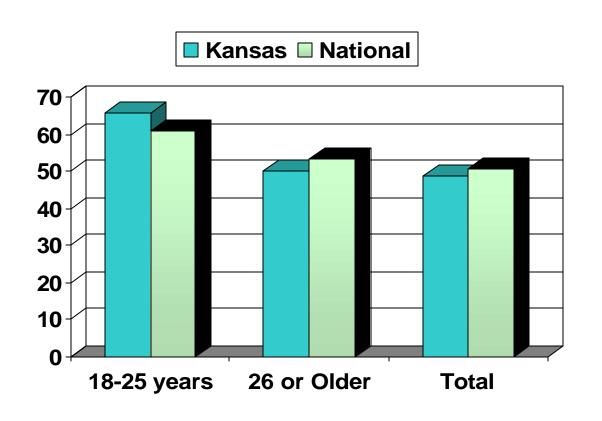
SUBSTANCE ABUSE

Healthy Kansans 2010
Steering Committee Meeting
May 12, 2005

Adult Alcohol Use in Past 30 Days

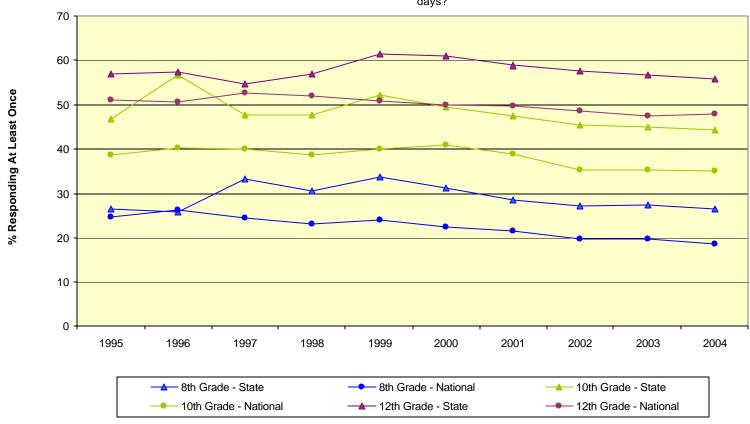


Source: SAMHSA Office of Applied Studies, National Survey on Drug Use and Health, 2002 and 2003

Alcohol Use Among Kansas Youth

30-Day Usage - Alcohol

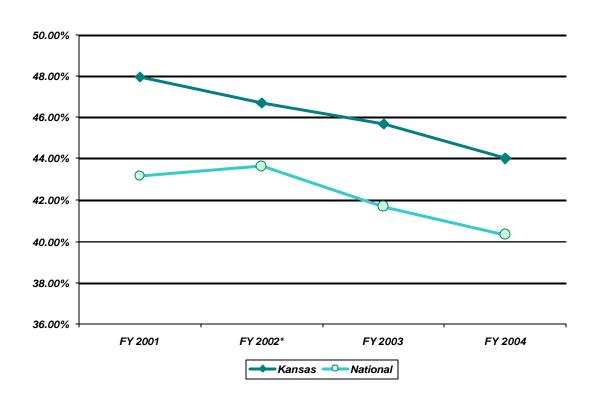
Question: On how many occassions (if any) have you had beer, wine, or hard liquor in the past 30 days?



Alcohol Use Among Kansas Youth

- Kansas 6th, 8th, 10th, and 12th grade students surveyed reported first use of alcohol at 12.8 years of age
- Alcohol use reported by 8th, 10th, and 12th grade students surveyed in Kansas is higher than among national peers
 - 56% of high school seniors surveyed drank alcohol in the past 30 days, compared to 48% nationally

Trends in Treatment Admission for Alcohol Use



Source: SAMHSA Treatment Episode Data (*First three quarters of FY 2002)

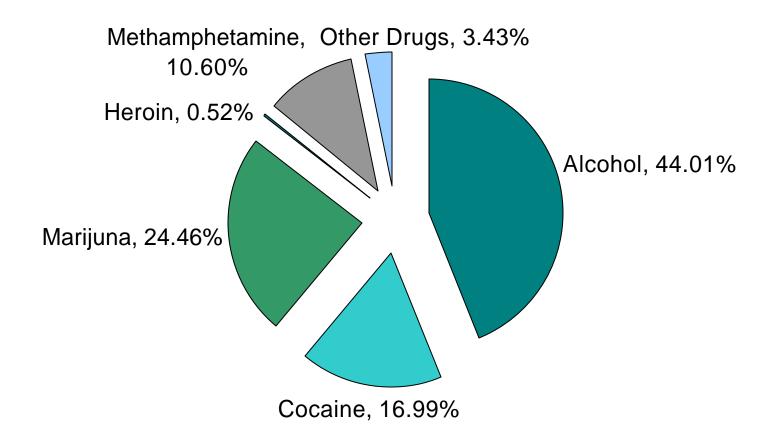
Adult Alcohol Use and Abuse

- Alcohol use is higher among young adults in Kansas than among national peers
 - 66% of Kansas 18-25 year olds are estimated to have drank alcohol in the past 30 days, compared to 61% nationally

Treatment Data Source

 All data regarding treatment admissions contained here represent only those Kansans who access publicly-funded substance abuse services

Percentage of Treatment Admissions by Primary Problem

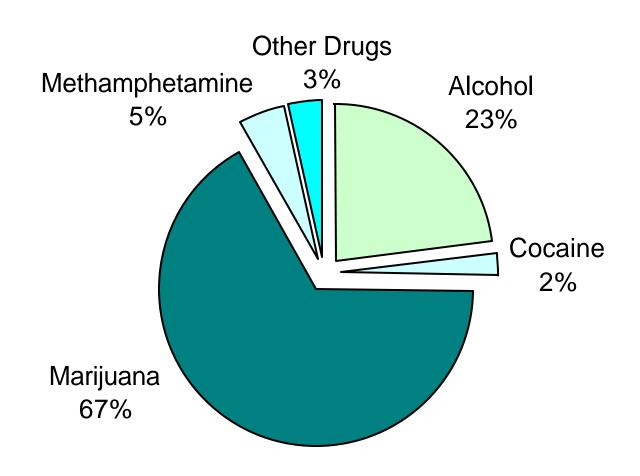


14,911 Kansans were admitted to publicly-funded substance abuse treatment in FY2004

Overall Treatment Admissions

- 67% of treatment admissions in Kansas in FY2004 were male, compared to 68% nationally
- 33% of treatment admissions in Kansas in FY2004 who were female, compared to 31% nationally
 - 6.7% of all females entering publiclyfunded treatment in Kansas in FY2004 were pregnant at admission (330/4,918)

Adolescent Treatment Admissions by Primary Problem



Overall Treatment Admissions

- 15% of all admissions to publicly funded treatment were under 17 years of age
- Marijuana was the primary problem documented for adolescents entering treatment
 - 67% of adolescents entering treatment reported marijuana as the primary problem

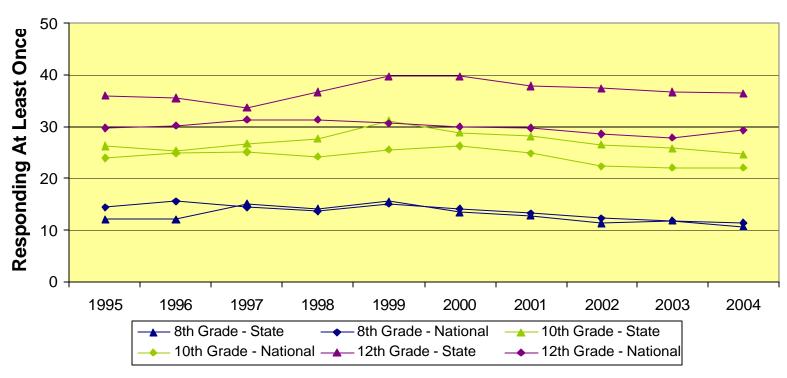
Alcohol

- 44% of all publicly-funded treatment admissions in Kansas in FY2004 reported alcohol as the primary problem (6,592)
 - Alcohol admissions were highest among Kansans aged 35 years or older
- 37% of women admitted to treatment reported alcohol as the primary problem
- 330 women who entered treatment were pregnant at admission
 - 24.6% (N=81) reported alcohol as the primary problem
 - 52.4% of pregnant women who entered treatment were between the ages of 21 and 35.

Source: Kansas Client Placement Criteria (KCPC), 2004

Binge Alcohol Use Among Kansas Youth

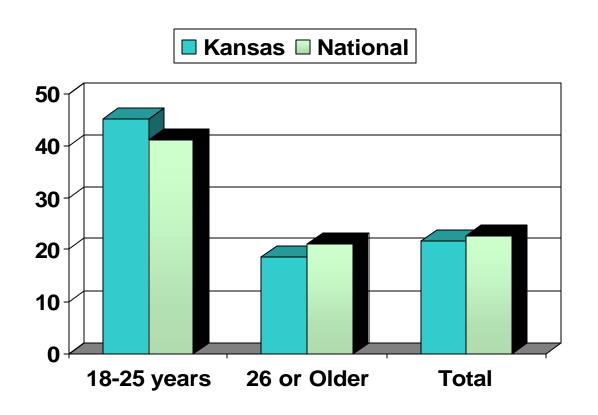
Binge Drinking (5+ drinks in a row in last 2 weeks)



National data obtained from the Monitoring the Future Student Survey State data obtained from the Kansas Communities That Care Student Survey

May 10, 2005

Adult Binge Alcohol Use in Past 30 Days



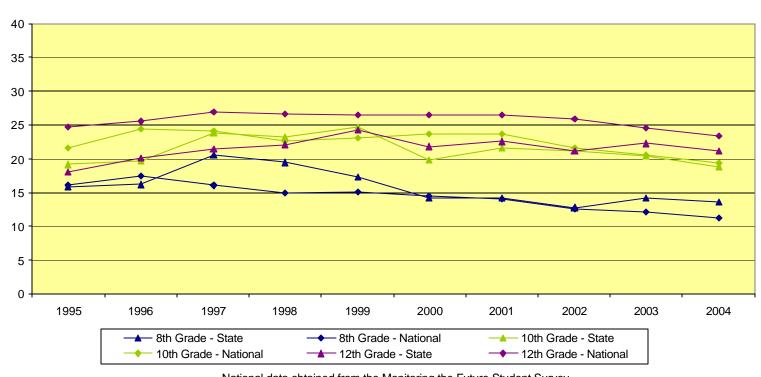
Source: SAMHSA Office of Applied Studies, National Survey on Drug Use and Health, 2002 and 2003

Binge Drinking in Kansas

- Binge drinking is higher among Kansas adolescents and young adults than among national peers
 - 37% of 12th graders and 25% of 10th graders surveyed in Kansas reported drinking 5+ alcoholic drinks in a row in the past two weeks, compared to 29% and 22% respectively among their national peers
 - 45% of Kansas 18-25 year olds are estimated to have drank 5+ alcoholic drinks in a row in the past 30 days, compared to 41% nationally

Illicit Drug Use Among Kansas Youth

30-Day Illicit Drug Use

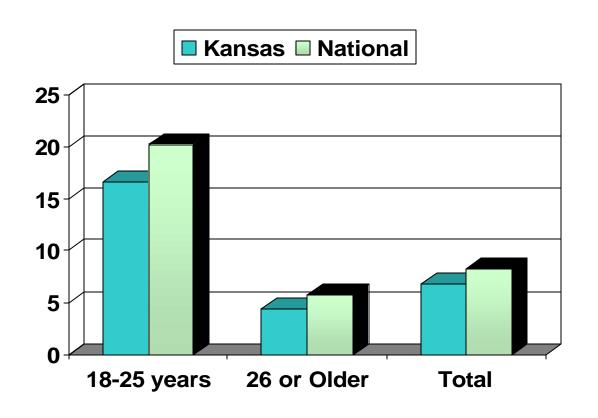


National data obtained from the Monitoring the Future Student Survey State data obtained from the Kansas Communities That Care Student Survey

Illicit Drug Use Among Kansas Youth

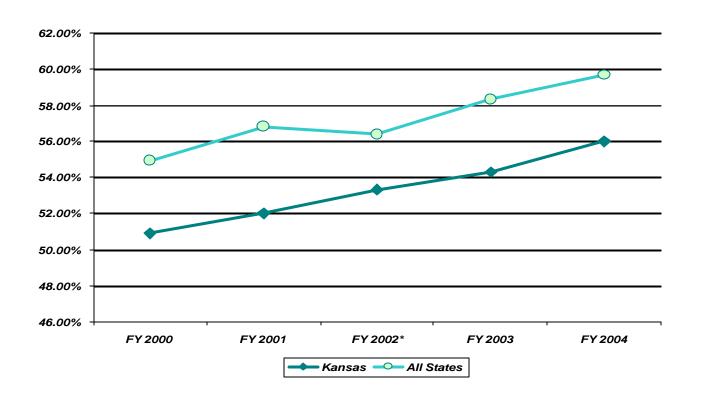
- Kansas 6th, 8th, 10th, and 12th grade students surveyed reported first use of marijuana at 13.7 years of age
- Kansas adolescents report lower levels of illicit drug use than their national peers
 - Marijuana is the most prevalent illicit drug used by Kansas students surveyed
 - 20% of 12th graders and 15% of 10th graders surveyed in Kansas reported using marijuana in the past 30 days

Illicit Drug Use in Past 30 Days



Source: SAMHSA Office of Applied Studies, National Survey on Drug Use and Health, 2002 and 2003

Trends in Treatment Admissions for Illicit Drug Use



Source: SAMHSA Treatment Episode Data (*First three quarters of FY 2002)

Illicit Drugs

Methamphetamines

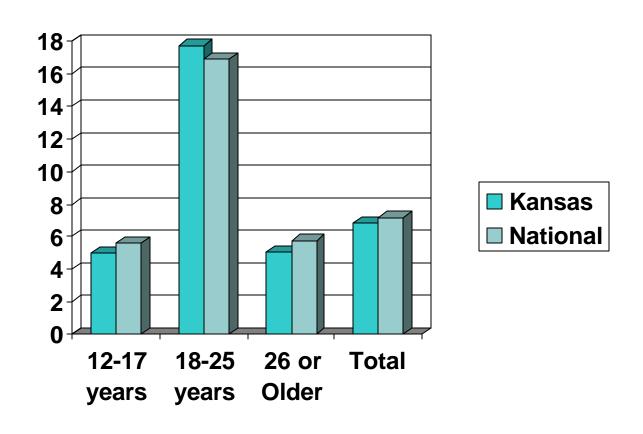
- 10.6% of all publicly-funded treatment admissions in Kansas in FY2004 reported methamphetamine as the primary problem
 - Methamphetamine admissions peaked at age 25, with the majority of admissions within the 20-30 year old age group
 - 56% of methamphetamine admissions were males
- 66 pregnant women were admitted to treatment in FY2004 with methamphetamine documented as the primary problem
 - This represents 20% of all pregnant women entering treatment (66/330)

Illicit Drugs

Cocaine

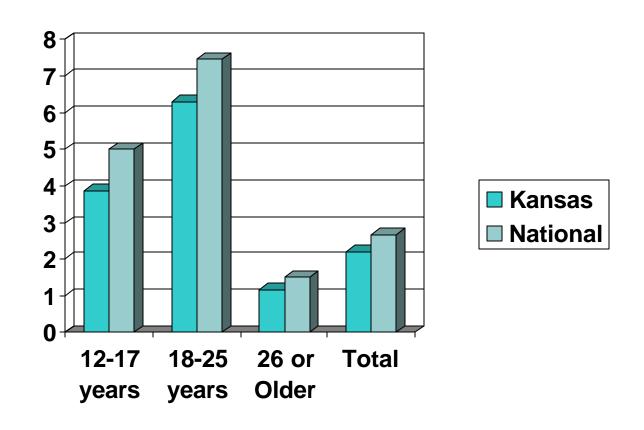
- 16.99% of all treatment admissions reported cocaine as the primary problem
- 2,533 persons entered publicly-funded treatment in Kansas reporting cocaine as the primary problem in Fy2004
 - The majority of cocaine admissions were 35 years of age or older
 - 58% of cocaine admissions were male
- 95 pregnant women were admitted to treatment in FY2004 with cocaine documented as the primary problem
 - This represents 29% of all pregnant women entering treatment

Needing But Not Receiving Treatment for Alcohol Use In Past Year



Source: SAMHSA Office of Applied Studies, National Survey on Drug Use and Health, 2002 and 2003

Needing But Not Receiving Treatment for Illicit Drug Use In Past Year



Source: SAMHSA Office of Applied Studies, National Survey on Drug Use and Health, 2002 and 2003

Need for Treatment Services in Kansas

- 14,911 Kansans accessed publicly-funded substance abuse treatment services in FY2004
- It is estimated that 75% of persons who need substance abuse treatment do not access these services
- Young adults aged 18-25 years of age represent the largest age group of persons who do not access the substance abuse treatment they need

How Are We Addressing This Issue in Kansas Now?

- Promote utilization of:
 - National Institute on Drug Abuse "Principles of Effective Treatment: a Research-Based Guide"
 - Support for community-based coalitions to implement effective prevention processes and evidence-based programs, policies, and practices

How Are We Addressing This Issue in Kansas Now?

- Workforce Development efforts implemented:
 - 'Communities That Care' Cadre of Trainers and Process Facilitators trained to build capacity to facilitate outcomes-based community plans
 - Interagency prevention workforce development plan developed by multiple state agency partners
 - Clinical Supervision training
 - Leadership Institute
 - Persons Centered Strength-Based Case Mgmt.
 Training

What Are Kansas' Assets for Improving This Health Issue?

- A committed Prevention and Treatment Workforce
- Promotion and training in the implementation of evidence-based practices
- Outcomes-based planning based on a rich data set to guide decisions for both prevention and treatment services
- Strong Partnerships/Coalitions across the state

What Are Barriers or Liabilities That Are Limiting Progress in Kansas?

- Stigma continues to prevail
- Level funding for the past several years resulting in reimbursement rates not competitive with other funding streams
- Recruitment and engagement of a younger workforce that will take the place of the aging workforce
- Limited bed capacity for residential services

Recommendations

- Align performance measures across state agencies that fund substance abuse-related efforts.
- Ensure funding and implementation of evidence-based programs, policies, and practices
- Statewide alcohol task groups to address the continuum of prevention and treatment services
- Increased focus on screening and assessment in collateral systems
- Adoption of Recovery Management Services
- Increase resources to support family services and other ancillary services i.e. transportation, medication, housing, employment skill training

SRS/Health Care Policy Addiction and Prevention Services

Contact information:

Donna Doolin, Director dxmd@srskansas.org

Kelly Peak, Prevention Team Leader kdp@srskansas.org

785-296-6807