President Barack Obama recently announced new actions his administration will take to address the prescription opioid and heroin epidemic in the nation. In visits across the nation, the president heard from people dealing head on with how difficult it is to get treatment for addiction.

“It comes down to the fact that lawmakers have traditionally blamed those with substance use disorders for their disorders. . . (Lawmakers) want to fix it but do not want to pay for the treatment. That is the bottom line,” said Debbie Plotnick, vice president of mental health and systems advocacy at Mental Health America.

But policy efforts to address the epidemic aren’t limited to the federal level. States are looking to expand treatment access and attract more mental health professionals into treatment facilities.

“We have a real shortage in residential treatment centers, including smaller centers that would be around the state,” said North Dakota state Sen. Judy Lee. “As our financial situation in the state moves forward and we look at what we can do, that is one of the very important areas we are going to be looking at.”

“In New Hampshire, we are ravaged by the heroin epidemic,” said New Hampshire state Rep. Mary Heath. “The number of deaths is startling. Every time we pick up the paper there has been another death. Firemen are out every day giving Narcan. It is just a horrible situation so we need a lot more treatment centers.”

Heath said that more individuals will be eligible for substance abuse services and mental health counseling as a result of Medicaid expansion in her state, and she anticipates the state to be able to open more facilities and increase the number of beds at existing facilities.

“So many people who are addicted to drugs and alcohol simply didn’t have access to insurance,” Heath said. “Now they will be able to come under Medicaid expansion. Many people have more access than ever before and there is more emphasis on the ability to access mental, drug and alcohol counseling than ever before.”

In North Dakota, Lee said there is a serious shortage of licensed addiction counselors.

“It is a challenge to get counselors to practice in our rural areas and statewide. The access and availability issue is critical,” Lee said. “We have an extraordinary problem all over the state with heroin right now. We are struggling. Like a lot of the states, it is really hard to get your arms around it.”
Among the challenges for North Dakota, Lee cited the need to make the process easier for individuals training to become licensed addiction counselors in the state, including receiving the required 1,400 internship hours.

North Dakota also is engaged with educational institutions to help streamline the career ladder between healthcare professions and addiction counseling to ease the process of transitioning from one field to another.

“If someone decides through their work that they see a calling in licensed addiction counseling, we want to see if there are ways the curriculum can be slightly adapted so it would be easier to move higher on the ladder toward an addiction counseling license,” said Lee. Licensing reciprocity across state lines is another issue related to increasing access to substance treatment, she said.

“There are such differences from one state to another and there are concerns in our state about significantly lower requirements in other states,” said Lee. “Health professionals want to assure that the folks coming in here really know what they’re doing and so do we, as legislators. Blanket reciprocity, when the criteria from other states are consistent with our state and others, would be great nationally.”

According to Lee, there is no single solution that will help end the opioid epidemic in her state or any state.

“We know that there are many answers and we have to find out how much of each of them we can do to move it forward,” Lee said. “There are a lot of moving parts and everybody wants to do right thing. The counselors do, the schools do, the legislators do— and we’re trying to figure out what it is we can do that will not harm the process. We want to enhance it and not mess it up. We have a lot of people working hard on this thing and we are looking forward to some solutions being brought forward.”

New Hampshire, too, is taking, “little steps to address a big problem,” said Heath. “We are making headway but we have a long, long way to go.”

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