

MINNESOTA

Introduction

The National Association of State Alcohol and Drug Abuse Directors, Inc. (NASADAD) is a not-for-profit organization that works to promote effective and efficient State substance abuse service systems. NASADAD members include the State Substance Abuse Directors from the 50 States and five Territories. These State Directors, also known as Single State Authorities (SSAs), have the front-line responsibility for managing the nation's publicly funded substance abuse prevention, treatment and recovery systems.

Substance Abuse Prevention and Treatment Block Grant

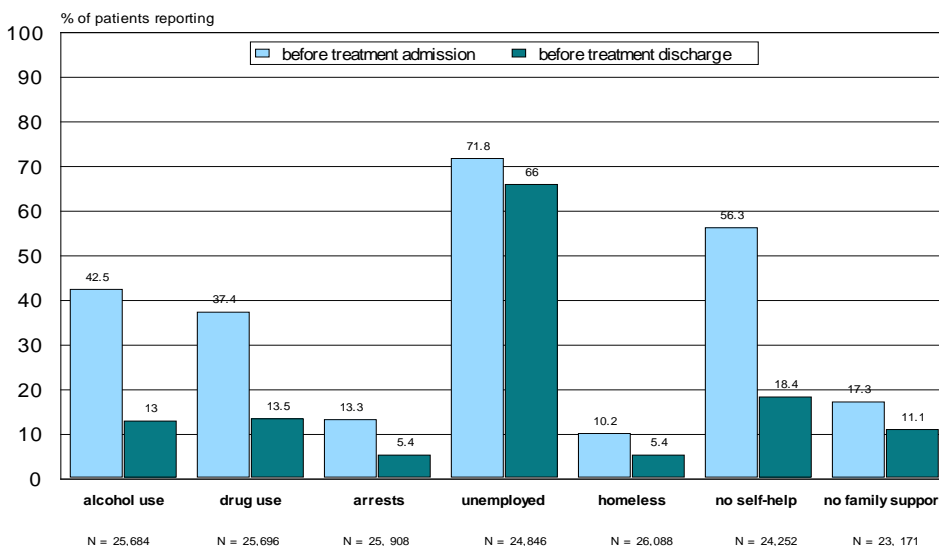
The Substance Abuse Prevention and Treatment (SAPT) Block Grant is a formula grant awarded to every State and territory from the Substance Abuse and Mental Health Services Administration (SAMHSA.) It is the backbone of our publicly funded substance abuse prevention, treatment and recovery system. This flexible funding stream is designed to help States address their own unique needs related to addiction. In addition, 20 percent of the SAPT Block Grant is, by statute, dedicated to prevention services. The \$23 million SAPT Block Grant Award (FY 2010) for Minnesota plays a critical role in providing funding for Statewide prevention, treatment, and recovery support activities that would not otherwise exist. This is particularly important in the context of extreme State budget shortfalls that can threaten to interrupt the continuity of successful community-based initiatives.

SAPT Block Grant Yields Results

Through performance outcome data, State substance abuse directors report that SAPT Block Grant-funded services help people remain alcohol and drug free; obtain or regain employment; stay out of the criminal justice system; find stable housing; and enter into recovery. For example, in CY2008, Minnesota reported the following addiction treatment outcomes for public pay patients:

- A 69.4% decrease in alcohol use
- A 63.9% decrease in illicit drug use
- A 47.1% decrease in client homelessness
- A 59.4% decrease in arrests in the past 30 days

Minnesota Addiction Treatment Outcome Measures Public patients only - 2008



SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Minnesota Dept of Human Services, 2010. These measure refer to the 30 days before treatment admission compared with the 30 days prior to treatment discharge for public pay patients who received treatment in 2008 and whose discharge data were submitted by 11/5/2009.

Minnesota Quick Facts

Treatment admissions

- In CY2008, there were 29,681 public pay patient admissions representing 20,815 individual patients

➤ Primary substance of abuse at admissions:

Alcohol	51.3%
Heroin	4.2%
Marijuana	18.4%
Cocaine/Crack	9.6%
Methamphetamine	9.3%
All Other	7.2%

➤ Gender:

Male	66.5%
Female	33.5%

➤ Age:

Under 18	7.1%
18-24	22.1%
25-34	27.6%
35-44	22.6%
45-64	20.2%
65 and over	0.4%

➤ Race/Ethnicity:

White	65.8%
Black	15.3%
American Indian	11.5%
Hispanic/Latino	4.4%
Asian	0.9%
All others	2.1%

Treatment Gap

- 377,048 of the State's population age 12 and over needed but did not receive treatment for substance abuse in the past year.

SAPT Block Grant Prevention Outcomes: The twenty percent prevention set-aside of the SAPT Block Grant contributed to the following SFY 2008 prevention services:

- 1.2 million Minnesotans received primary prevention services through presentations, school-based curricula, public service announcements and other media.
- Community coalitions provided activities and environmental changes that affected over 3,083,813 individuals in Minnesota.
- 9,086 registered individuals participated in 7,015 recurring event activities, and 81,974 attended single events.
- Synar inspections of retail tobacco outlets found that 90 percent of retailers obeyed the law and did not sell tobacco to minors in Minnesota in 2009.

Prevention Efforts Are Key to Reducing Underage Drinking: Alcohol use shows an overall declining pattern among 12th graders in Minnesota, from 80.1 percent reporting any alcohol use during past year in 1992 to 62.7 percent in 2007, and for 9th graders from 63.8 percent in 1992 to 37.4 percent in 2007.

Prevention Efforts Are Key to Reducing Underage Smoking: Cigarette use among Minnesota students also continues a downward trend. The current (past 30 day) smoking rate among 12th graders dropped from 42.0 percent in 1998 to 23.0 percent in 2009. For 6th graders the rate was cut by more than three quarters, from 7.0 percent in 1998 to 1.5 percent in 2007 and by about two thirds among 9th graders from 29.9 percent in 1998 to 10.4 percent in 2007.

Accountability: NASADAD strongly supports the use of performance and outcome data to help improve services and improve lives. The implementation of National Outcome Measures (NOMs) helps improve decision-making and paints a better picture of our substance abuse prevention and treatment system. NASADAD remains committed to working with SAMHSA to ensure that this data initiative evolves over time to take advantage of advances in both technology and clinical practice. In Minnesota, all treatment providers submit data to the State through the Drug and Alcohol Abuse Normative Evaluation System (DAANES) which includes NOMS measures. Minnesota's Alcohol and Drug Abuse Division presents performance outcome measures annually for every treatment program online at www.dhs.state.mn.us/adad.

Web-based Indicators of Substance Abuse

Substance Use in Minnesota, an interactive web site devoted to alcohol, tobacco and other drug (ATOD) consumption and consequence statistics, includes over 70 indicators from ten State data sources. The purpose of the website is to provide a one-stop-shopping for information that can be used by communities and prevention professionals for planning, monitoring, and evaluation. This site can be accessed at www.sumn.org.

Strategic Prevention Framework – State Incentive Grant: The Alcohol and Drug Abuse Division (ADAD) recently received (July 2009) a grant award from SAMHSA's Center for Substance Abuse Prevention (CSAP), for a Strategic Prevention Framework–State Incentive Grant (SPF-SIG) totaling \$2.1 million per year for five years. The goals are to: (1) Prevent the onset, and reduce the progression and consequences of alcohol abuse among 18- to 24-year-old college students; (2) Build prevention capacity at the state, community and tribal levels; and (3) Examine the consequences of substance abuse by returning veterans and plan and implement prevention approaches.

The Alcohol and Drug Abuse Division Mission: We work to develop and maintain an effective chemical health service system in Minnesota that encourages and supports research-informed practices, expands the use of successful models, and systematically monitors outcomes. **Seven Goals for Achieving Excellence:** (1) Eradicate the stigma associated with addiction, (2) Improve access to the right care at the right time, (3) Establish best practices, (4) Integrate substance abuse into primary health care and mental health services, (5) Strive to reduce the overall cost of care, (6) Promote wellness, and (7) Help reduce the far-reaching consequences of addiction.

Partnerships and Advisory Boards: The Alcohol and Drug Abuse Division fosters relationships and ongoing collaborations with other key State agencies. It also convenes and supports two advisory councils: the American Indian Advisory Council comprised of representatives of each tribe to advise the American Indian Section of the Division, and the Citizen's Advisory Council, an ongoing vehicle for public input into the processes and activities of the Division.

Oversight: All addiction treatment providers are licensed by the Licensing Division of the Minnesota Dept. of Human Services. The Alcohol and Drug Abuse Division (ADAD) financially supports two positions in that Division, which ensures that all licensed addiction treatment providers meet minimum standards set in law and administrative rule. In 2009, ADAD created a new staff position to monitor counties and tribal entities. These counties/tribal entities serve as placement authorities for publicly funded clients and administer a newly developed assessment tool. The new position also monitors all ADAD-funded grantees for compliance with SAPT Block Grant requirements.



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