

TESTIMONY TO THE
Blueprint for the States Policy Panel
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Presented by:

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**“The Advantages of a Cabinet-Level Single State Authority
for Alcohol and other Drug Services”**

I would like to congratulate Join Together and all of those involved in creating this Blueprint for the States Policy Panel. With alcohol and other drug abuse recognized as the nation’s number one health policy concern, it is certainly time to convene such a Panel and develop useful recommendations to guide the nation’s future direction around these issues.

As a lifelong prevention volunteer in Ohio, I have seen what works and what doesn’t work at the county, community and state levels. Certainly, grassroots efforts can have a tremendous impact on changing attitudes and behaviors in a community, but to impact a culture and effect change on a statewide level takes a leadership commitment from the very top of the authority structure. In other words, the Governor, State Legislature and other elected and appointed officials must publicly recognize the devastating costs to lives, families and a state’s infrastructure from alcohol and other drug abuse and addiction.

Ohio has determined what a few of these costs amount to. Untreated addiction and alcoholism affect approximately 80 percent of Ohio’s prison inmates. Each person who spends one year in a

prison is costing taxpayers about \$21,000.¹ In 2005, 24,985 men and women were sent to Ohio's prison system.² If half of them spent at least one year in prison, the cost to Ohio taxpayers was \$262 million last year alone.

The child welfare system also feels an incredible impact from substance abuse and addiction. Ohio Department of Job and Family Services' statistics state that 19,518 children were placed in out-of-home care in state fiscal year 2004³ because of neglect or mistreatment. Studies have indicated that alcohol and drug abuse are a factor in about 70 percent of these cases, but again, let's just assume that half of them may have occurred because of factors related to substance abuse or addiction. Roughly 10,000 child welfare cases cost the taxpayers \$161 million in 2004.⁴

Those are just two examples of how substance abuse and addiction drain state resources and destroy lives. The list is truly endless. How can we stop this disease of addiction from causing our states to "bleed out" financially and from rupturing families? We have the answers, but we need to work together to make sure they are implemented in every state across the nation.

Quality, accessible prevention, intervention, treatment and recovery alcohol and other drug services result in cost savings to states, counties and local communities. For this to happen, top-down authority must be involved. Collaboration and effective cross-disciplinary partnerships must be in place and active. Financial and human capital resources must be identified, supported and utilized so that every opportunity is maximized.

Since Ohio now has one of only three existing cabinet-level alcohol/drug services departments, we can look at our successes from this perspective. Although cabinet-level status may not be a magic bullet, it is an ideal framework from which to build an active, inter-agency system that effectively crosses silos to get to the most efficient and successful alcohol/drug services for a child, adult and family. Because this happens at the state level, inter-disciplinary care teams are common at the local level, and Ohio's prevention efforts reach across all boundaries so that youth are encouraged to seek out healthy, drug-free community activities whether they are Boy Scouts, 4-H members, church group members, in Teen Institute, PRIDE or any other youth-serving organization.

Over the past three years, young people from every imaginable youth-serving organization in Ohio have participated in the Smart and Sober initiative. This Smart and Sober movement began in the upper echelons of state government and moved forward with the strong support of a workgroup comprised of state department members, along with representatives from city and county government, law enforcement, school systems, social service organizations, youth clubs, religious-affiliated groups and others who care about the health and well-being of our young people.

The effort has engaged thousands of children and their parents and teachers in a dialogue about the dangers of underage use of alcohol and other drugs. Again, this could have happened without the highest level of state leadership, but it would have been unlikely. And this has not been a situation in which thousands of state dollars were needed to accomplish our mission. Because of a vast and committed participation from across many service systems, the accomplishments of Smart and Sober can be measured in classrooms and families throughout our

State. We have utilized every resource brought forth to make a difference in youth and adult actions and attitudes about underage alcohol use. Beginning on March 28th, Ohio will lead the nation with 45 Town Hall Meetings focusing on prevention of underage alcohol use. These meetings will take place because of the fabric of state and community caring around this issue. Without a doubt, it has helped that leadership of this effort came from the Governor's Office.

Every state should have the benefits of executive leadership in the fight against alcohol and other drug abuse and addiction, but when a single state authority is buried several tiers down in the governmental structure, it becomes much harder to create the linkages that tear down silos and move to successful outcomes. Another recent example of the power of a cabinet-level single state authority can be found in Ohio's movement to add gambling treatment to the authority of the Ohio Department of Alcohol and Drug Addiction Services (ODADAS).

Because ODADAS had partnered for several years with the Ohio Lottery Commission to treat those suffering from the co-occurring diseases of substance abuse and gambling addiction, ODADAS wanted the ability to treat those suffering from gambling addiction before a second diagnosis was necessary. This required an amendment to state statute. In conjunction with the Governor's Office, ODADAS was able to work closely with the State Legislature to craft language that would be acceptable to all and that would enable Ohio's treatment system to help gambling addicts, even if they did not present with a substance abuse diagnosis. In just two years, this change has made it possible for Ohioans to receive the help they were previously denied through the public behavioral health system of care- another example of top-down accomplishment.

I could continue listing our success stories, but I know you will be hearing and reading more of Ohio's accomplishments from ODADAS Director Carolyn Givens and former director Luceille Fleming. We all believe strongly in the efficacy of this system of authority for alcohol and other drug prevention, treatment and recovery support services. Please contact me or my office if you have questions or if I can assist further as you move toward policy recommendations. Thank you for this opportunity to present testimony.

¹ *DRC 2004 Annual Report,*

<http://www.drc.state.oh.us/web/reports/Annual/Annual%20Report%202004.pdf> – page 33

² *Fiscal Year 2005 Total Commitments,* <http://www.drc.state.oh.us/web/reports/reports12.asp>

³ ODJFS Annual Report 2004, <http://www.odjfs.state.oh.us/forms/file.asp?id=43646> – page 19

⁴ ODJFS Annual Report 2004, <http://www.odjfs.state.oh.us/forms/file.asp?id=43646> – page 19