

Drug treatment chief vows service growth

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The state's chief of drug abuse treatment vowed yesterday to expand services despite a fiscal crunch on every level of government.

Gov. Mario M. Cuomo's proposed cuts to the state Division of Substance Abuse Services (DSAS) will delay the addition of residential treatment beds, but no existing beds or major services will be cut, agency director Arthur Y. Webb said.

Acknowledging Staten Island's record for community opposition to treatment programs, he called upon local providers to educate

the community and state lawmakers to limit the public's veto power in site selections.

Webb encouraged his host, College of Staten Island (CSI) President Dr. Edmond Volpe, to work with DSAS in developing curricula to train professionals to work in substance abuse and alcoholism treatment fields.

The director, who served seven years as commissioner of the state Office of Mental Retardation/Developmental Disabilities until his present appointment by the governor nearly a year ago, led a CSI symposium on "Drugs

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Arthur Y. Webb

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Drugs

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and Society" in College Hall, St. George.

CSI professor Mary Ruth Culbert spoke about adult children of alcoholics, and Dr. Phyllis Chesler, also a faculty member, outlined gaps in treatment services for women and minorities.

Webb, who detailed his agency's strategy before Dr. Chesler spoke, said pregnant addicts will be priority recipients of treatment. He plans to implement programs with strict monitoring for drug abusers released from prisons.

Prevention services aimed at first-time drug and alcohol users, primarily 9- and 10-year-old boys, also rank high in Webb's plans. First-time drug use is down 35 percent from a year ago, he said.

Also encouraging is the leveling off of crack use, he said, "but we still have an epidemic." There are 50,000 substance abusers seeking recovery in the DSAS system, but "we need to get the system up to 200,000."

Heroin remains a threat, and Southeast Asian producers are responding to "market demand" for a purer form of the drug that can be inhaled. Injecting heroin has become unpopular because the sharing of dirty needles can

spread the HIV virus that causes AIDS.

Methadone, a synthetic narcotic that alleviates the craving for opiates such as heroin, is a "cheap" and "simple" solution for heroin addiction, "but we're looking for the best solution," Webb said. Critics say methadone is not a real treatment but a substitute drug that is at least as addictive as heroin.

Webb reiterated the often-heard call for a three-pronged approach to beating drug abuse: Law enforcement, treatment and prevention. He rejects the terminology of a "war on drugs" because the metaphor implies to him that drug users are losers in the treatment war.

Treatment works, he said, but the average addict will not succeed the first time through. A drug abuser often has "four to six treatment episodes over a lifetime ... sometimes as many as 10," Webb said.

"The No. 1 social issue, besides educating our children and, I hope, keeping us out of a war, has to be dealing with drug abuse," Webb said. "It absolutely permeates every aspect of our society."

Fifty-five thousand young people are in prisons; 100,000 are in jails, he said. Many crimes are drug-related, but the offenders

are not receiving meaningful treatment.

Of the state's 63,000 children in foster care, 60 percent of the placements are due to drug and alcohol problems in families.

Alcohol is "very strongly abused," Webb said, and many drug abusers also are addicted to alcohol.

DSAS, which licenses drug abuse treatment programs and provides funding for treatment and prevention, will merge in a few years with the state Division of Alcoholism and Alcohol Abuse, he said. The union should streamline the work of many treatment providers who have to deal with dual licenses and reporting and accounting procedures.

Despite the state's budget deficit, the governor's commitment to increase treatment and prevention programs remains firm, Webb said.

Legislative leaders continue to negotiate Cuomo's proposed cuts to close a \$1 billion deficit. The governor wants to chop DSAS' current budget by \$23.5 million, nearly all of it in local assistance. But his projected cuts for the next fiscal year, beginning April 1, 1991, would amount to only \$1.5 million, and those funds could be

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made up with available federal monies.

Budget constraints will reduce new treatment beds from 2,000 to 1,500 this year, and new treatment slots, including outpatient programs, from 5,000 to 3,000, Webb said.

During a question-and-answer session following the symposium, Luke Nasta, executive director of Camelot Counseling Centers, asked about legislative solutions to the problem of community re-

sistance to treatment sites.

Treatment providers must be sensitive to communities oversaturated with social services, as some Staten Island areas are, Webb said. However, he favors legislation that would allow "proper procedures for community involvement" in site selections, while limiting citizens' veto power.

In an interview after the symposium, Webb said his office has been hit with numerous suits from

communities opposing treatment centers.

Everyone knows that drug abuse is a threat to society, "but we haven't translated that (knowledge) into a sense of responsibility to serve and into community acceptance," Webb told the CSI audience.

"We need an advocacy arm of recovering addicts and alcoholics to speak out. We need families of people in treatment to speak up," he said.