



Proposed Op-Ed / Guest Editorial

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WISCONSIN LEGISLATURE MUST PROTECT FUNDING FOR ALCOHOL AND DRUG INTERVENTIONS

Each year in Wisconsin we tally the consequences of drug and alcohol abuse like the fallout from a natural disaster: thousands dead or injured, hundreds of families destroyed, billions of dollars lost. Drug- and alcohol-related injuries and diseases are the fourth-leading cause of death and hospitalization in Wisconsin, and excessive drinking is the leading cause of disability among men.

Sadly, it often takes an injury or health problem for people with alcohol or drug problems to seek treatment. But what if there was a way to reach those people *before* their drinking or drug use resulted in injury, disease or arrest?

There is—a program called Screening, Brief Intervention and Referral to Treatment (SBIRT) currently administered at more than 20 clinics statewide by the Wisconsin Initiative to Promote Healthy Lifestyles (WIPHL). With WIPHL's help, clinics intervene every year for thousands of people with risky and problem drinking and drug use. Thanks to Gov. Doyle's forward-thinking administration, \$381,000 has been penciled into the 2009-11 state budget to expand these remarkably effective—and cost-effective—services to Wisconsin's Medicaid population. It's of critical importance that the state legislature protect this funding.

SBIRT identifies and addresses risky alcohol and drug use at an early stage, before this use and related problems intensify. While waiting to see their doctors, patients complete screening surveys with questions such as "Have you consumed five or more standard drinks in a day or night within the last three months?" Health educators utilize motivational interviewing to help patients who screen positive understand in real terms the effects of their alcohol and drug use: on their health, their ability to work or parent, and even their pocketbook. The entire process typically takes 10 to 30 minutes, and is often the only drug and alcohol counseling a patient receives all year.

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Intervention / Add One

Remarkably, between 30-60 percent of at-risk patients will decrease their alcohol and drug intake based solely on these SBIRT services, a success rate besting screenings for hypertension, high cholesterol, diabetes and obesity, according to the National Center for Prevention Priorities. SBIRT targets the 25 percent of Wisconsin adults who engage in at-risk drinking or drug use, a population far larger than those suffering from addiction (roughly 6 percent). These patients, because they are not yet addicted, can make behavioral changes, and often do.

Repercussions of this decreased drinking and drug use are profound:

- Reduced substance-related hospitalization and emergency room visits lead to dramatic health care savings. Studies have shown that for every dollar spent on brief intervention, we save about \$4 within the first 12 months. What's more, a 2000 University of Wisconsin study shows savings of nearly \$1,000 in health care and criminal justice costs for every patient that receives SBIRT services. With Medicare facing a \$415 million deficit, Gov. Doyle's investment stands to realize tremendous fiscal benefits.
- Decreased episodes of drunken driving lead to fewer drinking-related deaths and injuries on our roadways and fewer substance-related crimes. An added benefit is that fewer crime results in fewer prisoners, helping to unburden our overworked criminal justice system.

WIPHL currently utilizes federal seed grant funds to administer SBIRT interventions in all areas of Wisconsin, from Central City Milwaukee to the rural Northwest; from suburbs like Waukesha to farming and tribal communities. Since 2007 the program has screened more than 57,000 patients and intervened in nearly 9,500 cases. An increased investment in this screening can only lead to less abuse, fewer accidents and a safer, healthier population.

While policymakers, treatment providers and advocates work to make addiction treatment more readily available to the thousands of people who need it, efforts like SBIRT to reduce the number of people who lapse into addiction are equally important. There's no easier person to rescue from the grip of addiction than the person who doesn't become addicted in the first place.

For these reasons, funding for SBIRT must stand.

Genyne Edwards, former deputy secretary of the Wisconsin Department of Tourism, is advocacy director for the Milwaukee Addiction Treatment Initiative, a project of Community Advocates, Milwaukee.