

Maine Association of Substance Abuse Programs

Substance Abuse in Maine: A Policy Paper  
Executive Summary

The Maine Association of Substance Abuse Programs, with membership representing eighty percent (80%) of OSA funded substance abuse programs and providers throughout the state, is the voice of Maine's substance abuse providers. MASAP believes that it is time for a renewed emphasis on Maine's substance abuse policies. We must substantially refocus our investment in the prevention and treatment of harmful drug use and addiction. This requires reallocating resources toward alcohol and drug prevention and treatment, utilizing criminal justice procedures that are shown to be effective in reducing supply and demand, and reducing the disabling regulation of addiction treatment programs.

Substance Abuse is Maine's primary health problem and mirrors the Robert Wood Johnson data citing substance abuse as the nation's primary public health problem..

- 103,200 of Maine's citizens are substance abusers.
- There were 12,000 admissions and 10,000 clients in treatment for substance abuse at MASAP member agencies in 2001.
- Between 70 -90% of child welfare spending is related to parental substance abuse.

MASAP members believe that a strategy to increase standards of quality for substance abuse prevention and treatment must include the critical components below:

- Prevention is critical.
- No single treatment is appropriate for all individuals
- Treatment needs to be readily available
- Effective treatment attends to multiple needs of the individual, not just substance abuse
- Medical detoxification is only the 1<sup>st</sup> stage of addiction treatment and by itself does little to change long term drug use.
- Remaining in treatment for an adequate period of time is critical for treatment effectiveness
- Counseling and other behavioral therapies are critical components of effective treatment for addiction
- Medications are an important element of treatment for many patients especially when combined with counseling and other behavioral therapies
- Addicted or drug and alcohol abusing individuals with coexisting mental disorders should have both disorders treated in an integrated way
- Treatment does not need to be voluntary to be effective
- Treatment programs should provide assessment for HIV, AIDS, Hepatitis B and C, TB and other infectious diseases as well as counseling to help people modify or change high risk behaviors
- Provide shelter and a safe place to sleep, out of harm's way for Maine's citizens who are incapacitated by the diseases of alcoholism and drug abuse and/or or are homeless because of their disease..
- Recovery is a long term process and may require multiple treatment episodes

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- Enhance resources to offer a full continuum of Substance Abuse services to individuals in the adult and juvenile justice system, recognizing that new resources are needed so services available to the general population are not displaced.
- Create a cabinet level position and/or Department solely dedicated to Substance Abuse. The creation of a “Drug Czar” position, placed within the Governor’s Office, would enable the State to fully focus on its primary public health problem, Substance Abuse.

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