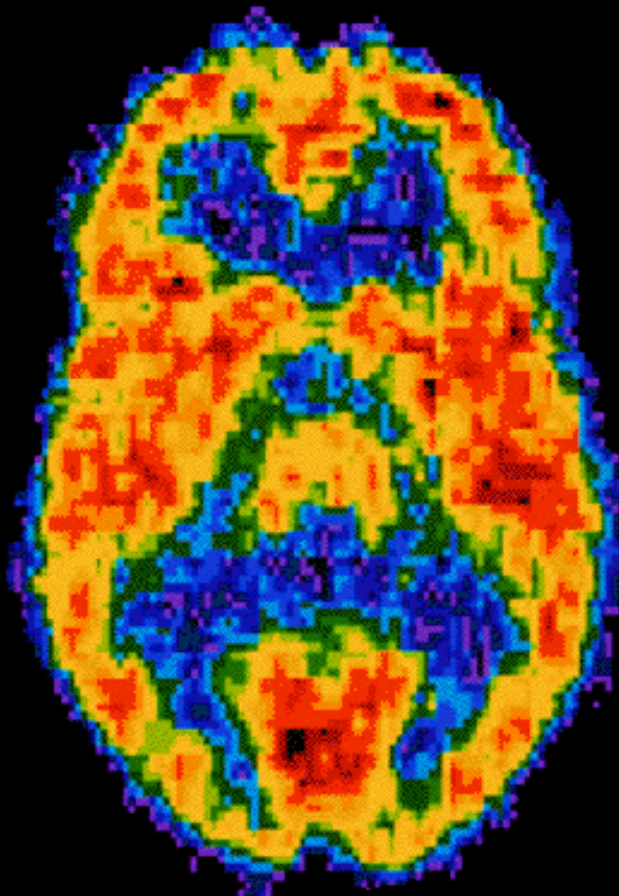
- Tolerance
- Craving
- Withdrawal

Positron Emission Tomography (PET)

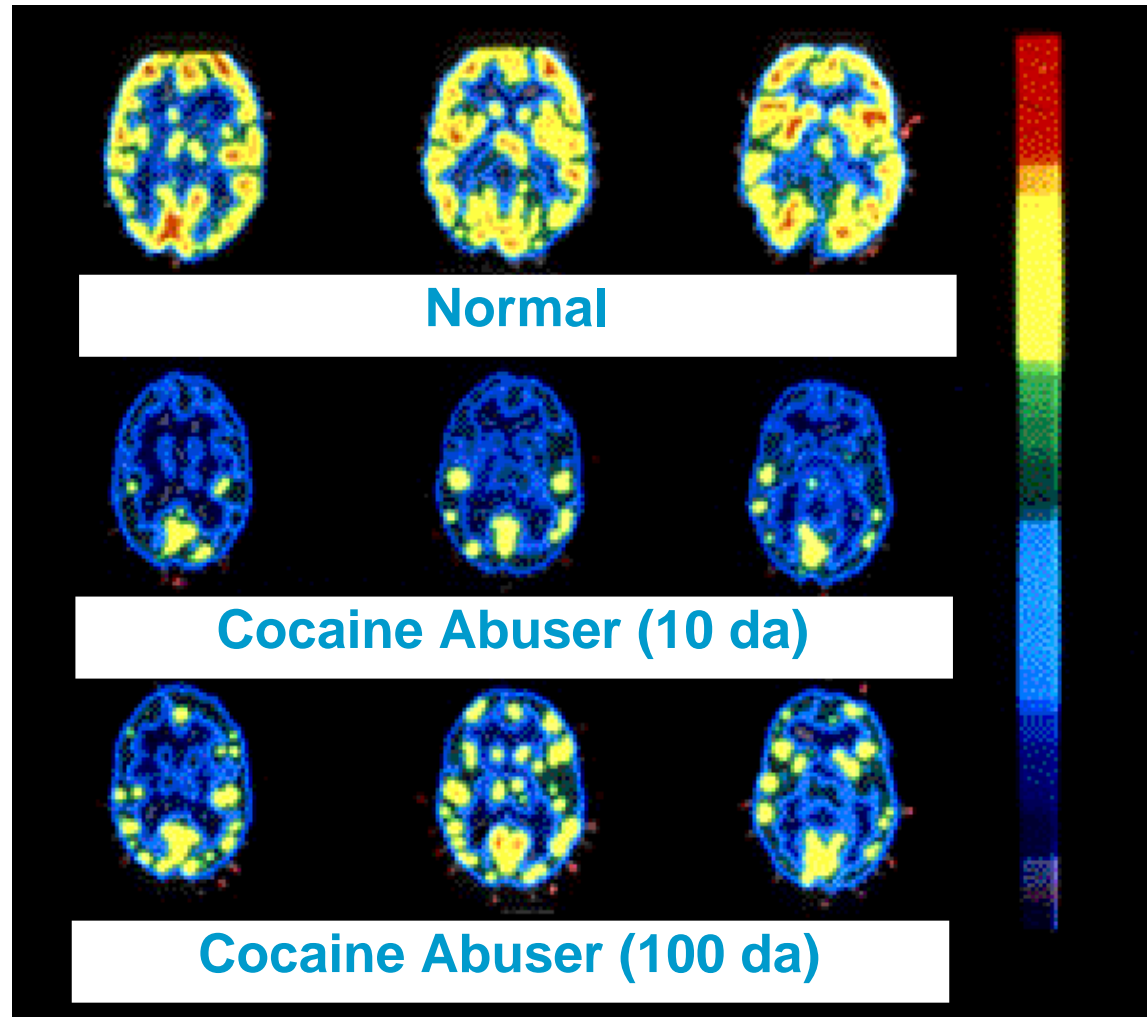


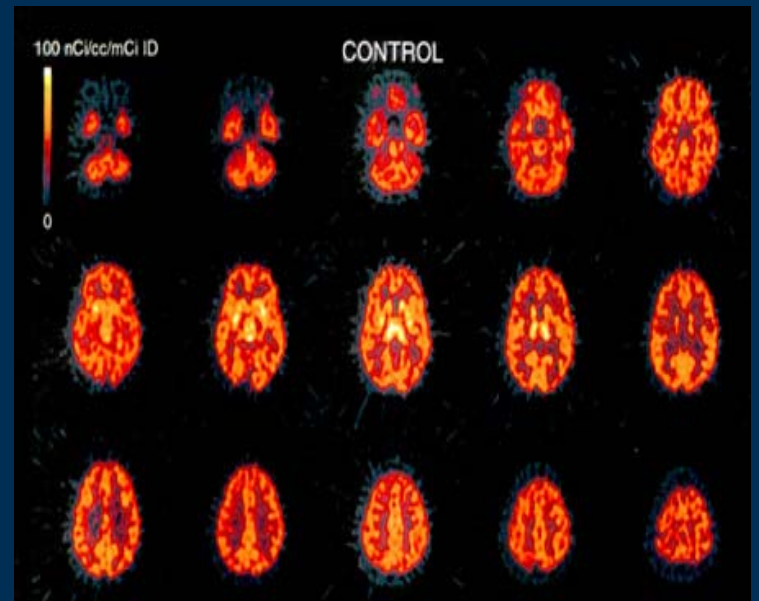
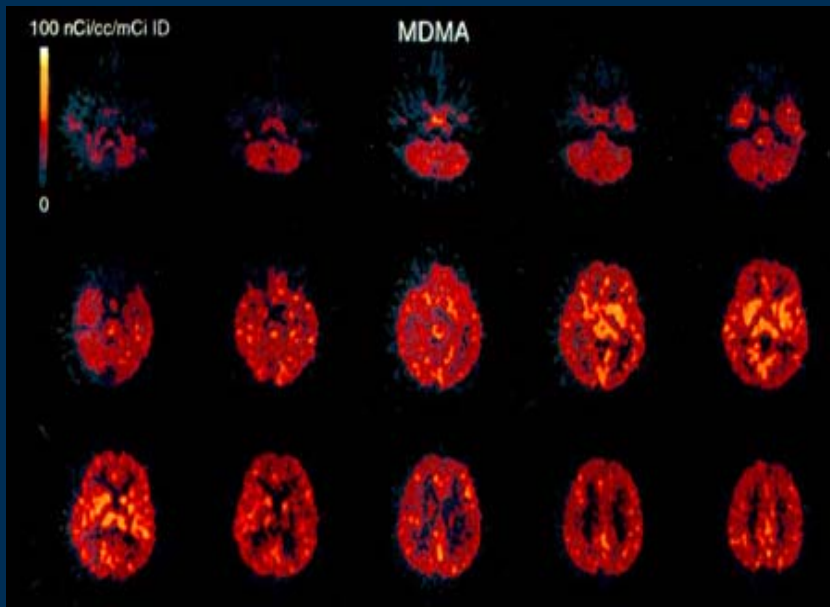
control

on cocaine

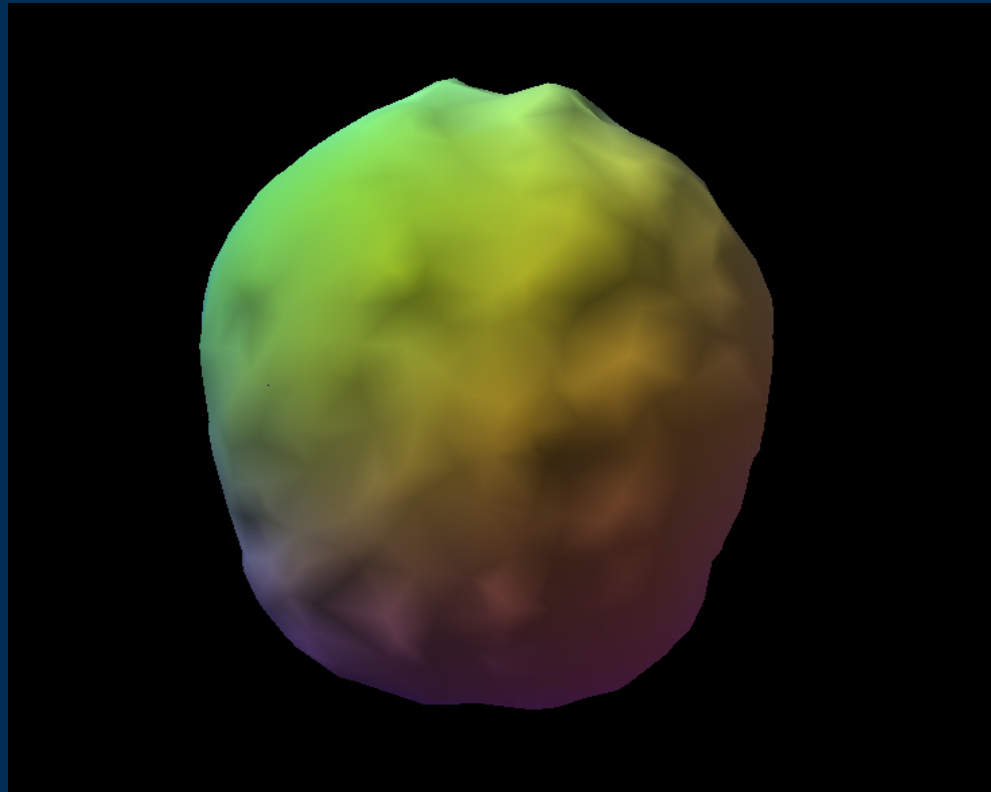


Your Brain After Drugs

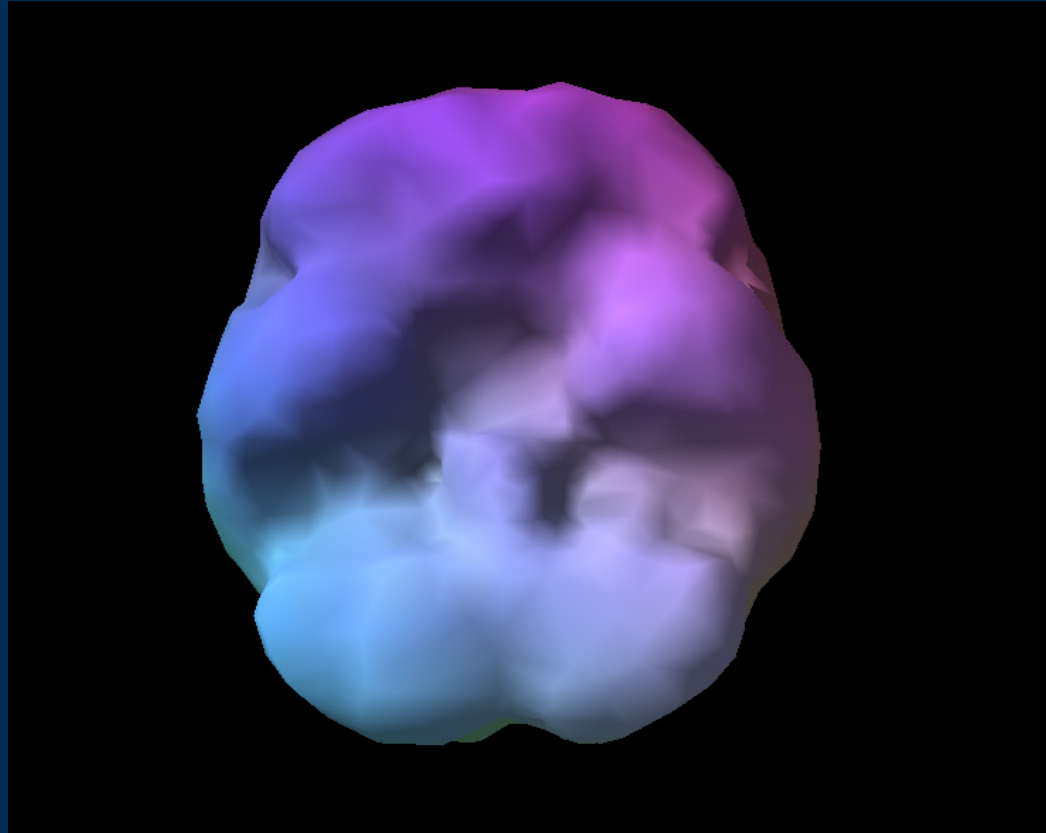




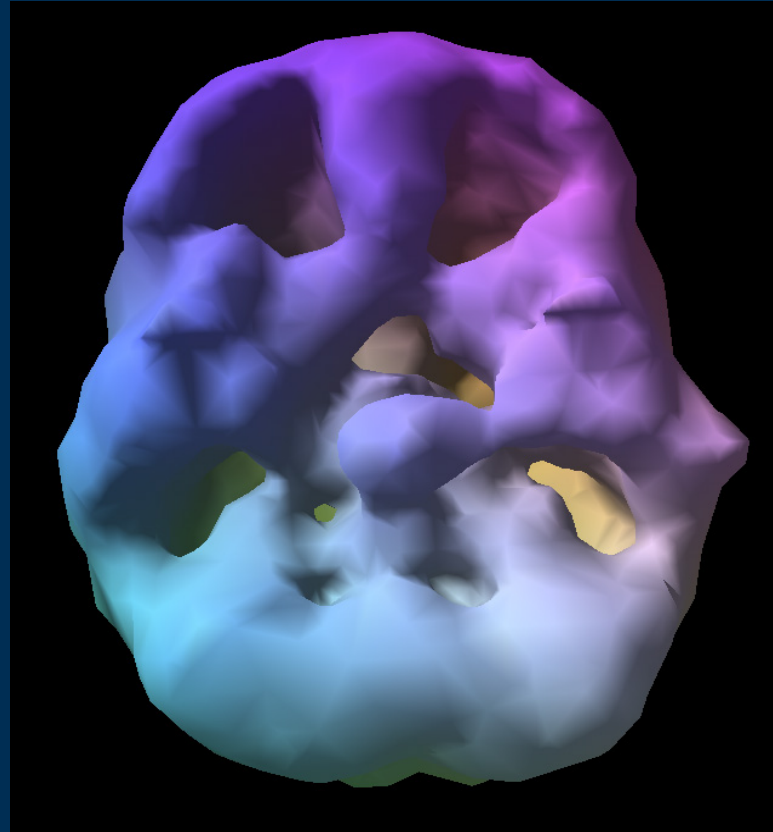
Normal – Top down view



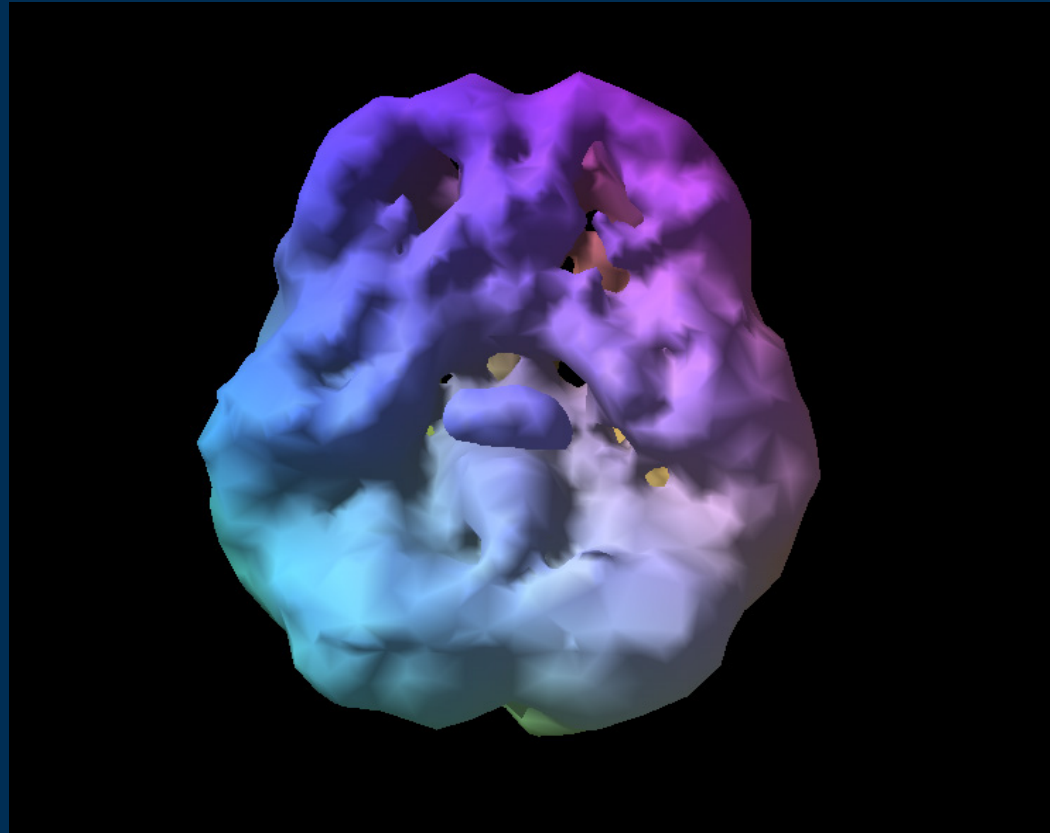
Normal - Underside



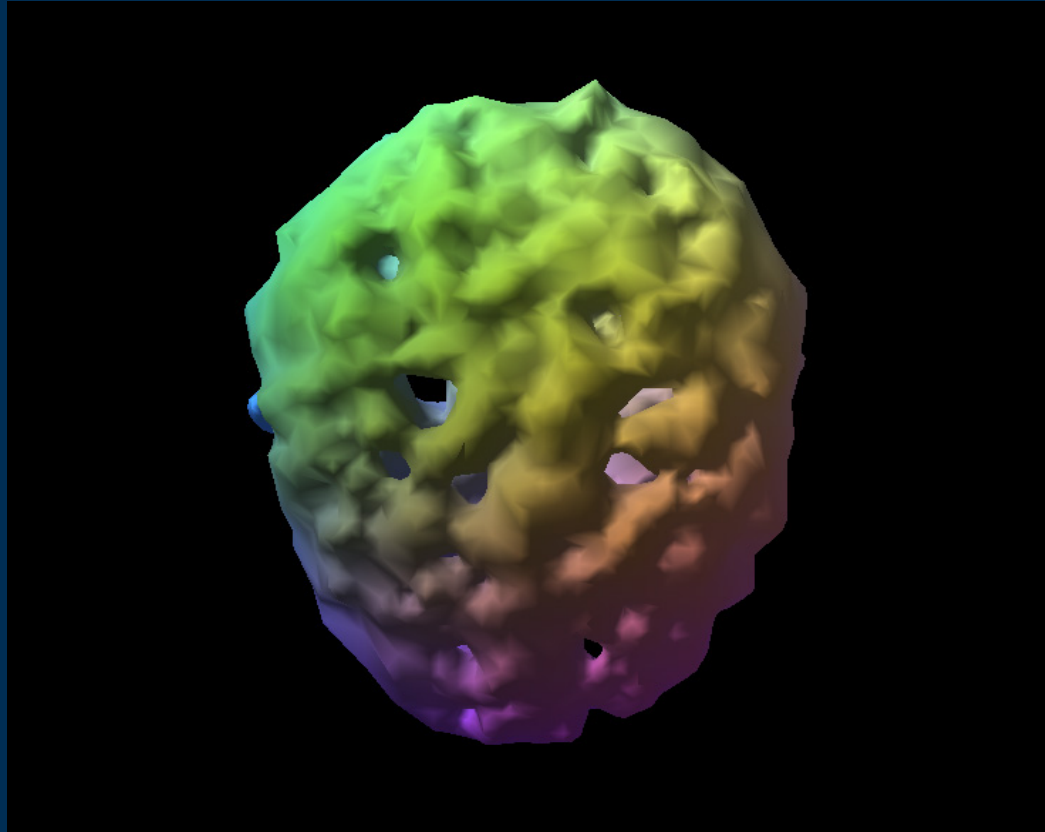
Marijuana - 18 year old - 3 year history of 4 times a week use Underside Surface View



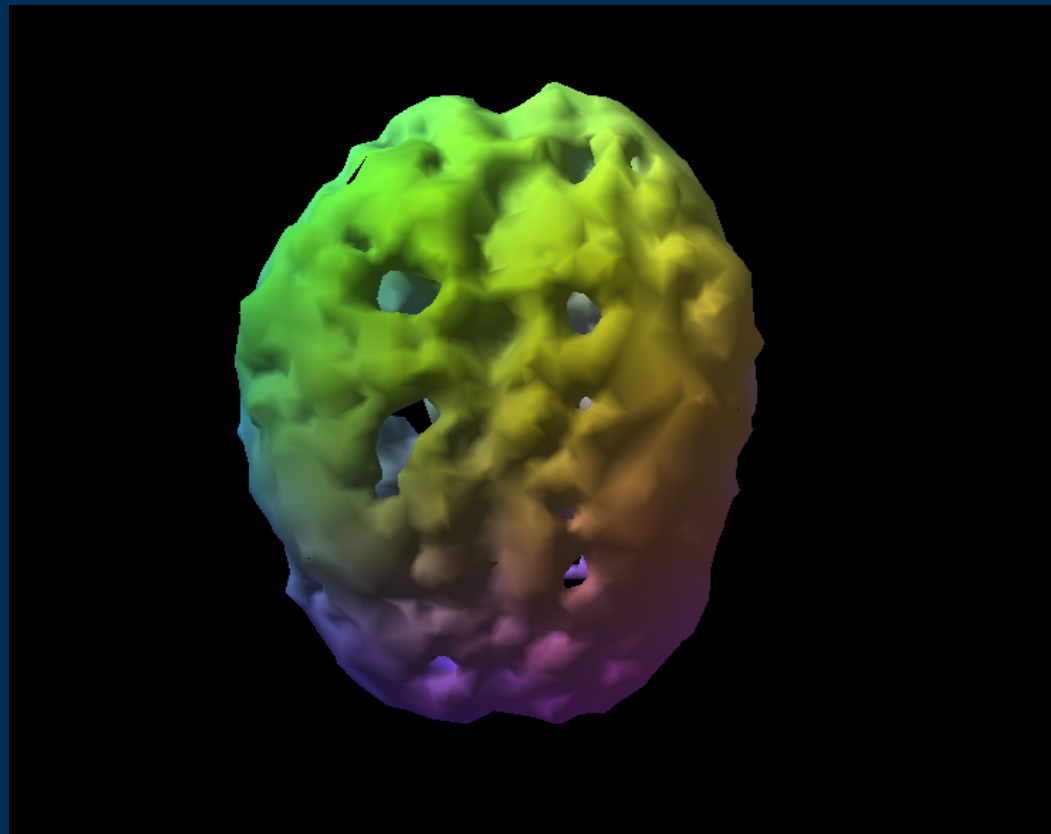
Marijuana - 28 y/o -- 10 years of mostly weekend use
Underside Surface View



Methamphetamine - 28 y/o - 8 years heavy use
Front on Surface View



Cocaine - 24 y/o -- 2 year history of frequent use
Top Down Surface View



Iowa Substance Abuse Treatment & Prevention Programs

- 22 Regional Networks of 34 Non-Profit Organizations providing (Non-Medicaid):
 - Residential
 - Halfway House
 - Intensive Outpatient
 - Continuing Care
 - Women / Women & Children's Programming
 - Prevention

Medicaid

- 33 Additional Medicaid Providers:
 - Inpatient Hospital, including Detox
 - Residential
 - Halfway House
 - Intensive Outpatient
 - Extended Outpatient
 - Continuing Care

CURRENT FUNDING

- Block Grant / State
 - Federal Block Grant = \$10,363,283
 - State Appropriations:
 - Iowa General Fund = \$779,694
 - Tobacco Fund = \$11,800
 - Gambling Treatment Fund = \$740,000
 - » Totals \$23,682,977 (2004)
 - Medicaid
 - State = \$4,489,953
 - Federal = \$9,039,877
 - » Totals \$13,538,380

ISAPDA Iowa Substance Abuse Program Directors' Assn.

- Provides services beyond contracted numbers.
- Length of Stay
- Wait Times
- Caseloads

CONTRACT YEAR	2001-02	2002-03	2003-04	2004-05	2005-06
DPH	\$16,742,455	\$16,742,455	\$16,742,455	\$16,742,455	\$17,373,148
W/C	\$1,390,939	\$1,390,939	\$1,390,939	\$1,390,939	\$1,390,939
Meth	\$1,233,612	\$1,233,612	\$1,233,612	\$1,233,612	\$1,083,610
TOTAL FUNDING	\$19,367,006	\$19,367,006	\$19,367,006	\$19,367,006	\$19,847,697
REVISED TOTAL	\$19,367,006	\$19,367,006	\$19,367,006		
Client # - Contract	23,522	23,499	23,499	19,076	19,076
Client # - Actual	27,115	26,686	27,289	27,149	
\$/Client - Contract	\$823	\$824	\$824	\$1,015	\$1,040
\$/Client - Actual	\$714	\$726	\$710	\$713	

Counselors / Staff Salaries

2004	Current Avg	Start
Night Staff	\$16,084	\$14,438
Counselor I	\$24,203	\$20,452
Counselor II	\$27,743	\$24,195
Counselor III	\$32,868	\$28,310

Seven (7) Years of Maintenance Funding

- Health Care
- Energy/Utilities
- Food / Supplies
- Workforce

Iowa Evaluations Support Basic Message:

Treatment Works:
People Recover from Addiction even
Methamphetamine

Background:

Three studies done in Iowa [Iowa Adult Methamphetamine Treatment Project – Final Report, 2003; Iowa Outcomes Monitoring System (IOMS) Iowa Project, 2005; and Final Report on the Polk County Adult Drug Court, 2001] demonstrate that treatment for addiction is effective.

Key findings follow.

Treatment is effective in stopping methamphetamine use.

- The 2003 report found that 71.2% of the clients using methamphetamine remained abstinent six months after treatment and 75.4% of clients were abstinent one year after treatment.
- The 2005 report found that of those who were interviewed six months after their discharge, 65.4% of methamphetamine users were abstinent, 49.3% of marijuana users were abstinent, and 47.1% of those admitted for alcohol abuse were abstinent.

– (Source: Iowa Department of Public Health and Iowa Consortium for Substance Abuse Research and Evaluation)

Treatment helps those in recovery stay out of jail.

- The 2003 report found that 90.4% of methamphetamine clients had not been arrested six months after treatment and 95.7% of methamphetamine clients interviewed one year after treatment had not been arrested during the previous six months.
- The 2005 study found that in the six months after treatment, 89.2% of methamphetamine users had not been arrested, 88.1% of alcohol users had not been arrested, 98.1% of cocaine users had not been arrested, and 83.9% of marijuana users had not been arrested. These rates compare to 32.4% of clients who had not been arrested in the 12 months prior to treatment.
 - (Source: Iowa Department of Public Health and Iowa Consortium for Substance Abuse Research and Evaluation)

Treatment helps people get back to work.

- The 2003 report found that 54.8% of the methamphetamine clients were working full time six months after treatment while 66.7% were working full time one year after treatment.
- The 2005 report found that the percentage of those employed full time increased by 14.3% for all clients.

– (Source: Iowa Department of Public Health and Iowa Consortium for Substance Abuse Research and Evaluation)

While longer treatment periods improve outcomes, results for clients treated for approximately 60 days or less are still impressive.

- Through interviews conducted six months after treatment, the 2003 study found that clients who had longer lengths of treatment (more than 90 days) were almost one and a third times more likely to remain abstinent and about one and a half times more likely to be employed full time.
- The 2005 study found that the methamphetamine client was treated for an average of 87.4 days. In general, clients who were treated for longer periods of time were more likely to be abstinent: 38.1% for 31-60 days, 61.1% for 61-90 days, 53.2% for 91-120 days and 61.1% for more than 120 days.

– (Source: Iowa Department of Public Health and Iowa Consortium for Substance Abuse Research and Evaluation)

A drug court study shows savings on justice system costs.

- The 2001 study of methamphetamine and other drug offenders graduating from the Polk County Drug Court showed that they had received more treatment, had lower re-arrest rates, and saved on justice system costs.
 - Source: Division of Criminal & Juvenile Justice Planning, Iowa Department of Human Rights)