

CLOSING THE ADDICTION TREATMENT GAP

Addiction is a disease. Let's start treating it that way.

PRESS RELEASE

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Closing the Addiction Treatment Gap Coalition to welcome Join Together Director, Dr. David Rosenbloom, release report and policy recommendations to improve the State's substance use treatment system

PROVIDENCE, RI – The Rhode Island Closing the Addiction Treatment Gap (CATG) Coalition, a collaboration of nearly forty diverse stakeholder groups, will welcome Join Together Director, Dr. David Rosenbloom, for the release of a new report and policy recommendations aimed at ushering in immediate improvements and cost savings across the State's addiction treatment and recovery system.

"The CATG Coalition's work and recommendations are well-aligned with the Office of National Drug Control Policy's recently-released 2010 Drug Control Strategy," said David Rosenbloom, PhD, Director of Join Together. "Similar to the CATG Coalition's recommendations, the new strategy has an increased focus on demand reduction initiatives through expanded access to addiction treatment and prevention services in the public, private, and criminal justice settings."

The report, released today, includes an environmental scan of the current funding, providers, and impacts of untreated drug and alcohol addiction in the state, as well as three issue briefs that highlight various aspects of the treatment system for reform. The report also includes twelve policy recommendations to improve the treatment system in Rhode Island. The proposed policy changes include three system-wide reforms, and nine recommendations that are focused on three topic areas in need of reform: Screening, Brief Intervention, and Referral to Treatment (SBIRT); Prison Reform; and Emergency Departments.

The recommendations, which were created by a team of addiction treatment and recovery experts, including emergency room doctors, prevention advocates, treatment providers, and a non-profit prison reentry organization, offer immediate, tangible improvements that will expand treatment options for individuals with substance use disorders, end the unfortunate and costly cycling of these individuals through public institutions that are not designed to meet their needs, and produce significant savings for the State.

"Untreated alcohol and drug addictions are an enormous public health threat," said Josiah D. Rich, MD, The Miriam Hospital and Principal Investigator for the Rhode Island Closing the Addiction Treatment Gap grant. "But treatment works, and expanding access to treatment is the medically appropriate approach, which will also produce significant health, governmental, and societal savings for the State."

The addiction treatment gap is defined as the difference between the number of people suffering from addiction and the number who actually receive the treatment they need. An estimated 107,000 Rhode Islanders suffer from substance use disorders, yet only 1 in 8 are getting the treatment and care they need to successfully fight their disease.

"By taking a collaborative approach and combining efforts to close the addiction treatment gap, other states will look to Rhode Island as a national leader in this area," said Craig Stenning, Director, Rhode Island Department of Mental Health, Retardation, and Hospitals. "The report and recommendations offered by the CATG coalition represent effective strategies that will help to ensure that every Rhode Islander in need of treatment is able to receive it."

The Coalition's recommendations include:

- Full implementation of the Mental Health Parity and Addiction Equity Act;

- Inclusion of behavioral health specialists as an integral component of expanding the Medical Home Model in Rhode Island;
- Adoption of 2006 National Quality Forum (NQF) Treatment Standards;
- Expansion of Rhode Island Drug Court participation among non-violent offenders with substance use disorders; and
- Establishment of an alternative facility [non-hospital Emergency Department] for review, care, and connection to treatment for individuals with chronic substance use disorders.
- Broad-based expansion in the use of the Screening, Brief Intervention and Referral to Treatment (SBIRT) tool by primary care providers to improve early identification of drug and alcohol problems.

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Rhode Island Closing the Addiction Treatment Gap (CATG) Coalition

The RI CATG Coalition is a collaboration among diverse stakeholders, including emergency room doctors, child welfare advocates, religious leaders, educators, treatment centers and providers, prevention advocates, and other health care organizations, to expand access to drug and alcohol treatment in Rhode Island for everyone who needs it. The RI CATG Coalition was officially launched in June 2009, and is supported through a generous grant from the Open Society Institute (OSI) of the Soros Foundation. The grant is part of a \$10 million national initiative supported by OSI to close the addiction treatment gap, expand and improve the comprehensiveness of treatment systems, and to improve the quality of treatment. The Rhode Island grant is one of nine demonstration grants awarded across the country.

David Rosenbloom, PhD

David L. Rosenbloom, PhD, is a Professor of Public Health at Boston University where he directs Join Together, a program that helps communities throughout the country prevent and reduce alcohol and drug problems, and the Youth Alcohol Prevention Center. Professor Rosenbloom was the Principal Investigator for the National Institutes of Health (NIH)/National Institute on Alcohol Abuse and Alcoholism (NIAAA) Center for the Prevention of Alcohol Problems in Young People. He teaches health care management and strategy as an adjunct lecturer at Brandeis University.

Rosenbloom also served as the Chair of the Spaulding Rehabilitation Hospital Board of Trustees from 2006 to 2008. From 1999 to 2003 he was a member of the National Institute on Drug Abuse National Advisory Council. From 1975 to 1983, he was Commissioner of Health and Hospitals for the City of Boston. In that capacity he served as the city's public health officer and CEO of the city's public delivery system, including Boston City Hospital, 22 neighborhood health centers, and the emergency medical system. From 1984 to 1988 he was Vice President, and then President, of the Health Data Institute, a private company that pioneered the clinical analysis of medical claims data and developed managed care tools and techniques used throughout the country today. In 1989, he co-founded Community Medical Alliance, an HMO for people with catastrophic illness. He co-founded and Chairman of QuitNet.com, the nation's largest smoking cessation service from 2000 to 2005.

Mr. Rosenbloom grew up in Albany, New York. He received a B.A. from Colgate University in 1965 and a Ph.D. from the Massachusetts Institute of Technology in 1970. Mr. Rosenbloom is the author of numerous books and articles on political campaigns and finance, health care, and substance use problems.