Who Suffers from Substance Abuse? A Community Conversation March 6, 2014

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Tonight's Talk

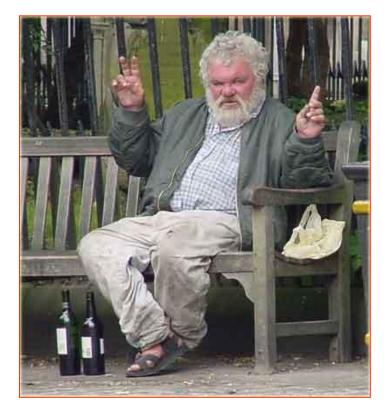
- 1.Rethinking the "Drug Abuse" and the "Drug Abuser"
- 2.The Economic Impact of Substance Use Disorders
- 3.The Impact of Substance Use Disorders on the Community
- 4.Toward an Integrated Whole Community Response



Persons with SUDs are not a homogenous group of people who use/drink in excess



The typical drug addict/alcoholic?



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People like to party





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But managing it can be a problem for some.





It often starts here...



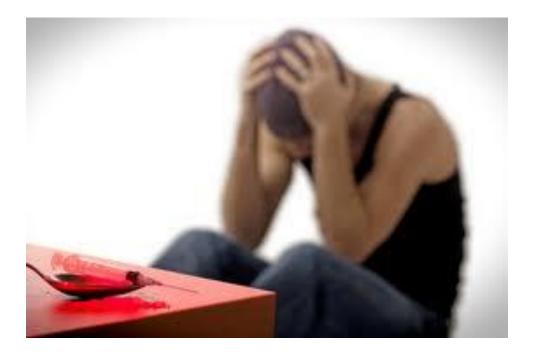


But may progress to various severity ranges in some people





And sometimes addiction





People do recover . . .



But some do not



Rethinking the "drug abuser" and the community's response to prevention and treatment...



How is substance abuse defined after 30 years of robust scientific study?

- Substance Use Disorders (SUD) more accurately describes a continuum of severity from misuse to problem use, and chronically severe (DSM-5).
- The most severe form of SUD, is a chronic and relapsing condition much like diabetes, hypertension and asthma.
- Addiction is a primary disease and not the result of other emotional or psychiatric problems.

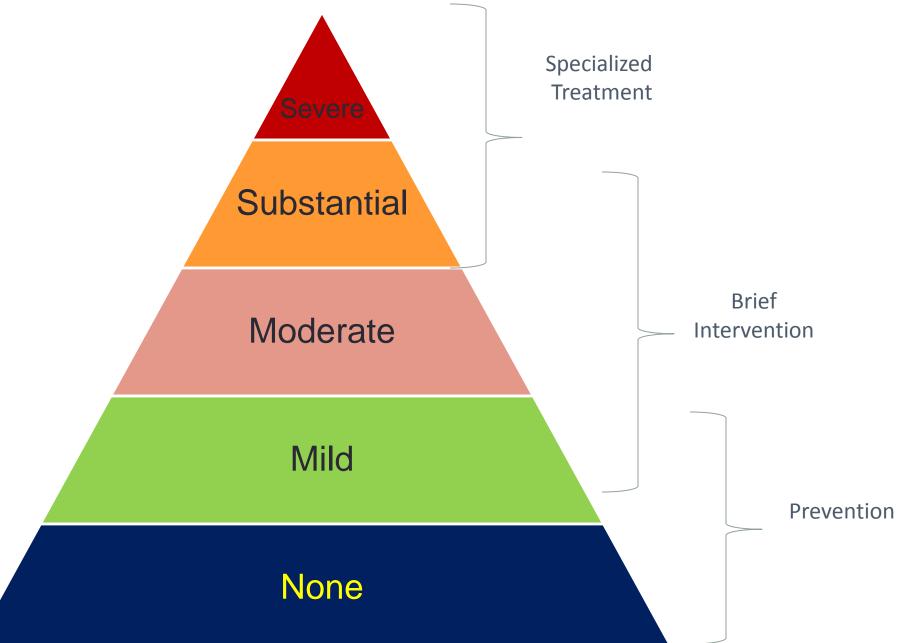
American Society of Addiction Medicine, 2011.

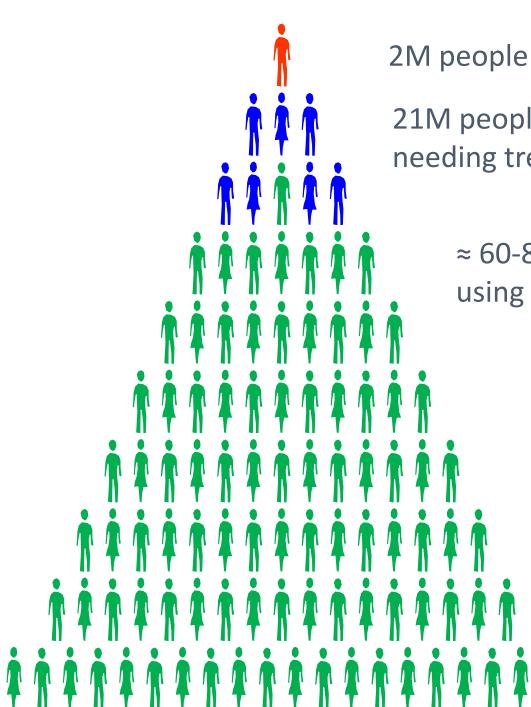


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Distribution of Substance Abuse Problems





2M people (0.8%) receiving treatment*

21M people (7%) have problems needing treatment, but not receiving it*

≈ 60-80M people (≈20-25%)
using at risky levels

US Population: 307,006,550

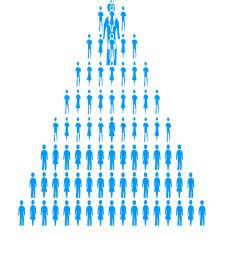
US Census Bureau, Population Division July 2009 estimate

*NSUDH, 2008

UCLA ISAP. 2011

In need of treatment (21 Million)

- Reported problems associated with substance use that met diagnostic criteria in past year
- 2.3 million (11%) received treatment in past year
- 18.7 million (89%) <u>not</u> in treatment in past year
 - 1.1% made an effort to get treatment
 - 4.8 % stated they needed treatment
 - 3.7% felt they needed treatment but made no effort to get it
 - 85% of those in need of treatment did not feel they needed treatment



These people need services, but will never enter the treatment system



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Using at risky levels (60-80 Million)

Does not meet full diagnostic criteria
Level of use indicates risk of developing problems.

Some examples

- Drinks 5-6 glasses of wine a few times per week to unwind
- Pregnant woman occasionally has a shot of vodka to relieve stress
- Adolescent smokes marijuana with his friends just on weekends
- Occasionally takes one or two extra Vicodin to help with pain.
- Runs out of meds earlier and needs refills more often.

Implications

- Most people with severe SUD will not receive treatment.
- Virtually all persons with risky substance use will not receive professional treatment.





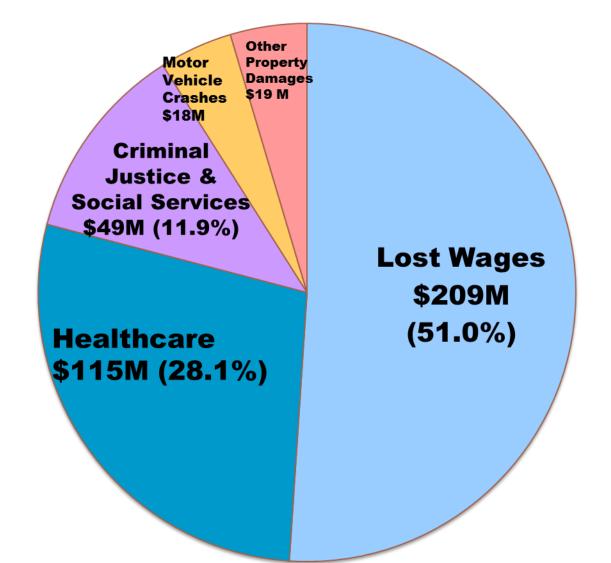
- 3,209 people seeking SUD treatment
- 1,224 people receiving SUD treatment
- 21,682 people have SUD problems needing treatment

≈ 53,340-65,175 people (≈20-25%) using at risky levels

Santa Cruz County Population: 266,700

California Department of Health Care Services 2012 estimators

Cost of Untreated Substance Abuse in Santa Cruz County – Total **\$410 Million per Year**



Economic Impact of SUDs

Assumptions that SUD treatment is too costly or ineffective are:

- incorrect and,
- do not reflect advancements in treatment and health care management over past 20 years



Return on Investment (ROI) in SUD Treatment

Every dollar spent on substance abuse treatment saves \$4 in healthcare costs and \$7 in law enforcement and other criminal justice costs.

On average, substance abuse treatment costs \$1,583 per patient and is associated with a cost offset of \$11,487.

Greater than a 7:1 ratio of a return on investment (ROI).

Etner, S., Huang, D., Evans, E., Ash, D. R., Hardy, M., Jourabchi, M., & Yih-Ing, H. (2006) Benefit-Cost in the California Treatment Outcome

Project: Does Substance Abuse Treatment "Pay for Itself"? Health Services Research. 41(1): 192–213.



The overarching goal of treatment is to help individuals achieve stable, long-term recovery and become productive members of society, and to eliminate the public health, public safety, and economic consequences associated with addiction.

- Addiction, like other chronic diseases, can be managed successfully with appropriate access to quality treatment.
- Early intervention tools implemented in existing systems, (e.g., primary care settings, hospitals, schools, legal systems) allow quick responses to SUDs & provide care for more people.



The White House Office of National Drug Control Policy. May 2012









Impact of Substance Abuse on Community

The common link to most community health and safety problems involves substance use disorders

The link between SUD and other social systems is well documented



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Housing/Homeless

- Nearly 2/3 of persons receiving services from homeless assistance programs in the US have had either alcohol abuse or drug abuse problems in their lifetime.
- Over 1/2 of single, homeless adults need substance abuse treatment.





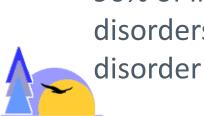
Child Welfare

- Problems with alcohol and drug use are present in between 40% and 80% of the families known to child welfare agencies
- Alcohol and drug abuse is associated with more severe child abuse and neglect and is indicated in a large percentage of neglect-related child fatalities.



Public Health & Safety

- Drug use increases the likelihood of criminal behavior
- Offender drug use is involved in more than 50% of all violent crimes, in 60-80 % of child abuse and neglect cases, & in 75% of drug dealing & manufacturing cases
- 90% of inmates with mental disorders have an addiction disorder



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Chronicle / Katy Raddat:

Mental Health

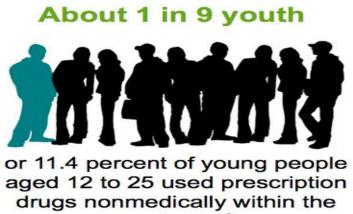
- Over 40% of persons with an addictive disorder have a cooccurring mental disorder
- Dual diagnosis occurs in 28-50% of the mental health disorder population
- For persons with bipolar disorder, the rate is 60.7 percent.
- Children & adolescents diagnosed with attention deficit hyperactivity disorders (ADHD) are at special risk for SUD.



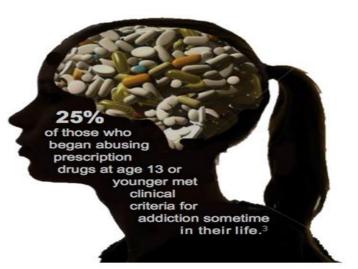


School & Youth

Marijuana/Hashish				36.4	
Synthetic Marijuana	11.4%				
Vicodin	8.0%				
Adderall	6.5%	After	After Marijuana, Prescription		
Salvia	5.9%		d Over-the-Counter		
Tranquilizers	5.6%				
Cough Medicine	5.3%		lications ¹ Account for		
MDMA (Ecstasy)	5.3%	Me	Most of the Commonly		
Hallucinogens	5.2%	Abus	ed Drugs Among High		
OxyContin	4.9%		School Seniors ²		
Sedatives	4.3%		School Seniors-		
Inhalants	3.2%				
Cocaine (any form)	2.9%				
Ritalin	2.6%	Illicit Drugs	Prescription or OTC Medication	ons	



past year.3





¹Past Year Use

² Monitoring the Future Survey, 2011

³ National Survey on Drug Use and Health, 2010

Physical Health

- Over 72 medical conditions have risk factors attributable to substance abuse.
- 70% of all health care visits are generated by behavioral health factors.
- Primary care is the *de facto* mental health and SUD services for 70% of the population.
- AOD-related deaths, accidents, spreading of infectious diseases, drug-related medical emergencies, and HIV/AIDS have significant role in the health of our community

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What Does it Mean?

From a "Return on Investment" perspective, it makes sense to invest in substance abuse treatment.

Since the majority of people with SUD are not interested in traditional treatment, we must consider ways to change the infrastructure to reduce the impact that substance abuse has on the whole community.





Toward an Integrated, Whole Community Response....

Integrated systems, collaborative care and community partnerships are part of the new directions in health care and embrace the spirit and intent of the ACA





Moving Forward

- If we continue to perceive SUD from the lens of yesteryear without the science behind the treatment, we do a great disservice to those we provide for and the community in general.
- Attempting to constantly revise policies, practices and social system infrastructures based on inaccurate and outdated data on SUD is inefficient and ineffective.

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Proven Practices for New Direction



Changing the way communities address health care problems, including SUD prevention and treatment, is the new direction.

> An example of how this is being done with mental health, substance use and physical disorders . . .



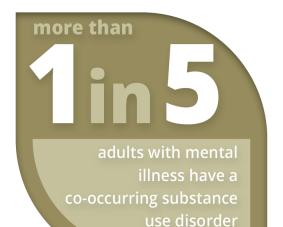
The PROBLEM

People with mental illness die earlier than the general population and have more co-occurring health conditions.





of adults with a mental illness have one or more chronic physical conditions



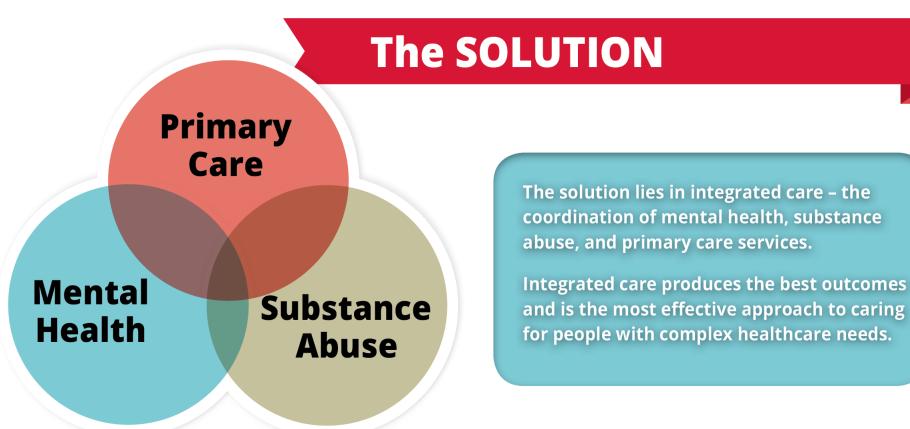
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National Council for Behavioral Health. 2013.



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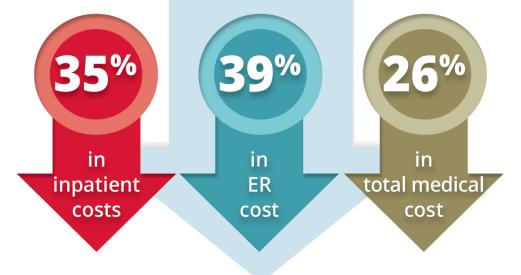


National Council for Behavioral Health. 2013.



INTEGRATION WORKS

Community-based addiction treatment can lead to...





National Council for Behavioral Health. 2013.

County of Santa Cruz – Alcohol & Drug Program A Community Conversation – March 6, 2014

To request a copy of the comprehensive review of the research on this topic, contact:

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Or

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