



Robert Wood Johnson Foundation



Addiction Prevention and Treatment

Substance-use disorders and addictions afflict more than 20 million Americans, often with devastating effects on their health and on the well-being of their families.

We know from definitive studies that only a small fraction of those who might benefit from addiction care get the treatment they need. Access to treatment is limited and few treatment programs are based on practices known to produce the best results.

In 2006 the Foundation continued to support efforts to improve community systems of care by helping youth deal with substance-use issues through national programs such as *Reclaiming Futures: Communities Helping Teens Overcome Drugs, Alcohol & Crime*[®]. RWJF also continues to improve the effectiveness and efficiency of treatment through *Paths to Recovery: Changing the Process of Care for Substance Abuse Programs*[™], designed to get more people into treatment and keep them there.

Over the past decade there has been significant progress in developing and testing effective evidence-based interventions for addiction. But these practices are not yet readily available in most communities nor routinely used among the 13,000 publicly funded treatment programs. Studies show that people suffering from alcohol dependence, for example, receive recommended care about 10 percent of the time in primary care settings; as few as 17 percent of addiction treatment programs use recommended pharmaceutical interventions for the treatment of alcohol or opioid dependence. Less than 50 percent of addiction treatment programs use proven psychosocial interventions such as cognitive behavioral therapy, contingency management and motivational enhancement therapy.

In 2006 we made a major commitment to stimulating the spread of evidence-based practices with the launch of *Advancing Recovery: State/Provider Partnerships for Quality Addiction Care*, an \$11-million program designed to encourage treatment providers to use evidence-based practices through innovative partnerships with single state agencies.

To promote effective implementation of evidence-based practices, *Advancing Recovery* will support partnerships between provider organizations that deliver care and state agencies that purchase and regulate treatment services.



These partnerships focus specifically on increasing the rate of use of treatment practices in five categories identified by the National Quality Forum:

- Use of medications for specific diagnoses;
- Screening and brief interventions in primary care settings;
- Use of specific psychosocial clinical interventions;
- Use of post-treatment care;
- Provision of case management, wraparound and supportive services.

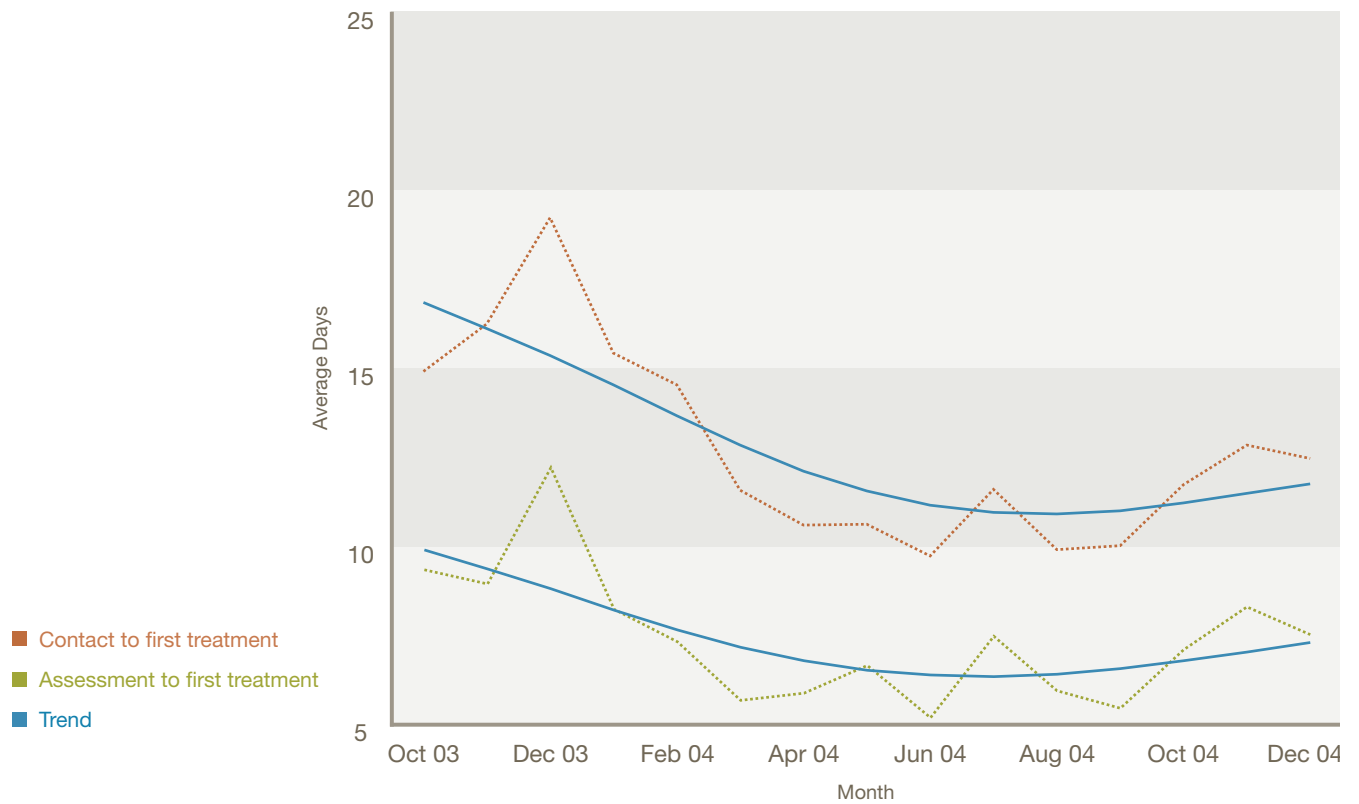
Advancing Recovery takes an innovative approach by bringing state agencies and treatment programs together to develop and improve *administrative* practices that encourage and sustain greater use of evidence-based *clinical* practices at the program level. The first round of funding for the initiative began in November 2006. Six state-provider partnerships in Missouri, Maine, Delaware, Florida, Kentucky and Rhode Island were selected to participate in a learning network. In addition to partnership grants, the initiative provides educational and communications support to help grantees overcome barriers to using proven methods.

In the coming year we will continue to support our current treatment programs for alcohol and drug addiction, and will make supplemental investments to measure the quality of care, overcome barriers to achieving quality care in local treatment settings, and help states develop reimbursement, licensing and accreditation policies that encourage greater use of evidence-based treatment practices.

For additional information about our initiatives and objectives, visit www.rwjf.org/addiction.



Mean Days Between Contact and First Treatment Session and Between Assessment and First Treatment Session by Month of Admission



SOURCE: The Network for the Improvement of Addiction Treatment: Enhancing Access and Retention. *Drug and Alcohol Dependence*, 2006.