

**KEY FEDERAL FUNDING FOR DRUG AND ALCOHOL ADDICTION
PREVENTION, TREATMENT, EDUCATION AND RESEARCH PROGRAMS**

Program	FY 2006 Funding Level	FY 2007 Funding Level	President's FY 2008 Budget Request	FY 2008 Field Request
Substance Abuse Prevention & Treatment Block Grant	\$1.759 billion	\$1.7586 billion	\$1.7586 billion	\$1.8586 billion
Center for Substance Abuse Treatment (CSAT)	\$398.9 million	\$398.9 million	\$352.1 million	\$410 million
Center for Substance Abuse Prevention (CSAP)	\$192.9 million	\$192.9 million	\$156.5 million	\$210 million
Safe and Drug Free Schools and Communities (SDFSC) State Grants Program	\$346.5 million	\$355 million	\$100 million	\$355 million
National Institute on Drug Abuse (NIDA)	\$999 million	\$999 million	\$1 billion	\$1.0664 billion
National Institute on Alcohol Abuse and Alcoholism (NIAAA)	\$435.9 million	\$435.9 million	\$437 million	\$465.1 million

PROGRAM OVERVIEW

SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT (SAPTBG)

Field Request: \$1.8586 billion for the Substance Abuse Prevention and Treatment Block Grant

Administered by the Substance Abuse and Mental Health Services Administration (SAMHSA), the SAPTBG is the foundation of the publicly supported prevention and treatment system in this country. In 2002, nearly 2 million people were served by SAPTBG formula funding. SAPTBG funds are distributed through each state's Single State Authority (SSA) to over 10,500 community-based organizations in 60 eligible states, territories and tribes. Twenty percent of SAPTBG funds are set aside for substance abuse prevention programming. In addition, people living with HIV/AIDS are also served by the block grant's HIV/AIDS early intervention set-aside. Increasing funding for the SAPTBG is critical to support and expand drug addiction prevention and treatment services and to close the 80% nationwide treatment services gap.

CENTER FOR SUBSTANCE ABUSE TREATMENT (CSAT)

Field Request: \$410 million for the Center for Substance Abuse Treatment

CSAT, through its Best Practices portfolio, supports effective treatment through the adoption of evidence-based practice and ensures that what is learned about addiction through scientific research is effectively shared with the treatment provider community. CSAT supports this technology transfer through its Addiction Technology Transfer Centers (ATTCs), which are located regionally throughout the nation, and provide training and technical assistance to providers.

In addition, CSAT's Targeted Capacity Expansion programs support services that are tailored to address specific and emerging drug epidemics and/or underserved populations, such as youth, pregnant and parenting women, and communities of color. These discretionary CSAT funds enable states and regions dealing with emerging needs, such as methamphetamine addiction or veterans returning home in need of essential treatment services, to appropriately address these needs.

CENTER FOR SUBSTANCE ABUSE PREVENTION (CSAP)

Field Request: \$210 million for the Center for Substance Abuse Prevention

Addiction is a disease that begins in adolescence; research by the National Institute on Drug Abuse (NIDA) has shown that if we can stop use and abuse before age 25, we will significantly reduce the prevalence of addiction. Prevention efforts are effective in deterring young people from using illicit drugs and alcohol. Discretionary funding through CSAP's Strategic Prevention Framework promotes the use of performance measurement by providers, expands collaboration across community agencies, and supports implementation of effective prevention programs at the State and community levels. The Strategic Prevention Framework helps communities to promote youth development, reduce risk-taking behaviors, build assets and resilience, and prevent problem behaviors across the life span.

SAFE AND DRUG FREE SCHOOLS AND COMMUNITIES STATE GRANTS PROGRAM

Field Request: \$355 million for the Safe and Drug Free Schools and Communities State Grants Program

The Safe and Drug Free Schools and Communities (SDFSC) State Grants Program is the backbone of school-based prevention efforts in the United States, and supports community-based prevention programming throughout this country. The SDFSC program has had a significant impact on helping to achieve the 17 percent overall decline in youth drug use over the past three years, documented by the 2004 Monitoring the Future survey. According to recent data, upwards of 37 million youth are served annually by programs funded through SDFSC. Cutting the SDFSC program will leave millions of American children without any drug prevention education.

NATIONAL INSTITUTE ON DRUG ABUSE (NIDA)

Field Recommendation: \$1.0664 billion for the National Institute on Drug Abuse

Research on addiction as a disease has been useful in the development and testing of new science-based therapies. NIDA research has made extraordinary scientific advances in understanding the nature of addiction, such as those made through the use of imaging technologies like positron emission tomography (PET scans) and through the development of new treatment technologies and medications, such as buprenorphine. Additionally, NIDA's Criminal Justice Drug Abuse Treatment Studies (CJ-DATS) research is designed to improve outcomes for offenders with substance use disorders by improving the integration of drug abuse treatment with other public health and public safety systems.

NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM (NIAAA)

Field Recommendation: \$465.1 million for the National Institute on Alcohol Abuse and Alcoholism

Alcohol is the third leading cause of preventable death in the United States. The financial burden from alcohol abuse and alcoholism on our nation is estimated at \$185 billion annually. Research by NIAAA has expanded knowledge about how best to treat and prevent addiction to alcohol. NIAAA has conducted breakthrough research that has improved clinical practice, with much of the research focused on the genetics, neurobiology, and environmental factors that underlie alcohol dependence. NIAAA has also sought to use new information about alcohol use to promote education and an effective public health response to the problem.