

# Opportunities to Address Substance Use Disorders

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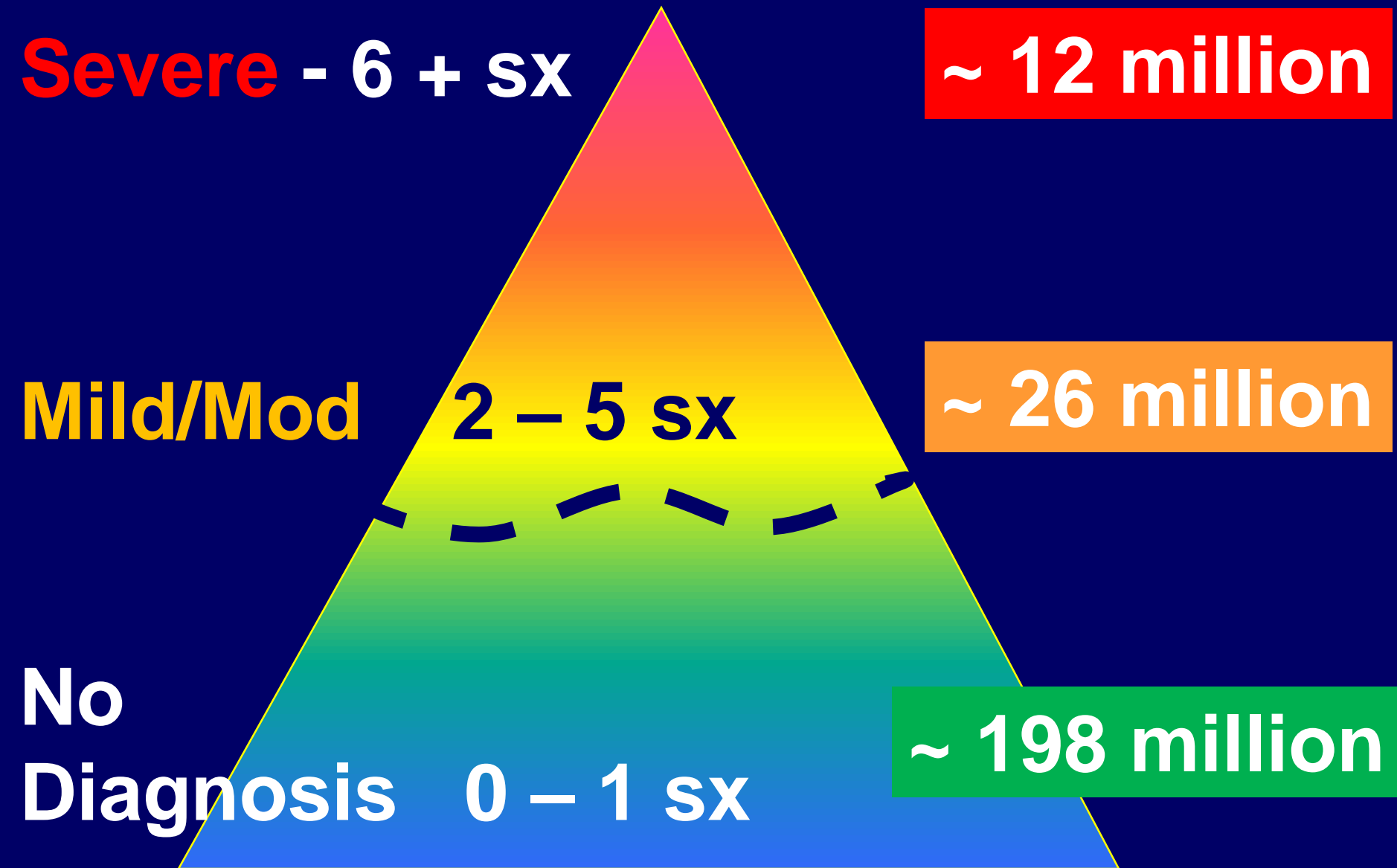


# Improving the SUD Infrastructure

## *Opportunities for Impact*

**A Thomas McLellan, PhD**  
**Founder and Chair, Treatment Research Institute**

# Substance Use Disorders in the US



# Historical Context

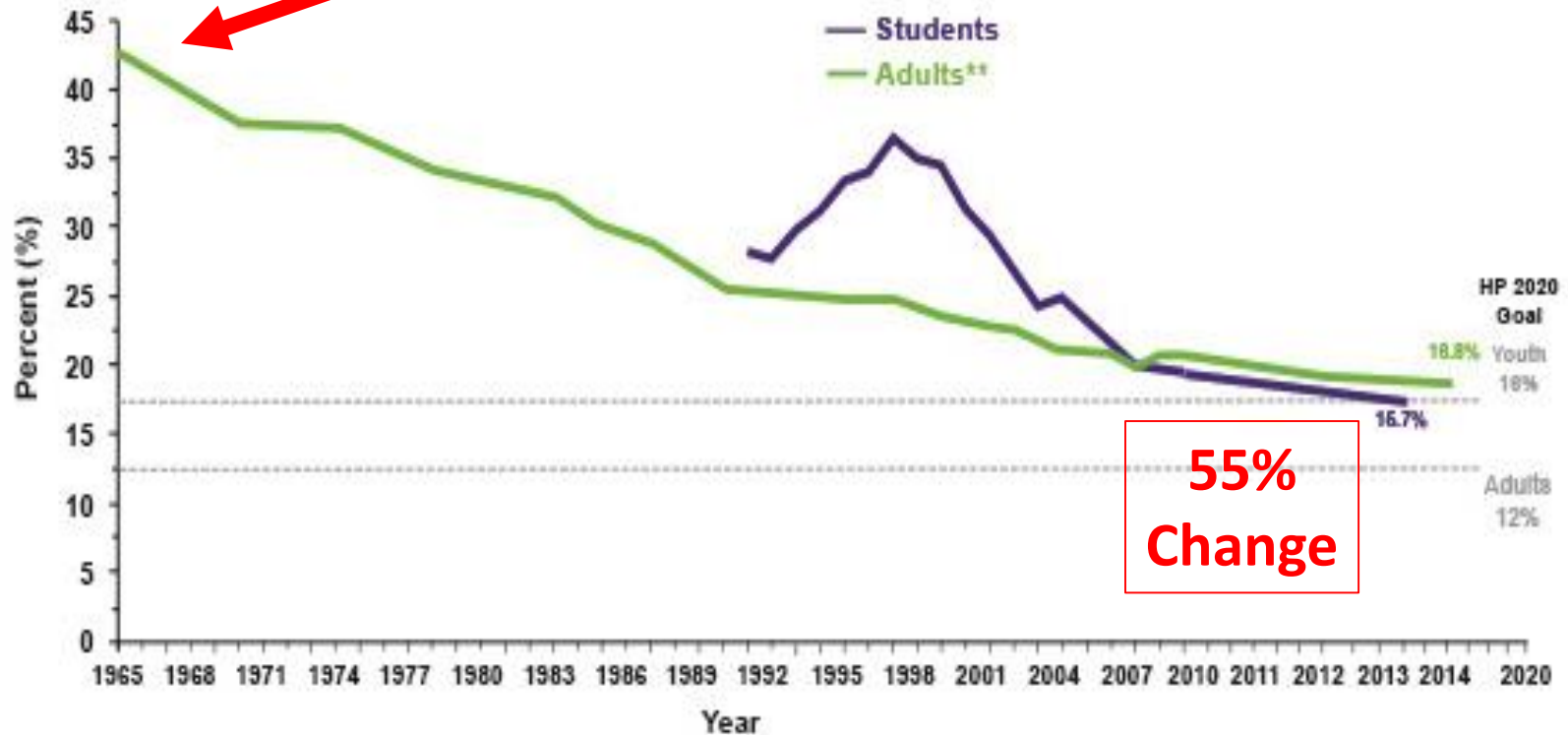
- Addictions have long been considered “character” problems
  - Punish these and they will change...?
  - Even treatments were designed to re-develop character.
  - Purposely segregated from healthcare
- Brain and genetic science says addictions are best considered **chronic illnesses** –
  - Best insured and treated like other chronic illnesses – but they never have been

# This is Changing NOW

- ACA and Parity
  - Changes in coverage
  - New awareness of effects on mainstream care
- Public attitude change
  - Epidemic of Opioid Overdose & Addiction
  - Dissatisfaction With Traditional “Programs”
- Greater political WILL to do something – starting at the White House – (\$1.1 B!)
- Surgeon General’s Report Substance Use and Health
  - Modeled after 1964 “Smoking and Health”

# Smoking Rates Since

## “Smoking and Health”



\*Percentage of high school students who smoked cigarettes on 1 or more of the 30 days preceding the survey (Youth Risk Behavior Survey, 1991-2013).

\*\*Percentage of adults who are current cigarette smokers (National Health Interview Survey, 1965-2014).

# The System of Care is Transforming

- Science + Public Demand + Legislation = a **very different system** within 5 yrs
- **Neither** general nor addiction treatment systems are ready
- Community projects will have **great impact**
  - Research-driven practice innovations
  - Applications/Implementation evaluations
  - Inter-state policy comparisons
- Federal dollars make new demonstration projects highly leveraged investments

# Improving Quality and Transparency

- Need to **standardize quality measures** and hold providers and payers **accountable**
  - *Example: Consumer Guide for Addiction Treatment*
  - *Example: Tracking and Reporting on Implementation of Parity*
  - *Example: Soberlink for FASD*



# Prevention and Adolescent SUD

- Adolescence is THE ‘at-risk’ period for developing an SUD
  - 90% of all addiction is diagnosable before the age of 22 years
  - Must focus on this population if we are going to make a dent in overall prevalence of SUD
  - *Example: **Communities that Care***
  - *Example: **SBI in High School Health Clinics***

# Educating Clinicians

- SUD affects more people in this country than Cancer or Diabetes
- And it also affects the care of cancer, diabetes, hypertension and depression
- Yet, **2/3** of medical, nursing, pharmacy and even social work schools don't teach it
  - *Example: "Course on Addiction and Recovery Education" (CARE)*

## In Summary....

- The SUD field is undergoing a massive transformation based on new science
- It's not just need - it's **opportunity** – for **impactful investments**
  - **\$10,000** = Local medical/nursing school course
  - **\$100,000** = Prevention Prepared Community
  - **\$250,000** = State Consumer Guide
  - **\$1M** = State Parity Implementation; New Clinical product or practice;

# Treatment Research Institute

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# Lifting the Burden of Addiction





High impact philanthropic  
opportunities in the United States

**Katherina Rosqueta**  
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# Overview

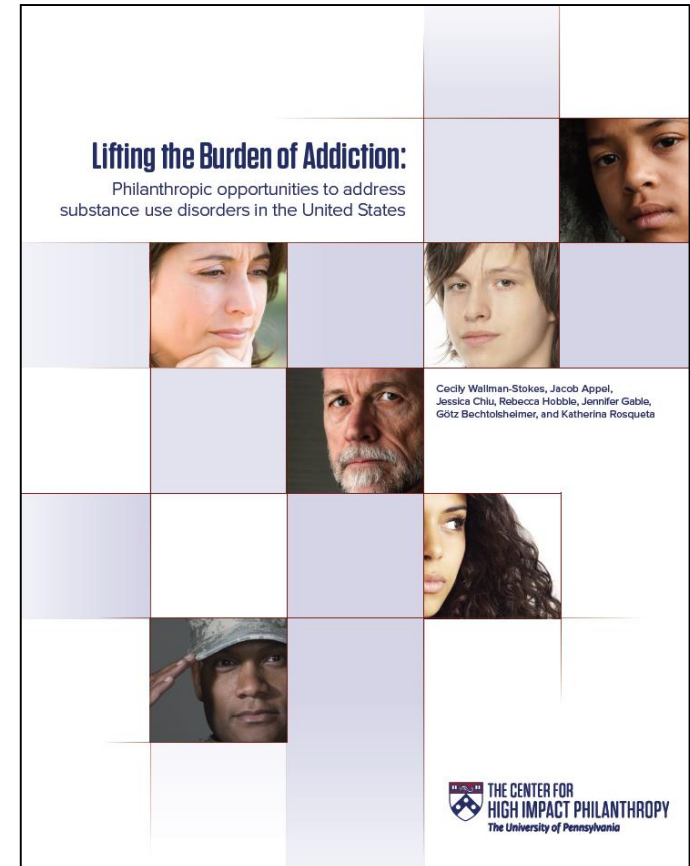
- Why this, why now?
  - The case for philanthropic action
- What can funders do?
  - Considerations for funders
  - Examples of high impact giving opportunities
- Next steps

# Why This, Why Now?

Opportunity for Impact	Our Work	Partners & Funding
 <ul style="list-style-type: none"><li>• Growing opioid epidemic</li><li>• Unprecedented bipartisan attention</li><li>• Growing body of evidence-based solutions</li></ul>	 <ul style="list-style-type: none"><li>• Dedicated to helping funders create greater social impact</li><li>• Multidisciplinary, collaborative, &amp; evidence-informed</li></ul>	 

# About this project

- Goal: Provide the best evidence on preventing & treating substance use disorders (SUDs) so funders can act
- Result: Portfolio of high-impact giving opportunities in SUDs

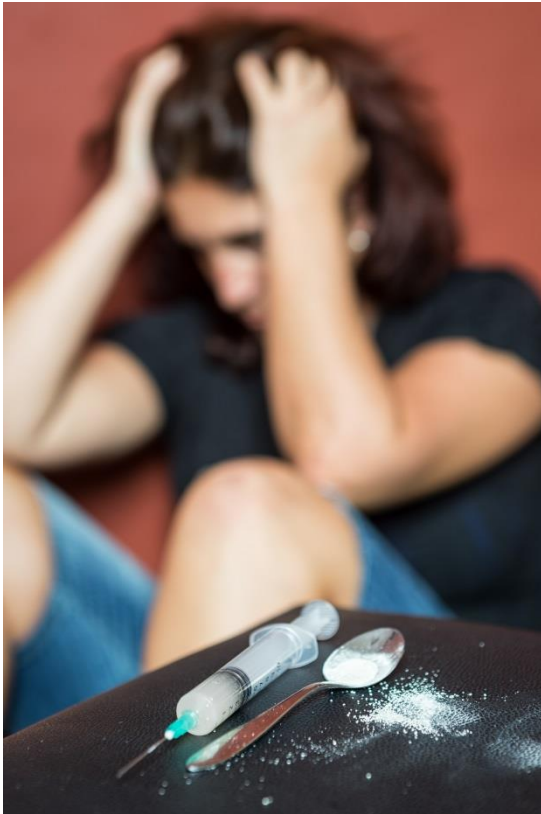




# Considerations for funders

- Funders have an unprecedented opportunity to act:
  - People with SUDs- and the organizations that help them- face less stigma & discrimination.
  - Behavioral health issues are better understood today than they ever were.
  - When it comes to treatment, one size doesn't fit all- and it doesn't have to.
  - The policy environment has improved.

# Interventions that save lives: Naloxone distribution programs



- Prevent opioid overdose deaths by supporting community orgs that provide naloxone distribution & training
- Example implementer:
  - [Prevention Point Pittsburgh](#)
- Example cost & cost-per-impact:
  - \$40-\$55 per individual
  - \$1200-\$1600 to save a life

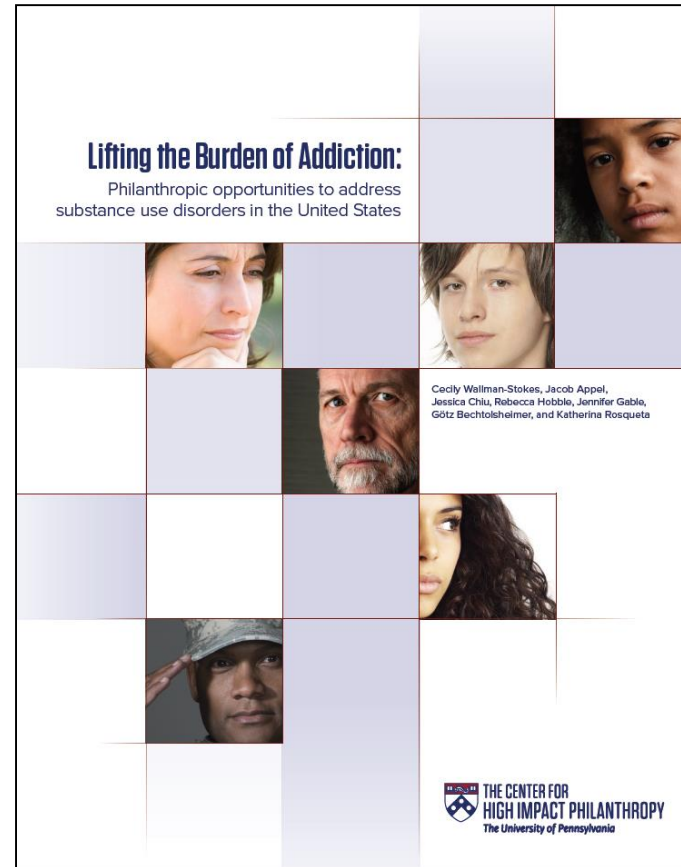
# Stabilize lives of women & children: Comprehensive residential treatment



- Connect pregnant women, mothers, & their young children to gender-specific, trauma-informed care
- Example implementer:
  - [Meta House, Milwaukee](#)
- Example cost & cost-per-impact:
  - < \$7,000 per family
  - 3 times more likely to stay drug & alcohol free
  - Healthier births & increased family reunification

# Opportunities for funders: Next steps

- For more high impact giving opportunities in SUDs, visit <http://bit.ly/1Kn5Krq>.
- Questions about our SUDs work? Contact Rebecca Hobble, Analyst, at [rhobble@sp2.upenn.edu](mailto:rhobble@sp2.upenn.edu).
- More tools to practice high impact philanthropy at [www.impact.upenn.edu](http://www.impact.upenn.edu).



# Question?

Please type your question into the Chat Box or press  
\*6 to unmute your phone line and ask a question

- More webinars on this topic?
- New topics you want to tackle or learn more about?
- Innovative work that you want to share?
- A question you want to pose to your colleagues?

Contact us at [bh@gih.org](mailto:bh@gih.org)