

ALCOHOL AND DRUG ADDICTION:

THE #1 PUBLIC HEALTH ISSUE FACING OUR NATION

Addiction is a chronic disease, like diabetes, asthma or hypertension, and paying for its treatment yields as good a return as paying for treatment for other chronic illnesses. **Alcohol and drug abuse costs society approximately \$366 billion per year.ⁱ Recent cost benefit studies consistently find that benefits to society that result from treatment (i.e., decreased crime, improved health, increased employment, increased overall social functioning) are greater than the costs of addiction.ⁱⁱ**

To Protect America's Health in Challenging Times, Investments in Preventing and Treating Addiction to Alcohol and Other Drugs Are Needed Now

According to the National Institute on Drug Abuse (NIDA), Post-Traumatic Stress Disorder (PTSD) may develop in people after they experience life-threatening events. Research shows that PTSD is a risk factor for substance use and addiction.

- **Trauma:** Research has clearly demonstrated that trauma such as that caused by Hurricane Katrina will likely result in increased alcohol and other drug problems for survivors, including police, medics and other first responders. A critical component of response efforts must be resources which address the survivor needs related to alcohol and other drug use, dependency and addiction. In a survey organized by the Council on Alcohol and Drug Abuse in the Greater New Orleans Area and the Louisiana Highway Safety Commission found that of the 603 people polled, 46 percent said they experience continued stress and anxiety since the Hurricane. One in 7 people polled said they drink more alcohol to handle the emotional stress. One in 9 people said they take more prescription drugs to cope. One in 11 people surveyed said they knew a family member who used more illegal narcotics.
- **Veterans:** Over 485,000 Veterans in Veterans Administration (VA) settings were diagnosed with substance use disorders in 2002, but only 92,000, less than 20 percent, received specialized care. With hundreds of thousands of Americans currently on active duty, the need for alcohol and other drug addiction treatment services for veterans will increase significantly.

Other Alarming National Trends:

- **Methamphetamine:** Nationwide, the admission rate for treatment of methamphetamine or amphetamine addiction has risen from 28,000 in 1993 to nearly 136,000 patients in 2003. Eighteen states have methamphetamine treatment rates higher than the national rate; Oregon had the highest rate, followed by Hawaii, Iowa, California, Wyoming, Utah, Nevada, Washington, Montana, Arkansas, Nebraska, Oklahoma, Minnesota, South Dakota, Colorado, Missouri, Idaho and Kansas.
- **Americans Aged 50-59:** Although the overall rate of illicit drug use has remained stagnant over the last three years with 19.7 million Americans reported as current drug users, the illicit drug usage rate for people between the ages of 50 and 59 has significantly increased.
- **Prescription Drugs and OTC Medication:** Approximately one in five teenagers (18 percent), or 4.3 million teenagers nationally, report abusing Vicodin®; one in 10 teenagers (10 percent), or 2.3 million teenagers nationally, report abusing OxyContin®. (Both are prescription painkillers.) One in 11 teenagers (9 percent), or 2.2 million young people, has abused OTC cough medications intentionally to get high. Such products contain the active ingredient dextromethorphan.

A Majority of Americans Have Been Affected by Addiction to Alcohol or Other Drugs and Support Increased Funding for Addiction Treatment Services

Most of the public would be more likely to vote for candidates who propose policies that prioritize treatment and recovery and reduce discrimination.

- A 2004 survey found that a majority of Americans has been affected by addiction to alcohol or other drugs, including a 63% majority who says that addiction to alcohol or other drugs has had a great deal or some impact on their lives.ⁱⁱⁱ
- An 81% majority is more likely to vote for a candidate who proposes reallocating government spending to place a greater emphasis on prevention, education, treatment, and recovery support.
- A 75% majority is more likely to vote for a candidate who called for an increase in federal government funding for programs to prevent and treat addiction and support recovery, as well as fund scientific research on the causes of addiction.
- A 61% majority says that a lack of treatment and recovery programs for people addicted to alcohol and other drugs is a problem in their communities.

Alcohol and Drug Prevention and Treatment Programs Work and Are Cost-Effective

- Relapse rates for treatment of addiction to alcohol, opioids and cocaine are less than those for hypertension and asthma, and equivalent to those of diabetes – all chronic conditions.^{iv}
- Addiction treatment has been shown to cut drug use in half, reduce crime by 80 percent, and reduce arrests by up to 64 percent.^v
- *Taxpayers save \$7 for every \$1 spent on treatment and \$5.60 for every \$1 spent on prevention, as a result of increased productivity, and reduced health care, criminal justice, and social services costs. When adding the savings to healthcare, for every \$1 dollar spent in addiction treatment, society benefits by more than \$12.*

Alcohol and Drug Addiction Treatment Services Must Be Made Available to Those Who Need It; Over 80 percent of People Who Need Treatment Do Not Receive It

- According to SAMHSA, in 2005 22.2 million people, or 9.1 percent of the population, were classified with substance dependence or abuse in the past year. However, only 3.9 million of these individuals received some kind of treatment, leaving over 18 million people in need of treatment, or 82 percent, without essential addiction treatment services.
- Alcohol and drug addiction treatment is a tiny portion of all health spending: \$18.3 billion (1.3%) of the \$1,372.5 billion spent in 2001 on health spending was spent on alcohol and drug addiction treatment services.

ⁱ “The Economic Costs of Drug Abuse in the United States, 1992-2002,” Office of National Drug Control Policy, 2004; “Updating Estimates of the Economic Cost of Alcohol Abuse: Estimates, Updating Methods, and Data,” 2000, Henrick Harwood, National Institute on Alcohol Abuse and Alcoholism

ⁱⁱ Harwood, H. (2002). Cost Effectiveness and Cost Benefit Analysis of Substance Abuse Treatment: Literature Review and Annotated Bibliography. Presentation at IRETA February 20, 2003.

ⁱⁱⁱ National survey by Peter D. Hart Research Associates and Robert M. Teeter’s Coldwater Corporation

^{iv} O’Brien, C.P., & McLellan, A.T. (1996). Myths about the Treatment of Addiction. *The Lancet*, 347, 237-240.

^v The National Treatment Improvement Evaluation Study (NTIES). 1997. Office of Evaluation, Scientific Analysis and Synthesis, Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration.