

SUBSTANCE ABUSE ADVOCACY: THE FUTURE IS NOW

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INTRODUCTIONS!

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- Follow me on Twitter @SlingshotDC
- (Feel free to live tweet!)

I DON'T HAVE MUCH MORE THAN AN HOUR...

- ▶ I can't make you a seasoned advocate.
- ▶ I can't tell you everything there is to know about every issue related to substance abuse policy.
- ▶ I can't answer every question.

OK, ANDREW...WHAT CAN YOU DO?

- ▶ I can tell you about the progress we're making, why we're making it, and how to keep making it.
- ▶ I can give you a snapshot- of what works and what does not.
- ▶ I can give you some ideas as to why politicians take on our issue- or why they do not.

WHAT A DIFFERENCE A YEAR MAKES

- ▶ 2014 has been a watershed year in advances for substance abuse advocacy.
- ▶ The reasons we have come so far are somewhat unfortunate, but the price of inaction is far higher.
- ▶ We (obviously) still have work to do.

WHAT'S ON THE MENU?

- ▶ Something you need to know about Congress:
- ▶ They rarely address the underlying DISEASE OF ADDICTION. Instead, each decade there is a “drug d’jour” that they go nuts over, and insist that it is the worst epidemic since Bubonic Plague.
- ▶ Some act as if this problem is solved, or talked about enough, then the drug epidemic is solved.
- ▶ (Even though alcohol abuse outpaces all illicit substance abuse combined- and to say nothing of tobacco...)

LE MENU

- ▶ 1930s- Marijuana
- ▶ 1960s- LSD
- ▶ 1970s- Cocaine (powder)
- ▶ 1980s- Crack
- ▶ 1990s- Designer drugs (ecstasy)
- ▶ 2000s- Methamphetamine
- ▶ 2010s- Rx abuse
 - ▶ Specifically, Oxycotin/Oxycodone
 - ▶ (Even though Rx abuse has outpaced illicit drug use since the 1950s!)

CHANGES

- ▶ Today's heroin users are older (average age of 22.9 years), live in nonurban areas, and are equally male and female.
- ▶ These findings are significant because in the 1960s, the average age of heroin users was 16.5 years of age, the percentage of white people seeking treatment for their heroin use was 40% (it's now 90.3%), and 82.8% of heroin users were men.
- ▶ Why does race matter? Perception

WHY IS THE PUBLIC DEMANDING ACTION?

- ▶ Drug use- and specifically overdoses- are spreading to areas where drug use used to be “dirty little secrets.”
- ▶ In other words, the suburbs
- ▶ Look at Chicago
- ▶ Heroin-related deaths in suburban Chicago, 2011-2012
 - ▶ DuPage County increased 55 percent
 - ▶ Will County increased 80 percent
 - ▶ McHenry County increased 77 percent
 - ▶ Kane County increased 200 percent
 - ▶ (all in just one year)

EVERYTHING OLD IS NEW AGAIN

- ▶ Two congressmen released an explosive report on the growing heroin epidemic among U.S. servicemen.
- ▶ Ten to fifteen percent of the servicemen were addicted to heroin.
- ▶ In 1971!

A DAY THAT WILL LIVE IN INFAMY...



WHAT CAN WE EXPECT FROM CONGRESS?

- ▶ “Congress does two things well:
 - ▶ Handle emergencies;
 - ▶ and nothing.”
 - Nancy Pelosi
- ▶ The opiate- and addiction- emergency existed long before Mr. Hoffman.
- ▶ But now it is visible to EVERYBODY

IT'S HEROIN TIME!

- ▶ Between March and April 2014, there were no less than 4 congressional hearings/briefings on heroin and/or opioid overdose.
- ▶ These included briefings sponsored by both the House and Senate, Democrats and Republicans.
- ▶ We are truly seeing bi-partisan support for this issue, at least substantively.

HEARINGS...AND MORE HEARINGS!

- ▶ Buprenorphine
- ▶ Addiction and women's health
- ▶ Opiate addiction in the criminal justice system
- ▶ 5 separate hearings on marijuana and marijuana policy (more political than informational)
- ▶ The most important- at least in my book- was on 4/3/14, because it was about opioid abuse and its impact on PUBLIC HEALTH
 - ▶ (thanks to TFAH...and Oklahoma!)

PUBLIC HEALTH

- ▶ Terry Cline of Oklahoma is president of ASTHO
- ▶ His “President’s Initiative” for 2014/2015- an issue he selected as the most dangerous threat to public health:
 - ▶ OPIOID ABUSE!

HELP FROM THE WHITE HOUSE

- ▶ President Barack Obama's administration has promoted the current National Drug Control Strategy as a new chapter in its counter-narcotics fight.
- ▶ But what distinguishes the current policy from the past is officials are reframing the drug problem in the context of public health solutions.
- ▶ 67% of U.S. residents said the government should focus more on providing treatment for those using drugs like heroin and cocaine, according Pew Research Center. By comparison, 26% said the government should focus more on prosecuting drug users.

CRIMINAL JUSTICE

- ▶ Authored by Senators Portman and Whitehouse
- ▶ Joined by Senators Ayotte and Sanders
- ▶ Working to produce a comprehensive bill that would address the gaps in service, focusing on prevention and judicial settings.

BUPRENORPHINE

- ▶ Senator Markey (D-MA)
- ▶ Expands number of patients a physician can prescribe buprenorphine to from 30 to 100
- ▶ Emphasizes the treatment/counseling required for those receiving the medication

ILLINOIS' OWN REP. FOSTER

- ▶ Expanding Opportunities in Recovery Act
- ▶ This legislation removes barriers to addiction treatment by providing grants for residential/in-patient opioid addiction treatment for qualified individuals. For an individual to qualify, they must either lack health insurance or have health insurance that places a barrier to in-patient treatment, such as a requirement that cheaper but perhaps less effective treatments be exhausted first. Qualified individuals would be able to receive up to 60 consecutive days of treatment under this grant program.
- ▶ It's a tricky bill to support- because the money would have to come from somewhere else in SAMHSA.
- ▶ (He introduced this bill last month at Stepping Stones)

IMD EXCLUSION

- ▶ Institutions for Mental Disease (IMDs) are inpatient facilities of more than 16 beds whose patient roster is more than 51% people with severe mental illness.
- ▶ Federal Medicaid matching payments are prohibited for IMDs with a population between the ages of 22 and 64. IMDs for persons under age 22 or over age 64 are permitted, at state option, to draw federal Medicaid matching funds.

IT'S A DINOSAUR

- ▶ The policy has been in place since 1965 when Medicaid was enacted. State and local psychiatric hospitals housed large numbers of persons with severe mental illness at (non-federal) public expense. The Congress made clear that the new Medicaid dollars were not to supplant this public effort that was already going on with resources from state and local governments. Later, exemptions for children and the elderly were added by amendment.
- ▶ The exclusion for adults was upheld in a Supreme Court case. In the early 1980s, the 16-bed exemption was legislated as a response to the Court's decision. It made a moderate concession to the realities of deinstitutionalization, and re-stated opposition to financing "warehousing" in state hospitals.

IT'S ON THE RADAR...SORT OF

- ▶ Breaking Addiction Act of 2014
- ▶ It establishes a five-year demonstration project to expand cost-effective, community-based treatment options to address the heroin/opiate epidemic.
- ▶ would establish a five-year demonstration project for 8-10 states in which federal reimbursement would be permitted for Medicaid services provided in certain residential settings known as “Institutes for Mental Disease.”
- ▶ will enable participating states to receive federal reimbursement for Medicaid services provided to all eligible in-patients who receive treatment for chemical substance abuse at a community treatment facility. It partially waives what is known as the Institution for Mental Diseases (IMD) exclusion.


BREAK IT DOWN.

- ▶ Do we have data? Why yes, we do.
- ▶ The IMD exclusion keeps nearly 15 million Medicaid beneficiaries from receiving the treatment they need, and indirectly, it limits the number of treatment beds available for more than 23 million Americans, regardless of health coverage status.

IS IT A BAND AID? A STOPGAP?

- ▶ The new legislation carves out a narrow exception to the IMD exclusion in the 8-10 states participating in the \$300 million demonstration program. It allows federal reimbursement for Medicaid services provided to individuals receiving treatment for a substance use disorder in a “community-based Institute for Mental Disease.” “Community-based” refers to facilities such as chemical dependency treatment facilities or rehabilitation centers and excludes hospitals. The bill also requires an evaluation and report from the Secretary of Health and Human Services on the impact this change would have on the provision of substance use disorder services in the U.S.
- ▶ The bill’s authors cite the growing heroin and opioid epidemic as an urgent rationale for making this payment change, stating that this demonstration offers a model to expand cost-efficient and timely community-based treatment options for opioid abuse and misuse.

SHIFTING GEARS

- ▶ We're not where we need to be...yet.
 - ▶ Despite all of these efforts, the perception of addiction and drug use is still stuck in the past.
 - ▶ Why does this matter? Because perception is reality.
 - ▶ An uneducated public means an uneducated Congress.
- 

REMEMBER WHAT I SAID

- ▶ ...About Congress's approach to this issue?
- ▶ They address a specific drug, rather than the disease of addiction.
- ▶ Which means they often ignore....

▶ ALCOHOLISM

- ▶ (Warning: Graphic Content in Next Slide)


Who is this young lady?



SAY HELLO TO VODKA SAMM!

- ▶ Samantha Goudie, aka “Vodka_Samm”
- ▶ University of Iowa
- ▶ Arrested for running onto the football field
- ▶ Blew a BAC of .341
- ▶ Twittersphere hero
 - ▶ Called a hero
 - ▶ Called an inspiration
 - ▶ Mostly by other students

YOUR POINT IS...?

- ▶ If this woman was on meth or cocaine, she would have been condemned.
 - ▶ Instead, she was praised- or at the very least shrugged off.
 - ▶ This does NOT help our cause any.
- 

- ▶ In 2007, Congress held hearings on violence in hip hop music.
- ▶ It was bad for kids, they said. It set a bad example.
- ▶ Also bad for kids were lyrics about illicit drug use.
- ▶ This followed a hearing in 1994, after which the industry started self regulating:

Remember this?



Where's OUR hearing?

- ▶ Almost one-fourth of Billboard Magazine's most popular songs from 2009 to 2011 mentioned alcohol, a new study finds. Of the 167 songs, 46 referenced a specific brand, such as Patron, Hennessy, Grey Goose and Jack Daniel's.
- ▶ Do mentions of alcohol and underage drinking qualify for a warning label? No.
- ▶ Why? Because society just accepts alcoholism- and underage drinking- as something they have to tolerate.

WE'RE NOT OVER THE FINISH LINE YET...

- ▶ Governor Scott of Florida faced a massive budget shortfall. He needed to save money, fast!
- ▶ His bright idea? Drug test all welfare recipients.
- ▶ Why?
 - ▶ Because welfare recipients are poor and only poor people are addicts
 - ▶ Because addicts are a convenient scapegoat
 - ▶ Process- recipients must pay for test themselves, and if they test clean, they are reimbursed for the cost.

CHANGES IN ATTITUDES?

- ▶ General population averages a positive drug test at a rate of about 8%
- ▶ Welfare recipients in Florida?

TWO AND A HALF PERCENT!

- ▶ (And a federal judge ruled it unconstitutional to boot...)

CHANGES IN LATITUDES

- ▶ Utah joined the handful of states that have passed laws mandating drug tests for people seeking welfare benefits.
- ▶ of 4,425 people screened for drug use after seeking aid, 813 were deemed to be at high risk of drug use.
- ▶ 394 were actually subjected to drug testing
- ▶ How many people tested positive?
 - ▶ NINE

DRUG TESTING

- ▶ Several states have started drug testing programs for food stamp, welfare, and unemployment recipients.
- ▶ Despite such laws being ruled unconstitutional, they continue to be passed.
- ▶ Who benefits? Follow the money.
- ▶ An independent healthcare market research firm states that sales in the drug testing market increased by 4.3% from 2011 to 2013, and are projected to exceed \$3 billion by 2015.

SOME STATES GET IT...

- ▶ MISSOURI
- ▶ Senate Bill 680, which modifies the federal lifetime ban on Supplemental Nutrition Assistance Program (SNAP), for persons with felony drug convictions.
- ▶ Although the new law is a step in the right direction, it imposes a one-year waiting period after a conviction or release from custody.

STILL SOME “HOLDOVERS...”

- ▶ Governor Tom Corbett of Pennsylvania:
- ▶ “Drug Users Boost the Unemployment Rate”
- ▶ "There are many employers that say, 'we're looking for people, but we can't find anybody that has passed a drug test,' a lot of them."
 - ▶ There is no data whatsoever to support this.
 - ▶ Regardless of our advances, drug users are still used by some politicians as a viable boogeyman.

SOUTH CAROLINA, TOO

- ▶ "Down on River Site, they were hiring a few hundred people, and when we sat down and talked to them -- this was back before the campaign -- they said of everybody they interviewed, half of them failed a drug test," – Governor Niki Haley
- ▶ Want to know something about River Site Construction?
- ▶ The River Site doesn't even test applicants.
- ▶ They test workers. How many failed the last round?
 - ▶ ONE

JUST A YEAR AGO...

- ▶ “No politician will ever get elected by making drugs and addiction a centerpiece of their campaign.”
 - ▶ Andrew Kessler
 - ▶ September, 2013

THE TIMES, THEY ARE A CHANGIN'?

- ▶ Massachusetts Democrat Joe Avellone: If elected Massachusetts governor, proposed creating department to deal with state's drug addiction problem would be a “top priority”
- ▶ In a sign of how drastic the epidemic of drug addiction here has become, Gov. Peter Shumlin of Vermont devoted his ENTIRE State of the State Message to what he said was “a full-blown heroin crisis” gripping Vermont.

IT'S SPREADING...

- ▶ A candidate for the United States Senate for West Virginia, Natalie Tennant, unveiled her “substance abuse policy” during her campaign.
- ▶ The policy was not willy-nilly: She held several meetings with treatment providers, faith based groups, insurers, and other interested parties to develop this plan (too bad she’s not going to win...)

KEEP SOMETHING IN MIND

- ▶ Substance abuse is a big talking point
- ▶ But right now, NOTHING is getting done in Washington. NOTHING!
- ▶ So...how do we design advocacy strategies for a hot button issue in an environment where even “popular” or “simpler” issues can’t even make progress? It’s not easy.
- ▶ Advocacy is a drumbeat. Keep the beat going.
- ▶ BE READY. Washington- and advocacy- can keep you waiting for months. When that call comes for help, you’d better be ready to step up.

DON'T CALL US...WE'LL CALL YOU!

- ▶ The tide is clearly turning
- ▶ Congressional offices are now approaching advocates, asking us for information
- ▶ Which can only mean one thing, and one thing only...
- ▶ The PUBLIC is demanding action
 - ▶ (and it's NOT because they're Philip Seymour Hoffman fans...)

KRS-ONE

- ▶ What Congress knows about treatment is an exact duplicate of what the general public knows about treatment.
 - ▶ A select few understand that addiction is a disease and treatments should be evidence based.
 - ▶ Far more than last year are on board
- ▶ If the public does not care, Congress will not care.
- ▶ The public cares- more importantly, they are beginning to show it

CAREFUL WHAT YOU WISH FOR

- ▶ The door has cracked open
- ▶ EVERYONE is pouring through it
 - ▶ Recovery
 - ▶ Prevention
 - ▶ Treatment
 - ▶ Medication Assisted Treatment
 - ▶ Reimbursement
 - ▶ Access to care

DON'T JUMP THE GUN

- ▶ Lots of members of Congress support our efforts. But few- or dare I say none- have made it their top priority.
- ▶ There is rhetoric, and there is reality
- ▶ And in Washington, reality is MONEY.
- ▶ Some have made Mental Health a priority, but that's not exactly the same thing, is it?

THANK YOU, CAPTAIN OBVIOUS!

- ▶ No longer the age of “Gimmie!”
- ▶ Age of “don’t cut me!”
- ▶ That’s bad (in case you hadn’t figured that out.)
- ▶ All public health funding is in jeopardy. Think addiction and substance abuse is a sacred cow, or first on the chopping block?

THE TIMING JUST FLAT OUT SUCKS.

- ▶ Times are tough for all advocates.
 - ▶ Pressures to reduce spending.
 - ▶ Which brought us such lovely headaches as the Sequester...
- ▶ We get the crumbs to begin with.

THINK STATE FUNDS APPEAR OUT OF THIN AIR?

- ▶ SAMHSA also disperses discretionary funds to the states, and in 2014, Illinois received \$20.9 million for substance abuse prevention and treatment.
- ▶ The previous year, the state received \$22.9 million.
- ▶ The year before that, it was \$24 million.
- ▶ That's a 13 percent decrease in just two years.

WE'RE NOT EXACTLY ALONE

Federal spending has been cut by \$900 billion in the Budget Control Act, by \$1.2 trillion in the sequester and by more than \$500 billion in the 2010 continuing resolution.

FY 2014

The budget deal returns NDD spending back to about the levels of the Bush Administration.

Depending on how you look at the numbers, you could even say that spending is now below what it was in 2008, the last year of appropriations under President Bush.

In 2013 dollars, President Bush had \$509.5 billion to spend on NDD in 2008. President Obama is on course to average \$486.5 billion a year.

ADVOCACY EFFORTS

- ▶ We pause to bring you this public service announcement:
- ▶ The Coalition for Health Funding- the largest health advocacy coalition in DC- produced a report on the impact of cuts to public health.
- ▶ Thanks to a joint effort by the IC&RC and IADDA, Alan Sandusky and the South Suburban Council were featured in the report, which brought to light the impact of SAMHSA cuts on the opioid treatment system.
- ▶ Funding for the block grant has remained relatively flat, while the number in need of treatment skyrockets. You do the math.
- ▶ A copy was distributed to every congressional office.

WHAT'S THE RUSH?

- ▶ Want to be legit? Need research
- ▶ On May 27-28, 2014, a public expert panel workshop was held to inform the development of a new initiative of the Collaborative Research on Addiction at the NIH, otherwise known as CRAN.
- ▶ This initiative involves the National Institute on Drug Abuse (NIDA), the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and the National Cancer Institute (NCI)—as well as the Eunice Kennedy Shriver Institute of Child Health and Human Development (NICHD).

“CRAN”

- ▶ What is the impact of diverse patterns of use of marijuana, alcohol, nicotine and other substances on the structure and function of the developing brain, as revealed by brain imaging?
- ▶ What are the consequences of substance use on physical health, psychosocial development, information processing, learning, memory, academic achievement, motivation, emotional regulation, and other behaviors?

“CRAN”

- ▶ What factors (prenatal exposure, genetic, epigenetic, neurobiological, psychosocial, family history) influence drug use and its consequences during development?
- ▶ In what way does use of each substance contribute to the use of others (gateway interactions)?
- ▶ The price tag?
 - ▶ \$30 MILLION/YEAR

MORE ALPHABET SOUP: CDC

Addiction is a disease

The study of disease, especially ones that impact entire populations, belongs at the CDC

Yet other than studies on underage drinking, the CDC has never really engaged...until now

CDC

Addiction gets some traction at the CDC!
(Finally!)

The White House asked for a \$15 million increase for Rx monitoring and prevention program, bringing the amount spent on this issue by the CDC from two million dollars to...

\$17 MILLION DOLLARS!



BUT...

- ▶ If the FY 2015 Budget is not passed- which is looking quite unlikely- we are faced with a Continuing Resolution.
- ▶ That means funding continues at last year's levels. Which means...
 - ▶ No new programs.
 - ▶ No new appropriations.
 - ▶ No \$15 million for a new Rx abuse program at CDC.

THE GOOD, THE BAD, THE UGLY

- ▶ The good: Congress is giving more attention to the issue of addiction than ever before, and from a public health perspective.
- ▶ The bad: They're still not sold on the disease of addiction, just on specific drugs they perceive as a threat.
- ▶ The ugly: The current situation in Washington. Which, regardless of your affiliation or opinion, impacts substance abuse treatment nationwide.

THANK YOU!

► Questions?