



**National Association of
State Alcohol and Drug Abuse
Directors, Inc.**

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KEY NASADAD POLICY PRIORITIES

- Strengthen State Substance Abuse Systems and the Office of the Single State Authority (SSA) for Substance Abuse
- Expand Access to Prevention and Treatment Services
- Implement an Outcome and Performance Measurement Data System
- Ensure Clinically Appropriate Care
- Promote Effective Policies Related to Co-occurring Populations

Fact Sheet: Substance Abuse Prevention and Treatment (SAPT) Block Grant

BACKGROUND

The Substance Abuse Prevention and Treatment (SAPT) Block Grant, the cornerstone of the States' substance abuse prevention and treatment systems, accounts for approximately 40 percent of expenditures by State substance abuse agencies across the country. The SAPT Block Grant is administered by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the Department of Health and Human Services (HHS). The SAPT Block Grant serves our nation's most vulnerable, low income populations – those with HIV/AIDS, pregnant and parenting women, youth, and others – by ensuring access to substance abuse services.

The SAPT Block Grant is an effective and efficient program that provides vital prevention and treatment services for the nation's most vulnerable populations. According to SAMHSA, the SAPT Block Grant has been successful in expanding capacity and achieving positive results...The Committee is also aware that SAPT Block Grant funded programs help people find or regain employment, stay away from criminal activity, reunite with families, and find stable housing.

*House Committee on Appropriations
House Report 111-220, June 2009*

SAPT BLOCK GRANT FUNDING

- \$1,775,554,720 in FY 2005
- \$1,757,425,446 in FY 2006
- \$1,758,591,000 in FY 2007
- \$1,758,727,939 in FY 2008
- \$1,778,591,000 in FY 2009
- \$1,798,591,000 in FY 2010
- NASADAD recommends \$2,008,591,000 for FY 2011

Funding for the SAPT Block Grant has been stagnant over the past few years: from FY 2004 to FY 2008, the program was cut by more than \$20 million. It is estimated that the FY 2010 SAPT Block Grant appropriation would have required an increase of \$403.7 million above the FY 2009 appropriation just to maintain services at FY 2004 levels using the CPI-U as the proxy.

SCOPE AND FINANCIAL COST OF ADDICTION

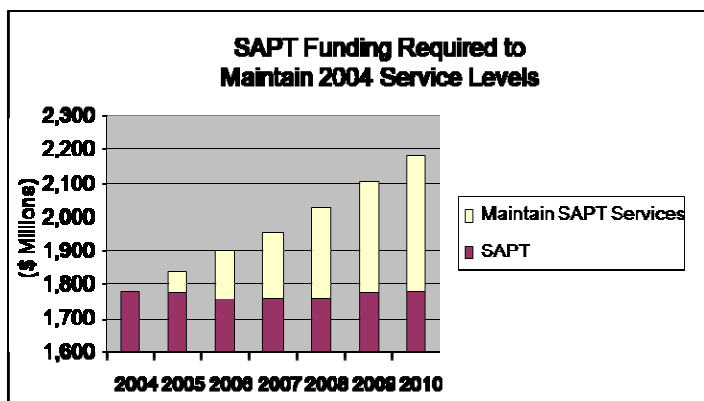
According to the National Survey on Drug Use and Health (NSDUH), 23.1 million people aged 12 or older had an illicit drug or alcohol use problem in 2008. During the same year, approximately 2.3 million received treatment for such a problem at a specialty facility. As a result, 20.8 million people needed but did not receive services in 2008 in a specialty facility. The economic impact of addiction is staggering. Research found that when substance abuse spending was \$15.5 billion in 1998, the total economic costs of alcohol abuse were approximately \$184.6 billion and the total economic costs for drug abuse were \$143.4 billion (Harwood, 2000).

PREVENTION SET-ASIDE

Federal statute requires States to direct at least twenty percent of the SAPT Block Grant toward substance abuse prevention services. The prevention set-aside, managed by CSAP's Division of State Programs, is a core component of each State's prevention system. Overall, SAPT Block Grant funding makes up 64 percent of State/Territory-coordinated primary prevention funding. In 21 States, the prevention set-aside represents 75 percent or more of the State agency's prevention budget.

ABOUT NASADAD

NASADAD represents the Nation's State substance abuse agencies, also known as Single State Authorities (SSAs). NASADAD's mission is to promote effective and efficient State substance abuse service systems. The association's two component organizations are the National Prevention Network (NPN) and National Treatment Network (NTN).



INDEPENDENT EVALUATION FINDS BLOCK GRANT EFFECTIVE

An independent study of the SAPT Block Grant, released in June 2009, found the program to be effective in a number of areas, including (1) positive outcomes as measured by increased abstinence from alcohol and other drugs; increased employment; decreased criminal justice involvement and other indicators; (2) improvement of State infrastructure and capacity; (3) development and maintenance of State agency collaborations; (4) and effective planning, monitoring and oversight.

The SAPT Block Grant is an effective and efficient program that emphasizes accountability through the reporting of outcomes data...States have worked diligently with SAMHSA to implement the National Outcome Measures (NOMs) initiative. The SAMHSA/State partnership on NOMs promotes continuous quality improvement through a more systematic approach to data management and reporting.

Ms. Flo Stein, NASADAD President (N.C.), March 18, 2009, Testimony Presented to House Committee on Appropriations

SUBSTANCE ABUSE SERVICES SPENDING REPRESENTS TINY FRACTION OF ALL HEALTH EXPENDITURES

According to SAMHSA's *National Expenditures for Mental Health Services and Substance Abuse Treatment, 1993-2003* (2007), substance abuse expenditures represented 1.3% of all healthcare expenditures in 2003 (\$21 billion for substance abuse vs. \$1.6 trillion for all health expenditures). Using inflation adjusted terms, the growth rate for all health spending from 1993 to 2003 was 4.6%, while the growth rate for substance abuse services spending during this same time period was 1.4%.

YET ADDICTION IS ASSOCIATED WITH MANY OTHER DISEASES

In a 2004 study appearing in the *Journal of the American Medical Association (JAMA)*, researchers examined the top nine "actual causes of death" defined by the Centers for Disease Control and Prevention (CDC) as factors that contribute to leading killers such as heart disease, cancer and stroke. Tobacco, alcohol and illicit drugs – killing 530,000 Americans in 2000 – were three of the top nine.

FINANCIAL INVESTMENTS IN ADDICTION SERVICES SAVE MONEY

In 2006, the National Institute on Drug Abuse (NIDA) noted that for every dollar spent on addiction treatment programs, there is an estimated \$4 to \$7 reduction in the cost of drug related crimes. With outpatient programs, total savings can exceed costs by a ratio of 12:1.

SAPT BLOCK GRANT PRODUCES RESULTS

The SAPT Block Grant is distributed by formula to all States and jurisdictions. The program provided treatment services for approximately 2.3 million client admissions in FY 2008. During the same year, at discharge from treatment, 73.7% were abstinent from illegal drug use; 78.2% were abstinent from alcohol use; and 92% had no involvement with the criminal justice system.

SAMPLE OF STATE-SPECIFIC OUTCOMES

The following sample of State-specific outcomes data shows that SAPT Block Grant funded services achieve results:

Wisconsin reported 33,314 admissions to treatment in State Fiscal Year 2007 and noted the following outcomes in 2007 for those completing treatment: 73% were abstinent at discharge; 58% were employed full time at discharge; 95% had no criminal justice activity at discharge. For prevention, fewer students experimented with alcohol before age 13 (37% in 2003 vs. 24% in 2005/2006) and past month marijuana use decreased (22% in 2003 vs. 16% in 2005).

Iowa reported 42,700 admissions to treatment and provided prevention services to approximately 304,503 individuals in State Fiscal Year 2006. For State Fiscal Year 2006, the Iowa Consortium for Substance Abuse Research and Evaluation found the following client outcomes comparing admission to six months after discharge: 87% reported no arrests; 51.8% were employed full time; and 60% were abstinent from illicit drugs.

Kansas reported 15,980 admissions in State Fiscal Year 2008 and noted the following outcomes comparing admission to discharge: a 64.4% increase in abstinence from alcohol use; a 64.2% increase in abstinence from drug use; a 16.5% increase in employment; and a 4% decrease in homelessness. The State served 227,180 persons with prevention services and noted the following outcomes: decrease in past 30 day use of alcohol (31.3% in 2006 vs. 27.2% in 2008); cigarettes (12.1 % vs. 10.4%) and marijuana (8.6% vs. 7.8%).

California reported 266,757 admissions in State Fiscal Year 2007 and provided prevention services to 996,698 individuals. California noted the following client outcomes comparing admission to discharge from treatment: 75% were abstinent from drug use; 65% gained or maintained employment; 65% were involved in recovery social groups; and 96% remained arrest free.

New York reported 92,574 unduplicated admissions to treatment in State Fiscal Year 2008 and provided direct prevention services to 103,700 individuals. The following client outcomes were reported comparing admission to discharge from treatment: 35.2% increase in abstinence from alcohol use; 53% increase in abstinence from drug use; 28.6% increase in employment; and 51.4% decrease in criminal justice activity.



NASADAD's mission is to promote effective and efficient State substance abuse service systems.

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