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Gaps Seen in Md. Drug Treatment

Pr. George's Is Most in Need

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A recent report commissioned by the [Maryland General Assembly](#) has concluded that state services for drug addicts and alcoholics falls far short of the need, a problem it says is most profound in [Prince George's County](#).

The report comes as new figures show that several counties, including Prince George's, regularly return hundreds of thousands of dollars in unspent substance abuse treatment funds to the state.

According to the report, which was compiled by [University of Maryland](#) researchers working in conjunction with a [Harvard Medical School](#) professor, the state would have to admit 14,423 more people into public or private drug treatment programs each year to meet the need. In Prince George's alone, 4,606 more people each year need treatment than receive it. A gap exists in other area counties too -- Montgomery needs 2,950 more treatment admissions annually, and [Anne Arundel](#) needs 755.

Researchers examined indicators of drug use, including drug arrests, mortality rates and hospital discharges, to produce an estimate of need in each county. They then compared those rates with the number of treatment admissions each year.

The gap in Prince George's occurred not because researchers found more drug use there -- the county ranked third from the bottom in the researcher's analysis of total need. Instead, they found that Prince George's admits the fewest people for substance abuse treatment per 100,000 residents of any Maryland county, treating far fewer people than they estimated need help.

Their analysis showed that 1,078 substance abuse admissions were needed each year per 100,000 residents in the county; instead, Prince George's had 524.

"We don't have enough trained drug counselors," said Del. Justin D. Ross (D-Prince George's), one sponsor of legislation that produced the report. "We don't have enough treatment beds. When people finally hit their knees and want to go get help, you can't tell them there's a waiting list."

[Donald Shell](#), health officer for Prince George's, said the county has 29 inpatient beds that treat 280 substance abusers each year.

It pays for 14 more beds for 150 county patients in surrounding counties, but he acknowledged that the number is below need.

"It's ridiculously low," Shell said. "We've got work to do."

He noted that Prince George's has far fewer doctors than other counties, which means fewer referrals to treatment facilities, shrinking the market for such services. The county has plans to build a facility with 40 beds, but the project is not funded.

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"We've just got to find the dollars for it, and it would help alleviate the problem," he said.

In Montgomery, adult addiction services manager Richard Kunkel said the county offers a robust continuum of care but receives far less in state funding than other large Maryland counties.

He said bottlenecks and waiting lists occur for service.

The county receives less funding, he said, because of its perceived wealth.

"Even though the need may be low in comparison, the reality is we get very little in state funding," he said, noting that the smaller city of Baltimore receives 10 times more funding.

Researchers found that Baltimore had the highest substance abuse need, but also admitted more than 3,600 patients for treatment per 100,000 residents. That left it with a far smaller treatment gap than Prince George's or Montgomery.

Members of the [Prince George's County Council](#) voiced concern about the lack of inpatient beds at a meeting this week. They also questioned Shell about the amount of funding returned to the state each year.

Prince George's is one of several Maryland counties that has returned hundreds of thousands in state substance abuse treatment funds each of the last four years. In fiscal 2007, Prince George's returned more than \$700,000 -- more than 6 percent of its overall funding -- to the state. [Baltimore County](#) returned almost 10 percent of its money.

"I don't understand how we consistently give money back when there is such great need," council member Camille Exum (D-Seat Pleasant) told Shell at the hearing.

Shell said funds sometimes arrive at the end of the fiscal year, making it more difficult to spend dollars before the department is required to send money back. In 2007, a hiring freeze made bringing new staff on board to spend funds difficult.

But he acknowledged that the county must speed the process for approving the transfer of state funds to the health department and that the department must become more efficient in spending the treatment dollars.

"The loud message to the health department is that if we want the help of the county and the state, we have to get our house in order," Shell said.

The county might get some help -- and more oversight -- from the state.

Kathleen Rebbert-Franklin, acting director of the Maryland Alcohol and Drug Abuse Administration, said state figures are looking at the problem and trying to come up with ways to ensure that counties spend more state funding on treating addiction. She plans to report suggestions to lawmakers in December.

Del. Peter A. Hammen (D-Baltimore), chairman of the Health and Government Operations Committee, said he hopes to introduce state legislation this year that could address the issue and also work to start closing the treatment gap statewide.

"We know in those jurisdictions that the need is high," he said. "If there's money that's not being spent on services, it's a huge problem."

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