

RHODE ISLAND

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. 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% of the SAPT Block Grant is, by statute, dedicated to prevention services. Over the past four years, the overall SAPT Block Grant has been cut approximately \$20 million. Rhode Island's FY 2007 SAPT Block Grant allocation of \$6.6 million represents approximately 25% of the State's Division of Behavioral Healthcare Services substance abuse expenditures.

SAPT Block Grant Yields Results

Through outcomes 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 SFY 2006, Rhode Island reported the following **treatment outcomes**:

- An 84.3% decrease in alcohol use
- A 74.8% decrease in illicit drug use
- A 22.8% decrease in client homelessness
- An 81.3% decrease in arrests in the past 30 days

The twenty percent prevention set-aside of the SAPT Block Grant also contributed to the following SFY 2006 **prevention activities**:

- 844 registered individuals participated in 1,246 recurring event activities, 3,268 attended single events
- The Student Assistance Program provided services to 9,373 middle and high school students
- The State funded local media activities and conducted a statewide media campaign using radio and television
- The SAPT Block Grant set aside represented 25% of the Agency's prevention budget - including the last year of the State Incentive Grant (SIG) and 38% of the prevention budget without the SIG.

Prevention Efforts Key to Reducing Underage Drinking

It is estimated that the economic costs linked to underage drinking in the State of Rhode Island were approximately \$170.5 million (PIRE, 2006). Prevention efforts, like those funded by the SAPT Block Grant yield results. Between the years 1997 and 2005, the percentage of Rhode Island students who had their first drink of alcohol other than a few sips before age 13 years dropped 12% - from 33.7% in 1997 to 21.7% in 2005. (CDC, 2007)

Rhode Island Quick Facts

Treatment Admissions

- 8,170 clients served in FY 2006
- **Primary substance of abuse at admissions:**

Alcohol	39.3%
Heroin	21.0%
Marijuana	17.2%
Cocaine/Crack	13.1%
All others	9.4%
- **Gender:**

Male	68.7%
Female	31.3%
- **Age:**

13-20	10.6%
21-34	36.6%
35-64	52.3%
65 and over	0.5%
- **Race/Ethnicity:**

White	76.6%
Hispanic/Latino	9.9%
Black	8.4%
All others	5.0%

Treatment Gap

- 74,357 of the State's population age 15 and over needed but did not receive treatment for alcohol in the past year
- 28,010 of the State's population age 15 and over needed but did not receive treatment for illicit drugs in the past year

Family Treatment

In Rhode Island, all contracted providers of outpatient services are expected to provide family treatment services as requested. These services may involve individual sessions, family sessions and family group sessions. Providers are required to offer or arrange for child care services and case management services which could include referrals for pediatric care, children's mental health services, or other services related to the needs of dependents. Examples of family treatment services in Rhode Island include:

- Starbirth, a program which provides residential substance abuse treatment to pregnant/post-partum women and women with dependent children. Both mothers and children reside at the program and receive services.
- Eastman House and King House, residential programs for women, offer services that involve family and children of residents.
- Tri Hab, transitional housing available to women and their children who have completed King House or who are involved in their outpatient treatment program.

Accountability

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 National Outcome Measures (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.

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**

In Rhode Island, all treatment providers are required to submit data to the State through the CIS system which includes NOMS measures. Providers are monitored bi-annually on adherence to regulations and contract requirements. Outpatient contractors are required to submit quarterly reports on randomly selected charts and meet with Department representatives quarterly. Lack of utilization of capacity could result in financial penalties and lack of compliance with regulations and/or contract could result in licensing action and loss of funding. In addition, quarterly reports and meetings are used to improve performance and quality.

In prevention, all programs, regardless of funding source, must develop an annual program plan, which includes an outcomes-based logic model and an evaluation plan, and enter program data into the State's prevention information system (PBPS). In addition, all programs funded with SAPT, the Department of Justice's (DOJ) Enforcing Underage Drinking Laws (EUDL), and Department of Education's Safe and Drug Free Schools and Communities (SDFSC) State Grants dollars are required to conduct program evaluation. SAPT- and SDFSC-funded programs are also required to participate in their respective cross-site evaluations. All SAPT funded programs receive an annual compliance site visit.

Economic Costs: 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.

Impact of SAPT Block Grant Funding: Access to Services

There is no wait list in the Providence metro, Washington County, and Kent County regions for outpatient treatment. In the North and Northwest part of the State, however, the wait list ranges from 2 – 6 weeks, depending on specific service. In the Bristol/Newport Counties region, the wait list is approximately 4 – 6 weeks. For residential treatment, there is a 6 – 8 week wait list Statewide.

If the Block Grant remained level-funded, treatment services would not be able to expand to meet the current demand (for which there is already a wait list) or future demand. The State also anticipates increased spending in the Department of Corrections and the Child Welfare System, along with increased costs of healthcare and over-utilization of more expensive treatment modalities (e.g., inpatient detox and acute psychiatric hospitalizations). In addition, continued level funding of the SAPT Block Grant will not enable Rhode Island to expand its network of Student Assistance Programs (SAP). The long-term goal is to establish SAP counselors in every high school in the State.



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