



*"Never doubt that a small group of thoughtful committed citizens can change the world. Indeed it is the only thing that ever has."*

MARGARET MEAD

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## Seminar Follow Up By Valerie Dalton

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If you missed last month's community education seminar about addictions, you missed hearing Kristina Bryant (Assistant Director) and Dr. Mary Beth Moehl (Senior Clinician) speak about an innovative program in Chesterfield County that's designed to serve non-violent substance-addicted offenders who have also been diagnosed with a mental illness. Here's some of what they had to say.

"The US Department of Justice reports that approximately 16% of our current prison or jail population has a mental illness. Seventy-five percent of these inmates diagnosed with a mental illness also have a co-occurring substance abuse problem. Nearly half of the inmates in state or federal prison with a mental illness were incarcerated for committing a nonviolent crime; yet on average, these inmates serve a longer portion of their sentence than inmates without a mental illness.

From 1974 to 2004, we've seen our state mental hospital census decline by 86%. As individuals with mental illnesses have been moved out of our state mental hospitals, we've seen an increase in the number of persons incarcerated with brain disorders. But our jails are not equipped or designed to treat the mentally ill substance abuser, so many individuals who need help may not be getting the help they so desperately need.

Chesterfield County has developed an innovative approach to address this issue. They've developed a Dual Treatment Track (DTT) that provides qualified non-violent offenders who are awaiting trial with intensive supervision, outpatient substance abuse therapy, mental health treatment, individual and family counseling, frequent drug testing, job skills training, psychiatric services, and Moral Reconciliation Therapy, instead of incarcerating them. In addition to providing much needed treatment to those in need, this program also costs much less than incarceration. For example, the national average daily cost for a jail bed for an inmate with co-occurring disorders was \$101. Chesterfield County's cost per day was \$81 in FY06, according to the State Compensation Board. The cost for an average day of the Dual Treatment Track was \$34.

Designed to assist mentally ill offenders with learning to manage their special needs while addressing their obligations to the community, DTT has helped many offenders to improve their quality of life while ensuring community safety. It has helped offenders get the help they need and saved our community money."

To learn more about this innovative and integrated criminal justice and mental health services model, please visit the Chesterfield County Web site at [www.chesterfield.gov](http://www.chesterfield.gov) or call (804) 717-2250.

A question, frequently asked by my clients, is: "Why do some people develop a problem with alcohol and others never do? My answer always begins with the story of Virginia Davis.

Virginia Davis was a medical scientist from Houston, Texas specializing in cancer research. Her research required the use of fresh human brain tissue, something that's almost impossible to come by. Determined to conduct her research, Virginia obtained approval to collect brain tissue from the bodies of homeless alcoholics who died on the streets of Houston. As she studied their brain tissue in the lab, she uncovered something unusual; their brains contained a heroin-like substance. What made this finding unusual was that at the time in Houston, heroin was a very expensive drug. She knew that these individuals could barely afford a bottle of wine, much less an expensive drug like heroin. So, she went back into the lab, and what she discovered forever changed the way we view alcoholism.

She discovered a substance, closely related to heroin, called Tetrahydroisoquinoline (THIQ) and her research showed that an alcoholic's body metabolizes alcohol differently. She found that when a "normal" drinker consumes alcohol, her body converts alcohol into acetaldehyde which is then converted into acetic acid. The acetic acid is eliminated from the body through the kidneys and lungs in the form of carbon dioxide and water. But in an alcoholic's body, something else happens. Not all of the acetaldehyde (which is a very toxic substance) is converted into acetic acid and eliminated from the body. Some acetaldehyde remains behind and goes to the brain where it is converted into the highly addictive, heroin-like substance, THIQ. And, if THIQ is present in your body, and you drink alcohol in any form, your body will want more and more. Once THIQ is formed in the body, it's there to stay; it never goes away. This faulty metabolism of alcohol, not a moral weakness, plays a significant role in why the alcoholic continues to drink even when they may desperately want to stop.

The question of "Why do some people develop a problem with alcohol and others don't? is impacted by one's biochemistry; yet another mystery remains. When does this faulty processing of alcohol begin in the body? When does the body begin to improperly convert acetaldehyde into THIQ? Some people produce THIQ the first time they consume alcohol. Others may not produce it until they are in their 20s, 40s, or even later. Some people never produce THIQ at all, and are able to drink without ever becoming addicted. How do we know who will produce THIQ and who won't? That remains a mystery, although there is a clear genetic link. (Note: Alcohol abuse may not result in the production of THIQ, but can cause other serious problems.)

Virginia Davis's research explains why abstinence from all forms of alcohol is part of the recommended treatment for alcoholism. By not putting alcohol into your system, you prevent the faulty cycle of producing THIQ from occurring. She has shown us that the cycle of addiction can be broken.

*The source for this article was The Disease Concept of Alcoholism by David Ohlms, MD.*

*This column is for informational purposes only. Valerie Dalton, M.Ed. is a Licensed Professional Counselor with a private practice serving adolescents and adults. For more information about her counseling and consulting services, please call (804) 743-7736.*