



CALIFORNIA

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. California's Department of Alcohol and Drug Programs (ADP) serves as the State's SSA.

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. 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. California's FY 2009 SAPT Block Grant allocation was \$250,794,726, representing approximately 40 percent of ADP's total budget for State Fiscal Year (SFY) 2008/2009.

SAPT Block Grant Yields Results: Through outcomes data, State substance abuse directors report that the SAPT Block Grant supports the substance abuse system and provides services that 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. In State Fiscal Year (SFY) 2007, California reported the following client outcomes at discharge from treatment:

- 73 percent of clients were abstinent from drug use;
- 65 percent of clients gained or maintained employment;
- 65 percent of clients were involved in recovery social supports;
- 96 percent of clients remained arrest free

Family Treatment

California's ADP funds approximately 200 programs to provide substance use disorder treatment services to women and their dependent children. In SFY 2007, 4,795 pregnant and 92,114 parenting women received treatment services. A full array of services are offered, including outpatient, intensive outpatient, residential and narcotic replacement therapy. Treatment programs not only focus on the needs of the women, but also provide services for children.

Prevention Services

As reported in California Outcome Measurement Service for Prevention (CalOMS Pv), ADP provided prevention services to 996,698 individuals in State Fiscal Year (SFY) 2007. The 20 percent set-aside for the SAPT Block Grant represents approximately 70.8 percent of California's State-level prevention funding. CalOMS Pv collects data from 58 counties and over 250 primary prevention providers in those counties. It is designed to include each of the Strategic Prevention Framework (SPF) steps, thus infusing SPF throughout the State prevention system. Counties must create a SPF-based plan that identifies their major problem areas, goals and objectives; counties assign objectives to their providers; provider data can only enter the CalOMS Pv data system if directly linked to objectives assigned to those providers, thus confirming intended application of resources.

Results from the Biennial California Student Survey on Drug, Alcohol and Tobacco Use found, using a sample of 13,980 students grades 7, 9, 11, that prescription drug use is a distinct problem among all age groups, ranking as the 2nd substance of choice for 11th graders and the 3rd substance of choice for 9th graders. Lifetime drinking and driving involvement increased among 9th and 11th graders to the highest levels in the past six years (23% and 32% respectively). To address these increases in substance use among youth, California works within the Governor's Prevention Advisory Council (GPAC) which coordinates State's efforts to increase prevention efforts in the State. The Director of California's Department of Alcohol and Drug Programs (ADP) serves on this Council.

California Quick Facts

Treatment Admissions

➤ 266,124 individuals were provided substance abuse treatment services in State Fiscal Year 2007.

➤ Primary substance of abuse at admission:

Methamphetamine	35%
Alcohol	20%
Marijuana	16%
Heroin	14%
Cocaine/Crack	10%
Other	4%

➤ Race/Ethnicity:

White:	41%
Hispanic:	35%
Black or African American:	16%
Hawaiian/Other American Indian/Other race:	2.4%
Asian:	2%
Alaska Native:	1.4%
Multiracial:	1.4%
Pacific Islander:	02%

➤ Sex:

Female:	36%
Male:	64%

Treatment Gap

According to the National Survey on Drug Use and Health (NSDUH), 383,412 individuals needed but did not receive treatment services in California.

Wait List Data

On any given day, over 5,250 Californians were on a wait list for treatment services.

National Outcome Measures (NOMs)

- **Abstinence from Drug/Alcohol Use**
- **Employment/Education**
- **Crime and Criminal Justice Involvement**
- **Stability in Housing**
- **Social Connectedness**
- **Access / Capacity**
- **Retention**
- **Perception of Care**
- **Cost Effectiveness**
- **Use of Evidence-Based Practices**

National Outcome Measures (NOMs)

NASADAD strongly supports the use of performance and outcome data to help improve services and improve lives. In fact, States across the country already capture and utilize data to help manage their systems. This experience shows that in order to effectively shape policy and practice decisions, such data must be clear, relevant and timely. The development and implementation of NOMs should help improve this decision-making process and paint a better picture of our substance abuse prevention and treatment system. As NOMs moves forward, NASADAD remains committed to working with SAMHSA to ensure that this data initiative evolves over time to take advantage of advances in technology and clinical practice.

Accountability

California's Department of Alcohol and Drug Programs (ADP) has several mechanisms in place to ensure that providers deliver effective prevention and treatment services. The following is a breakdown of the mechanisms in place:

On-site Inspections: Site inspections of licensed and certified residential and nonresidential alcohol and other drug programs are performed at least once during every two-year period of licensure. A licensed Narcotic Treatment Program (NTP) is subject to site inspection by the Department of Alcohol and Drug Programs (ADP) without prior notice at least annually. There are 146 NTP programs in the State. The State delegates the authority as part of the Net Negotiated Amount (NNA) contract to the counties to ensure prevention and treatment providers are in compliance with the requirements and agreements of the SAPT Block Grant. ADP's Performance Management Branch conducts regular site-visits to assure compliance with the NNA contract.

Activity Reports: All contractors receiving SAPT Block Grant funds are monitored and evaluated. Providers are required to submit Drug and Alcohol Treatment Access Report (DATAR) information to ADP by the 10th of each month. The prevention services are also evaluated through prevention-funded contractors through attendance at trainings and services provided by technical assistance contractors.

Management Information Systems: Treatment providers are required to submit client admission and discharge data to ADP monthly via the California Outcomes Measurement System-Treatment (CalOMS-Tx). In general, data are collected from clients by providers and processed through county data systems, then submitted to ADP for inclusion in CalOMS-Tx, although a small number of providers submit CalOMS-Tx data directly to ADP. Narcotic Treatment Providers also provide data directly to the ADP Licensing Division. ADP collects primary prevention data via the CalOMS-Prevention (Pv) data collection service, which is provided by KIT Solutions, Inc. through a service contract. Prevention-funded counties/providers input data on a weekly basis as services occur. Counties review all data submitted by county staff and sub-contracted prevention providers and then release the data to ADP at the end of each quarter. CalOMS-Pv staff review all data for accuracy and report findings/requests for corrections to each county.

Performance Contracts: Counties are mandated by NNA contracts to submit a range of reports and data which are used, in part, to monitor and evaluate the performance of counties that receive SAPT Block Grant funds. Examples are monthly CalOMS-Tx data, monthly DATAR reports, quarterly CalOMS-Pv data and annual cost reports. County compliance reviews are conducted annually.

Setting Goals and Objectives: One tool used by ADP to ensure quality is the use of goal setting. For example, as part of the Strategic Prevention Framework (SPF) analysis step, counties identify their goals and objectives for their county prevention plans. Counties direct their providers to work on specific objectives and report data back through CalOMS Pv so services and progress can be managed.

A Solid Economic Investment: According to the National Institute on Drug Abuse (NIDA) and the White House Office of National Drug Control Policy (ONDCP), the economic cost to U.S. society of alcohol and drug abuse was \$328 billion in 1998. Only 3.9 percent of the total economic costs were for alcohol and other drug treatment. Investing in addiction services reduces costs and helps Americans across the county regain their lives and families.

California's Substance Abuse and Crime Prevention Act, aka Proposition 36, reduced prison and jail costs as a result of fewer incarcerations, resulting in net savings beyond its costs. The significant net savings to the State are due primarily to diversion of offenders from state prison to SACPA programs. The UCLA Benefit-Cost Analysis of the 2008 Report found the state saved about \$2.00 for every \$1 allocated to fund SACPA, and saved \$4 for every \$1 allocated to a treatment completer under SACPA. From the eight cost analysis domains assessed (prisons, jails, probation, parole, arrest and convictions, drug treatment, healthcare, and taxes paid offsetting against costs); a net savings of \$1,977 per offender yielded a benefit-cost ratio of nearly \$2 for nearly every \$1 invested.



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