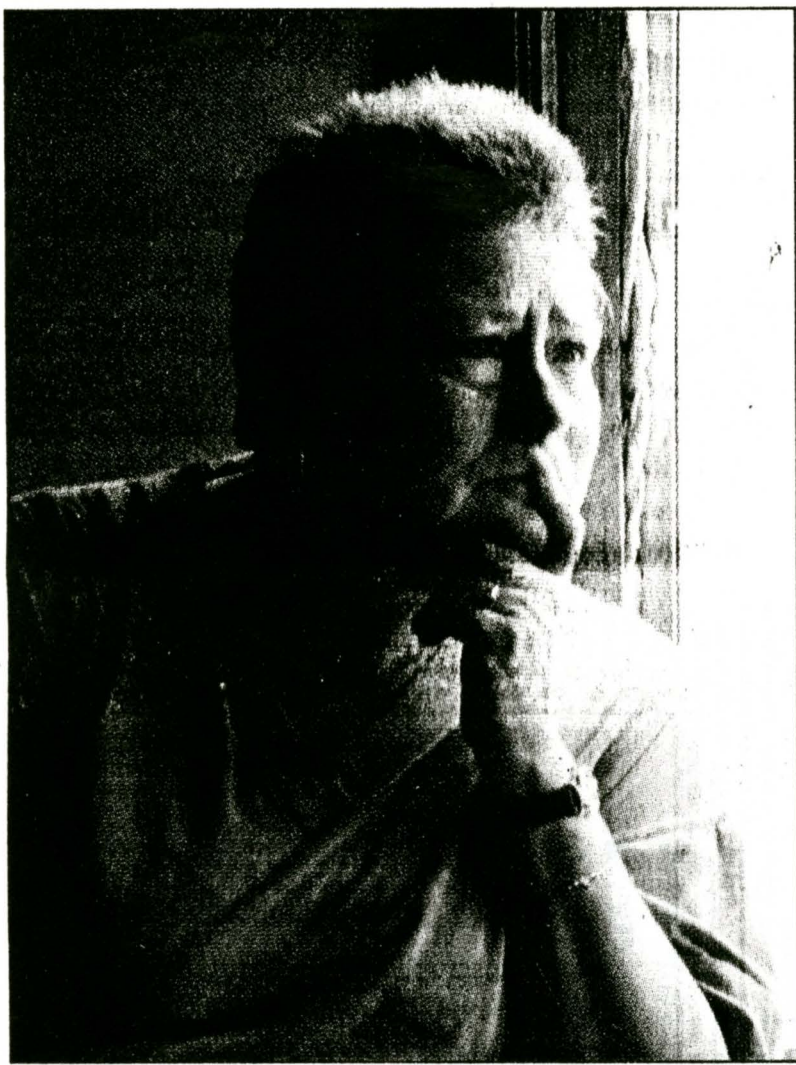


Giving help when needed



HOPEFUL: Diana May Bogard, the director of a women's detox center in the Haight-Ashbury, says the city's substance abuse treatment programs have not worked, and she is optimistic about a new system that would allow easier and more effective access to treatment.

PHOTO: PIA TORELLI

Addicts to get treatment faster under new city plan

PUBLIC HEALTH

BY LAURA PETERSON

Mary Julia Valenzuela chose the right time to get clean. When she arrived at Smith House, a women's detox center in the Haight Ashbury, several women had just left the 10-bed facility, allowing her to check in right away.

Though the publicly funded, privately run Smith House is intended as a short-term, high-turnover treatment center, director Diana May Bogard often keeps women past the 14-day limit because of long waiting lists at the city-run treatment centers. Sending

women who have just detoxed back to the streets, where drug availability tempts past habits to erupt anew, could break the resolve that kicked those habits in the first place.

Long waits for free substance-abuse treatment are nothing new; the waiting period for available treatment in San Francisco is usually several months. But cities are buckling under the weight of untreated drug abuse as costs mount in the form of health-care, criminal-justice, and social-service price tags.

This month, however, the city's Public

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NOE/HAIGHT/CENTRAL EDITION

TUESDAY, AUGUST 5, 1997

SMITH HOUSE

HAIGHT ASHBURY VF

THE INDEPENDENT

TREATMENT: New system planned

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Health Department launches an ambitious program attempting what no other city has been able to accomplish: providing free substance-abuse treatment on demand, based on a holistic model with services ranging from family counseling to acupuncture.

"The beauty of San Francisco's approach is that it's not just an expansion of services — it's really health-care reform," said Dr. Larry Meredith, director of the department's Community Substance Abuse Services. "More and more people are understanding that substance abuse is not a stand-alone malady — it requires a broad spectrum of services. This is really confronting the beast in all its complexity."

Costs of untreated abuse

A recent report by the state Department of Health Services indicates that San Francisco has the highest rate of drug-related deaths and emergency-room visits in California. The health department estimates that 10,000 San Franciscans sit on waiting lists for treatment every year, while an additional 12,000 who need treatment do not seek it because of unavailability. Untreated substance abuse cost the city approximately \$1.7 billion in lost economic productivity and health-care, criminal-justice, and social-service costs last year, while \$47 million was spent on substance-abuse treatment, according to de-

partment figures.

Though health advocates have searched for a treatment-on-demand program for several years, revelations about the staggering costs of untreated drug abuse finally prompted the Board of Supervisors to pass a resolution supporting the program last fall and approve \$4 million in funding last month. A planning council developed the program, using input from community planning forums held last December that identified women-centered treatment facilities in the Mission, Bayview, and Tenderloin districts as top priority.

'More and more people are understanding that substance abuse is not a stand-alone malady — it requires a broad spectrum of services.'

— Dr. Larry Meredith, director, Community Substance Abuse Services

"Holistic approach"

The first phase of the program, already under way, expands services currently in place, including methadone clinics, juvenile counseling, and outpatient services for seniors and Native Americans. A second phase will initiate new services with providers already contracting with the city, such as counseling for women and families at Glide Memorial Church in the Tenderloin, child therapy, and acupuncture. A third phase, beginning in December, will solicit bids from new providers for new projects, such as day-

treatment programs at housing developments, new residential facilities, and a "cultural competency" training program to increase racial, gender, and sexual-orientation sensitivity among treatment workers.

"It's a holistic approach. That's why the program looks so piecemeal — because it is," said Carlos Morales, a UCSF clinical supervisor who provides mental-health services to the city and has served on the planning council. "The problems are so complex that in order to address what the needs are you have to provide options.

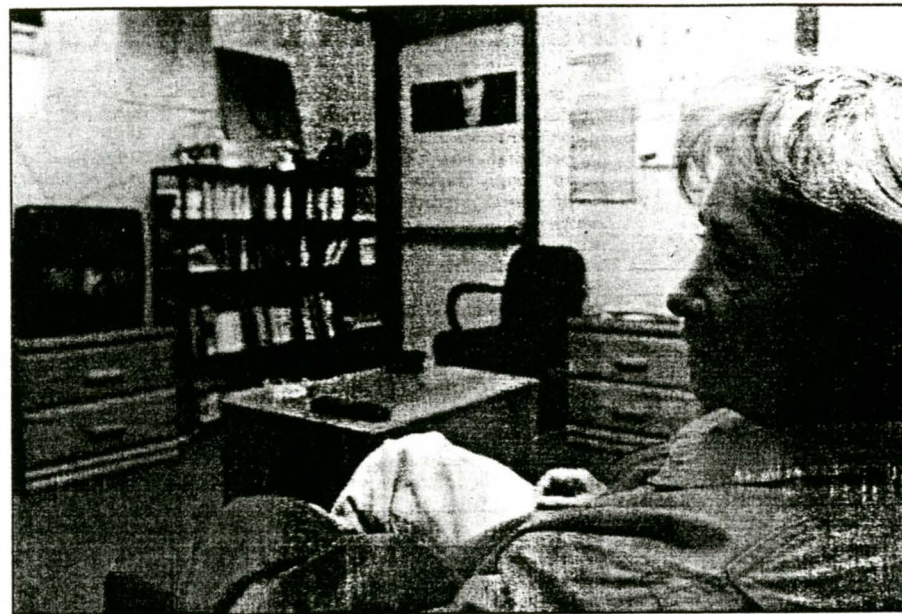
You're not going to address stimulant use in the gay community with a heroin-use continuum," he said.

Women's needs

More than 20 percent of the program's budget is earmarked toward services for women and families, including residential facilities where an entire family can

stay and receive counseling along with a parent in recovery. Morales says treating the whole family keeps separation from exacerbating the fragmentation wrought by drug abuse.

"It's an old dilemma a lot of women face when deciding whether to give up their children to go into treatment — either you're a good parent and a bad patient, or a good patient and a bad parent," Morales said. "This allows the children to change with their parents and take on more healthy roles."



PHOTOS: PIA TORELLI

FIRST STEP: Mary Julia Valenzuela was able to check into Smith House, a Haight-Ashbury detox center, without delay, but that is a rare occurrence in San Francisco, where the current system of substance abuse treatment is overburdened. (Right) A resident of the house rests in one of the rooms.



Bogard, head of the San Francisco Alcohol and Drug Contractors' Association, says city substance-abuse treatment providers are looking toward the program with relief and hope that their efforts will now see more success stories.

"The system before was not working," she said. "People can point to the costs, but you can't put a dollar sign on lives."