

# Support \$150 Million Increase for Substance Abuse Prevention and Treatment Block Grant

## WHAT IS THE SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT?

The Substance Abuse Prevention and Treatment (SAPT) Block Grant is a program that provides funding to 60 eligible states, territories, the District of Columbia and the Red Lake Indian Tribe of Minnesota to plan, carry out, and evaluate substance abuse prevention activities and treatment services provided to individuals, families, and communities impacted by substance abuse and substance use disorders. It is the cornerstone of the nation's prevention and treatment systems and vital to helping states and communities address their unique needs. The SAPT block grant represents approximately 40 percent of treatment expenditures by state substance abuse agencies across the country and in some states constitutes as much as 70 to 80 percent of spending on prevention and treatment.<sup>1</sup>

Funding for the block grant includes specific provisions and funding set-asides, including a 20 percent prevention set-aside; an HIV/AIDS early intervention set-aside; and requirements and potential reduction of the Block Grant allotment with respect to sale of tobacco products to those under the age of 18. Of the amounts appropriated for the Block Grant program, 95 percent are distributed to states through a formula prescribed by the authorizing legislation. Factors used to calculate the allotments include total personal income; state population data by age groups (total population data for territories), total taxable resources, and a cost of services index factor.

## AN UNMET NEED

Abuse and addiction to alcohol, nicotine, and illegal substances cost Americans upwards of half a trillion dollars a year, considering their combined medical, economic, criminal, and social impact. Every year, addiction to illicit drugs and alcohol contributes to the death of more than 100,000 Americans.

According to the Substance Abuse and Mental Health Service Administration's (SAMHSA) National Survey on Drug Use and Health, approximately 23.2 million Americans aged 12 or older needed services for alcohol or an illicit drug problem in 2007 yet only 2.4 million people received treatment at a specialty facility, leaving approximately 20.8 million people untreated.<sup>2</sup> An increase in funding for the SAPT Block Grant is critical to close this vast treatment services gap.

Private insurance spending for addiction treatment has steadily eroded over the last ten years and treatment costs have increasingly fallen upon state and local governments, which struggle to maintain funding for these critical services. By 2003, 77 percent of addiction treatment was publicly financed; less than 0.5 percent of private insurance spending was allocated to addiction treatment.<sup>3</sup>

Data collected from states demonstrate that SAPT block grant funded programs help people remain abstinent from alcohol and drug use, find or regain employment, find stable housing, stay away from criminal activity, reunite with their families, and live productively in communities across the country.<sup>4</sup>

The SAPT block grant is an effective and efficient program that emphasizes accountability through the reporting of outcomes of data. These outcomes show positive results. As noted by SAMHSA in 2008,



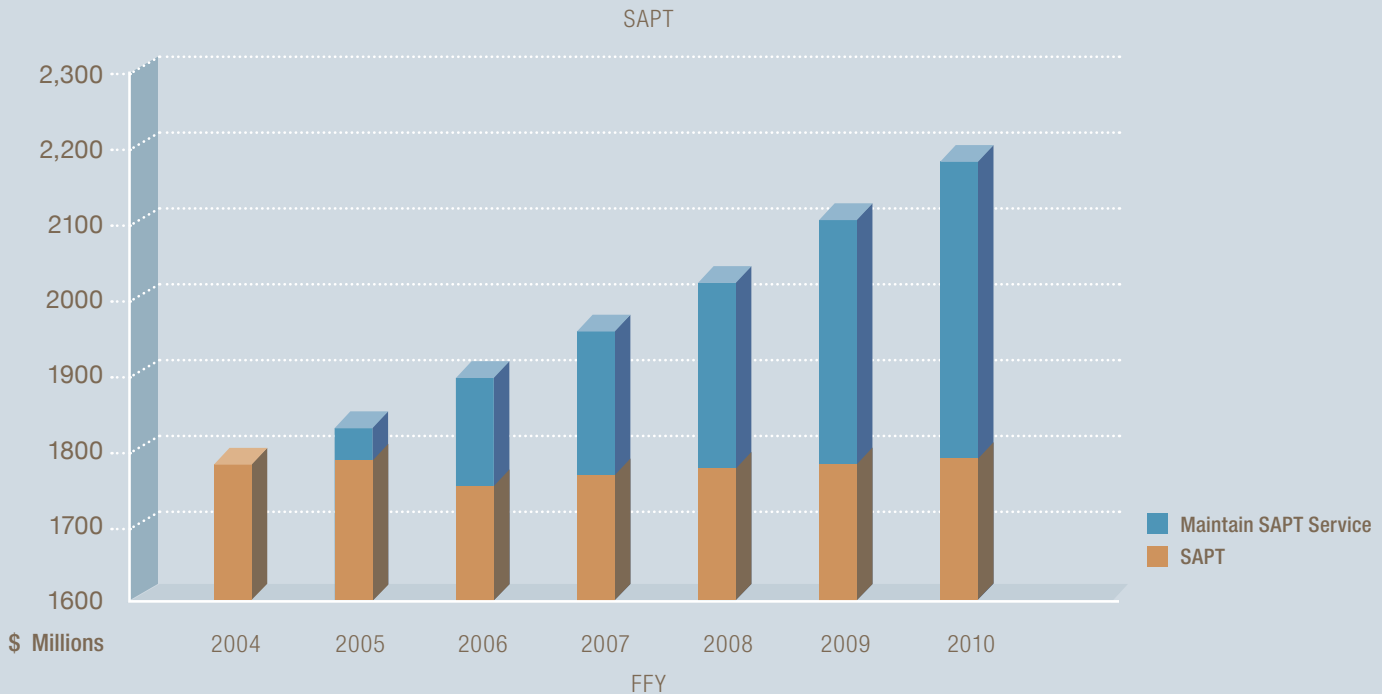
## Request

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SAPT block grant funded programs had positive results, whereby at discharge, clients have demonstrated high abstinence rates from both illegal drug use (68.3 percent) and alcohol use (73.7 percent).<sup>5</sup>

Supporting a \$150 million increase in funding for the SAPT block grant for a total of \$1,928.6 million would help the public treatment system to better serve the increased need for treatment for low income and uninsured populations.<sup>6</sup>

Figure 1: SAPT Block Grant Funding Levels Since 2004



It is estimated that the 2010 SAPT block Grant Appropriation would have to be increase by \$403.7 million above the 2009 appropriation to maintain services at 2004 levels (this is calculated using the consumer price index, CPI-U).<sup>7</sup>

1. Testimony on FY 2010 Federal Funding for addiction Treatment, Prevention, Recovery Services and Research, Submitted to the House Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies. 18 March 2009. National Association of State Alcohol and Drug Abuse Directors, Inc (NASADAD).
2. Substance Abuse and Mental Health Services Administration, Office of Applied Studies (2008). Results from the 2007 National Survey on Drug Use and Health: National Findings (NSDUH Series H-34, DHHS, Publication No. SMA 08-4343). Rockville, MD. <http://www.oas.samhsa.gov/nsduh/2k7nsduh/2k7Results.cfm#TOC>
3. "FY 2009 Appropriations: Protect Funding for Addictions Prevention, Treatment and Research Programs" The National Council. May 2008
4. Testimony from Linda Rosenberg, The National Council, for "FY 2010 Federal Funding for Addiction Treatment, Prevention, Recovery Services and Research" submitted to the House Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies. 18 March 2009.
5. Testimony on FY 2010 Federal Funding for addiction Treatment, Prevention, Recovery Services and Research, Submitted to the House Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies. 18 March 2009. National Association of State Alcohol and Drug Abuse Directors, Inc (NASADAD).
6. Testimony on FY 2010 Federal Funding for addiction Treatment, Prevention, Recovery Services and Research, Submitted to the House Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies. 18 March 2009. National Association of State Alcohol and Drug Abuse Directors, Inc (NASADAD).
7. SAPT Block Grant Fund Level, 2009. NASADAD and New York's Office of Alcoholism and Substance Abuse Services (OASAS).