

**“Access to Recovery:
Improving Participation and Access in Drug Treatment”**

Opening Statement of Chairman Mark Souder

Subcommittee on Criminal Justice, Drug Policy and Human Resources

September 22, 2004

Good afternoon and thank you all for being here.

Today we continue the Subcommittee’s examination of drug addiction treatment or, as President Bush refers to it in the National Drug Control Strategy, “Healing America’s Drug Users.”

It is estimated that at least 7 million people in the U.S. need substance abuse treatment.

Providing treatment is important because it improves the lives of individuals and reduces social problems associated with substance abuse. Effective treatment, for example, reduces illegal drug use, criminal activity and other risky behaviors while improving physical and mental health.

When tailored to the needs of the individual, addiction treatment is as effective as treatments for other illnesses, such as diabetes, hypertension, and asthma.

Last year, President Bush took what I believe to be a very significant step towards assisting the difficult problem of extending help to those suffering from substance abuse when he unveiled the “Access To Recovery” initiative.

Beginning this year, the President’s initiative will provide \$100 million to the Substance Abuse and Mental Health Services Administration (SAMHSA) to supplement existing treatment programs. This is intended to pay for substance abuse treatment for Americans who are seeking help but can’t get it, many of whom can’t afford the cost of treatment and don’t have insurance that covers it.

If fully funded at \$200 million per year – as requested by the President – this program could help up to 100,000 more suffering from addiction receive treatment.

The program also has enormous potential to open up federal assistance to a much broader range of treatment providers than are currently available today.

The initiative will support and encourage a variety of treatment options and provide those seeking assistance a choice in treatment approaches and programs. Providing choices for those in need of assistance allows the individual to select the program that best addresses their personal needs.

It has often been said that in order to help substance abusers, you need to meet them where they are. This approach goes a step further by allowing those seeking help to determine themselves where they want this meeting to occur and with whom.

This new approach to treatment will establish a State-managed program for substance abuse clinical treatment and recovery support services built on the following three principles:

- **Consumer Choice.** The process of recovery is a personal one. Achieving recovery can take many pathways: physical, mental, emotional, or spiritual. Given a selection of options, people in need of addiction treatment and recovery support will be able to choose the programs and providers that will help them most. Increased choice protects individuals and encourages quality.
- **Outcome Oriented.** Success will be measured by outcomes such, principally abstinence from drugs and alcohol, and including attainment of employment or enrollment in school, no involvement with the criminal justice system, stable housing, social support, access to care, and retention in services.
- **Increased Capacity.** The initial phase of Access to Recovery will support treatment for approximately 50,000 people per year and expand the array of services available including medical detoxification, inpatient and outpatient treatment modalities, residential services, peer support, relapse prevention, case management, and other recovery support services.

These funds will be awarded through a competitive grant process. States will have considerable flexibility in designing their approach and may target efforts to areas of greatest need, to areas with a high degree of readiness, or to specific populations including adolescents.

The key to implementing the grant program is the States' ability to ensure genuine, free, and independent client choice of eligible providers. States are encouraged to support any mixture of clinical treatment and recovery support services that can be expected to achieve the program's goal of cost-effective, successful outcomes for the largest number of people.

Today we will learn more about the status and goals of the Access to Recovery initiative with the person most responsible for implementing it, my fellow Hoosier, SAMHSA Administrator Charlie Currie.

We will also hear from several experts who are on the front lines of substance abuse treatment.

Melody Heaps is the President of Treatment Alternatives for Safe Communities in Chicago, Illinois, which is a recipient of Access to Recovery funding.

Dr. Michael Passi is the Associate Director of the Department of Family and Community Services in Albuquerque, New Mexico, which was a pioneer in providing choices for those seeking substance abuse treatment.

Thank you again for being here today. I look forward to hearing more about Access to Recovery from our experts who are with us today.