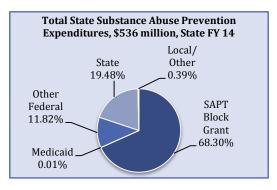
NASADAD • 1025 Connecticut Ave NW, Ste. 605 • Washington, DC 20036 • T: (202) 293-0090 • F: (202) 293-1250 • Website: <u>www.nasadad.org</u> Substance Abuse Prevention and Treatment (SAPT) Block Grant: Prevention Set-Aside

Overview

The Substance Abuse Prevention and Treatment (SAPT) Block Grant is the largest federal formula grant to State substance abuse agencies supporting substance use prevention, treatment, and recovery. Federal statute requires States to direct at least 20 percent of the SAPT Block Grant toward primary prevention services, amounting to \$371.6 million in FY 2016. **The prevention set-aside represents the single largest source of funding in each State's prevention system, making up almost 70 percent** (68.3%) of the primary substance abuse prevention funding that States, U.S. territories, and Washington, D.C. coordinate.¹ In terms of overall substance use disorder prevention funding managed by State substance abuse agencies, in:

- 6 States, the set-aside makes up 100 percent;
- 15 States, the set-aside makes up 75-99 percent;
- 18 States, the set-aside makes up 50-74 percent;
- 9 States, the set-aside makes up 25-49 percent; and
- 3 States, the set-aside makes up 24 percent or less.



Other resources, including State funding (19.5%) and other federal funding including discretionary grants (11.8%), play an important role in providing State substance abuse prevention services, but the SAPT Block Grant prevention set-aside is the primary source of funding.¹

Scope of the Problem

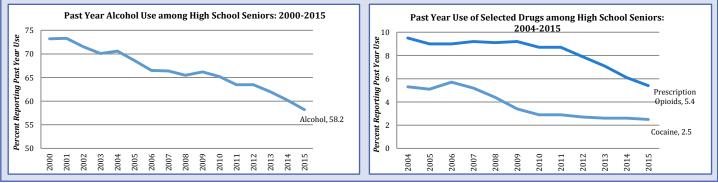
Substance use disorders continue to be a major problem in the United States. The 2014 National Survey on Drug Use and Health (NSDUH) provides the following estimates about drug use in the United States⁴:

- 16.3 million (12 or older) reported heavy alcohol use in the past month.
- 27.0 million (12 or older) used illicit drugs in the past month.
- 2.3 million adolescents (12-17) used illicit drugs in the past month.
- 22.2 million (12 or older) used marijuana (1.8 million adolescents).
- 6.5 million (12 or older) misused prescription drugs, including prescription opioids.
- 1.5 million (12 or older) used cocaine.
- 22.5 million (12 or older) required treatment for a substance use problem.
- 2.6 million (11.5%) of those who needed treatment received it. In 2010 only 9.7 percent received treatment.

NSDUH data show that the **overall rate of current (past month) illicit drug use rose from 8.7 percent of individuals 12 and older in 2011 to 10.2 percent in 2014**.⁴ Alcohol abuse is the fourth leading cause of preventable death according to the Centers for Disease Control and Prevention (CDC).² The majority (81.1%) of the 43,982 drug overdose deaths in 2013 were unintentional, and more than half (51.8%) were related to prescription drugs, including opioid pain relievers.³ In 2014, opioids killed 28,647 people in the U.S., quadrupling since 2000.⁷

Prevention Success Stories

The Monitoring the Future study has tracked drug use trends among 12th graders for roughly 40 years.⁵ The data provide a window into high school seniors' substance use, as well as offer insights into successful prevention efforts. Past year alcohol use among high school seniors has trended downward since 2000. Looking at the last decade, use of prescription opioid pain relievers and cocaine has also decreased among 12th graders. While significant work remains to continue these gains and reduce the use of other substances such as marijuana and amphetamines, it is important to recognize prevention success and build on the body of evidence supporting primary substance abuse prevention.



How SAPT Block Grant Set-Aside Funds Are Used

By statute, the SAPT Block Grant prevention set-aside must be spent on primary prevention services or services for individuals who have not been identified as needing treatment. States have the flexibility to use data to decide how to spend funds based on their local needs. Categories include:

- **Information Dissemination:** increase knowledge and awareness of the dangers associated with drug use and abuse (16.5%).
- **Education:** build skills to prevent illicit drug use, including decision making, peer resistance, stress management, and interpersonal communication (29.6%).
- Alternatives: organize healthy activities that exclude alcohol and illicit drugs (10.1%).
- **Problem Identification:** identify individuals abusing alcohol and illicit drugs and assess whether they can be helped by educational services (6.2%).
- **Community-Based Process:** provide networking activities and technical assistance to community groups and agencies (23.8%).
- **Environmental:** establish strategies for changing community standards, codes, and attitudes towards alcohol and illicit drug use (9.7%).⁶

The average expenditure percentages above reflect the numbers reported by States to date. We will continue to update these numbers as more States finalize their expenditure reports.

Efficacy of SAPT Block Grant

Evaluations of the SAPT Block Grant program have found that the funding is effectively used to address substance abuse and substance use disorders. An independent study released in June 2009 found that the SAPT Block Grant program:

- Increased the availability of services for underserved populations, while increasing the development of evidence-based practices;
- Helped States leverage funding to improve and continue current programs, in addition to creating new initiatives; and
- Contributed to the development and success of State collaborations with other agencies and stakeholders.

Role of State Substance Abuse Agencies and Prevention

NASADAD represents State substance abuse agency directors from the fifty states, the District of Columbia, and the five U.S. Territories. The National Prevention Network (NPN) is a component organization of NASADAD. The NPN consists of State Prevention Coordinators who work with State substance abuse directors to provide high quality alcohol, tobacco, and illicit drug abuse prevention services. States work with local communities to ensure that public dollars are dedicated to effective programs using tools such as: performance data management and reporting, contract monitoring, corrective action planning, onsite reviews, and technical assistance to community coalitions. Use of evidence-based prevention practices is encouraged among State substance abuse agencies.

Reduced Substance Abuse Prevention Resources

The SAPT Block Grant remains the largest source of funding for prevention programs managed by State substance abuse agencies. Unfortunately, both State and federal funding for substance abuse prevention and treatment continues to decline. Between 2008 and 2013, total primary prevention expenditures in States declined 8% from \$583 million in 2008 to \$536 million in 2013. While prescription drug abuse has declined over this time period, heroin use is on the rise. States need to continue funding prevention, treatment, and recovery efforts to aid individuals suffering from substance use disorders.

Substance abuse prevention is unique and effective. Fully-funded prevention activities reduce access to alcohol, tobacco, and drugs; change social attitudes; raise awareness about the consequences of substance abuse; and build communities' capacities to effectively deal with substance use disorders.

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Evidence-Based Practices:

According to 2014 State reports on the SAPT Block Grant, approximately 71% of SAPT Block Grant prevention set-aside funds were spent on evidence-based practices.¹

Positive Outcomes:

According to the National Survey on Drug Use and Health, from 2010-2014, past month use rates for adolescents aged 12-17 declined for alcohol (15.4% decline), cigarettes (41.6% decline), and pain relievers (24% decline)More work remains to reduce youth marijuana use which has remained even in recent years.

Trends in Past Month Use:

Substance	2010 (%)	2014 (%)	Change (%)
Alcohol	13.6	11.5	-15.4
Cigarettes	8.4	4.9	-41.6
Pain Relievers	2.5	1.9	-24
Marijuana	7.4	7.4	0