

State of Alaska FY2002 Governor's Operating Budget

Department of Health and Social Services
Alcohol and Drug Abuse Grants
Component

Component: Alcohol and Drug Abuse Grants

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Component Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

Component Services Provided

Alcohol and drug abuse grants funded through this component are the foundation of Alaska's effort to prevent and remedy substance abuse within the State. Grants are distributed to non-profit organizations and local government agencies through a grant-in-aid process established in AS 47.30.475. Funds are granted to support community-based substance abuse, prevention, intervention, and treatment services to provide the comprehensive system required by law. Over 14,000 Alaskans receive substance abuse treatment services annually through these grants. These publicly funded programs serve those Alaskans without insurance or the ability to pay the full cost of services. These clients are not served by the private providers of substance abuse treatment services.

Component Goals and Strategies

Support and enhance community-based processes that build partnerships and provide more effective prevention and treatment services. Encourage activities and initiatives designed to develop and strengthen community standards, activities that emphasize healthy lifestyles and promote the benefits of treatment, recovery, and sober, drug free lifestyle. Encourage traditional and alternative social activities that are alcohol free. Support education strategies to help youth improve critical life and social skills. Encourage early identification and referral of people with substance abuse problems. Support community efforts to establish involuntary commitment procedures and to use them when appropriate. Develop sufficient resources to meet community needs for appropriate levels of treatment for adults, youth and special populations. Identify and remove barriers that prevent clients from entering treatment. Support appropriate and available treatment for women, women with children, and for the dually diagnosed. Support a continuum of care for chronic alcoholics with psychosis that focuses on intervention, treatment, and the client's long term life domain requirements.

Key Component Issues for FY2001 – 2002

The Division continues to work hard to meet the need for services for rural women and children and to meet the increasing demands for service due to welfare reform and changes in child protection laws. This means locating and securing additional resources and developing innovative and effective strategies for treating these clients. There is also need for additional resources and effective treatments to better serve the incarcerated substance abuser and the chronic substance abuser.

In addition, the need for substance abuse and mental health agencies to maximize third-party and Medicaid reimbursements has led to a desire on the part of some agencies to move to a behavioral health model in which substance abuse and mental health services are provided by the same agency and program. The key issue for the Division is to insure that the unique needs of substance abusers are well met in this model and that substance abuse services are provided by trained, qualified chemical dependency professionals. Maintaining a qualified trained chemical dependency workforce, especially in rural Alaska, is of continuing concern.

Major Component Accomplishments for FY2000

In FY 2000 a total of 71 grant awards and other program agreements provided by this component of service totaled \$18,591.1. These awards for substance abuse treatment agencies and also to increase the capacity of women's

services (a funding priority for the Division) were distributed to a wide geographic area (Barrow to Ketchikan) and variety of community size.

Statutory and Regulatory Authority

AS 47.30.470-500 Mental Health
AS 47.37 Uniform Alcoholism & Intoxication Treatment Act
7 AAC 28 Community Grant-In-Aid Program for Alcoholism
7 AAC 29 Uniform Alcoholism & Intoxication Treatment Act
7 AAC 32 Depressant, Hallucinogenic, and Stimulant Drugs
7 AAC 33 Methadone Programs
7 AAC 78 Grant Programs

Key Performance Measures for FY2002

Measure: Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons.
(Not yet addressed by Legislature.)

Current Status:

The data indicates that Alaska's consumption rate is continuing to decline. Since FY90 Alaska has experienced a steady decline with the most recent years rates of 2.64 and 2.51 gallons per capita for FY97 and FY98 respectively.

Benchmark:

The benchmark for this measure is 3.46 gallons in FY85. Per capita consumption was 2.51 in FY98.

Background and Strategies:

We know that the prevalence and severity of alcohol-related problems among Alaskans is directly related to the amount of alcohol consumed. The data, as collected, are based on total alcohol purchased at the wholesale level and the number of Alaskans who are 14 years of age and older but does not acknowledge the state's significant (and increasing) visitor population.

The strategies that impact this indicator most readily are those that address public policy issues such as the number of licensed outlets and their hours of operation. In relation to this strategy the Division advocates for positive change through legal and regulatory initiatives. Other strategies used by the Division include but are not limited to: encourage activities and initiatives that will change community standards and emphasize healthy lifestyles; encourage traditional and alternative social activities that are alcohol and drug free.

Measure: Reduce the number of convictions in state district and superior courts on charges of driving while under the influence (DUI) of alcohol.
(Not yet addressed by Legislature.)

Current Status:

Felony DUI case increases since 1997 have for the most part leveled. For 1997 and 1998 convictions were 322 and 326 respectively.

Benchmark:

227 DUI convictions in 1996.

Background and Strategies:

Driving while under the influence of alcohol (DUI) is one of the strongest indicators of the negative consequences associated with alcohol misuse. DUI data for 1997 show that 30 percent of all automobile accident fatalities had alcohol or drugs as the major contributing factor. Driving while under the influence of alcohol impacts lives, not only in accidents, injuries, and deaths, but also in family suffering, employment problems, and social functioning.

DUI conviction data are collected and maintained by the State of Alaska Court System. Felony DUI data are included as a separate conviction category in regularly published reports. Misdemeanor DUI conviction data, however, are included with other misdemeanor traffic violations. To improve the measurement of this indicator misdemeanor DUI data should be collected as a separate category.

There are many variables that have an impact on a reduction in the number of DUI convictions, including enforcement efforts and prosecutor case loads. However, we know that reductions in DUI also correlate with successful prevention efforts, particularly in terms of public awareness of the consequences of DUI. Other strategies used by the Division include but are not limited to: distribution of useful and effective information to targeted populations; Identification of people with problems as early as possible and referral for appropriate services; improvement of interdisciplinary coordination and collaboration at local, regional and statewide levels.

Measure: Reduce the number of state criminal convictions on alcohol or drug-related charges.

(Not yet addressed by Legislature.)

Current Status:

Drug & alcohol related misdemeanor offenses increased from 2,404 in FY97 to 3,067 in FY98. Felony offenses also increased to 836 in FY98 from 791 in FY97.

Benchmark:

FY93, misdemeanor convictions totaled 2,317. Felony convictions totaled 478.

Background and Strategies:

Convictions for drug and alcohol-related offenses, like DUI convictions, offer a clear picture of the negative consequences of use of alcohol and other drugs. Between FY93 and FY97, felony convictions increased from 478 to 791. Misdemeanor convictions have increased from 2,317 to 3,067.

There are a number of factors that impact this indicator including local and statewide enforcement, changes in laws, and prosecution. A reduction in the number of alcohol and other drug related charges can be attributed to early intervention and appropriate, timely treatment for offenders. Other strategies used by the Division include but are not limited to: support community-based processes that build partnerships and provide more effective prevention and treatment services; identify people with problems as early as possible and refer them for appropriate services; develop sufficient resources to meet community needs for appropriate levels of treatment for adults, youth and special populations; and addressing the treatment needs of persons in the criminal justice system.

Measure: Reduce the number of alcohol-related injuries requiring hospitalization

(Not yet addressed by Legislature.)

Current Status:

Alcohol related injuries increased from 898 in FY 96 to 1028 in FY97. Data from previous years is as follows: 1991, 732; 1992, 789; 1993, 805; 1995, 734. Given the generally upward trend and the nature of the data being collected to measure this indicator the Division along with the Advisory Board are deliberating on whether to continue with this indicator in its current form.

Benchmark:

732 cases in FY91.

Background and Strategies:

Injuries involving the use of alcohol represent a significant and costly negative impact consequence. The Alaska Trauma Registry, which collects the information from every hospital in the state, tracks all injuries requiring hospitalization. It collects data on involvement with alcohol. The number seemed to peak in 1993 and start a downward trend. However, the number of injuries in 1998 showed sharp increase from 1997. These injuries typically involve young people. They affect the injured individuals, families, and sometimes entire villages. They require the most expensive level of medical care, that provided in an emergency room or trauma center.

The efforts that are most likely to impact this indicator are those which seek to restrict access to alcohol or other drugs through public policy advocacy. Early intervention and treatment services have also been shown to have a positive impact on this indicator.

Measure: Reduce the number of 12-hour protective custody holds.
(Not yet addressed by Legislature.)

Current Status:

Protective custody holds declined from 2,273 in FY98 to 2,109 in FY99.

Benchmark:

FY91, 2,878 12 hour protective custody holds.

Background and Strategies:

AS 47.37 provides that persons incapacitated by alcohol may be taken into custody in order to protect them and others from the negative consequences of their incapacitation. If suitable detoxification facilities are not available, they are taken to Department of Correction facilities. They are held until protective custody is no longer necessary or for up to twelve hours. During 1995 and 1996 the Division began to place more emphasis on early intervention for late stage, chronic alcoholics. This is the population most likely to require protective custody.

As treatment programs work with communities to provide more appropriate services and timely interventions, the number of protective custody holds decreases. Community partnerships, resource expansion and community training in involuntary commitment procedures contribute to the reduction in the number of 12-hour protective custody holds.

Measure: Reduce the rate of binge or chronic drinking by adults.
(Not yet addressed by Legislature.)

Current Status:

The CDC has changed the information that is being collected. The Division along with the Advisory Board are deliberating on whether this indicator will continue to be an indicator.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons by FY2001.			X		
• Reduce the number of convictions in state district and superior courts on charges of driving while under the influence (DUI) of alcohol.			X		
• Reduce the number of state criminal convictions on alcohol or drug-related charges.			X		
• Reduce the number of alcohol-related injuries requiring hospitalization			X		
• Reduce the number of 12-hour protective custody holds.			X		
• Reduce the rate of binge or chronic drinking by adults.			X		

Alcohol and Drug Abuse Grants
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	18,591.1	20,050.4	23,837.9
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	18,591.1	20,050.4	23,837.9
Funding Sources:			
1002 Federal Receipts	5,546.5	6,412.9	5,092.9
1004 General Fund Receipts	4,457.8	4,019.6	8,530.1
1007 Inter-Agency Receipts	368.5	850.0	350.0
1037 General Fund / Mental Health	7,261.6	7,714.6	8,731.6
1092 Mental Health Trust Authority Authorized Receipts	956.7	1,053.3	1,133.3
Funding Totals	18,591.1	20,050.4	23,837.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	5,546.5	6,412.9	5,756.9	5,092.9	3,428.5
Interagency Receipts	51015	368.5	850.0	320.0	350.0	350.0
Mental Health Trust Authority Auth.Rec.	51410	956.7	1,053.3	1,053.3	1,133.3	1,083.3
Restricted Total		6,871.7	8,316.2	7,130.2	6,576.2	4,861.8
Total Estimated Revenues		6,871.7	8,316.2	7,130.2	6,576.2	4,861.8

Alcohol and Drug Abuse Grants**Proposed Changes in Levels of Service for FY2002**

The Division is requesting the following increments: increments for Recovery Camps (\$357.0 GF), Transitional Housing for recovering adults (\$200.0 MHTAAR), Mini-grants for chronic alcoholic Beneficiaries (\$40.0 MHTAAR), Adult alcohol treatment expansion (\$2,000.0 GF), and Juvenile alcohol treatment services (\$1010.5 GF). There is also a switch fund from Federal Receipts to General Funds to replace anticipated loss of federal SYNAR funding (\$1,500.0).

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	11,734.2	6,412.9	1,903.3	20,050.4
Adjustments which will continue current level of service:				
-Fund Switch to replace anticipated loss of federal funding (SYNAR)	1,500.0	-1,500.0	0.0	0.0
-Restore ADA Grants/replace unusable I/A	500.0	0.0	-500.0	0.0
-Domiciliary Care in Fairbanks	160.0	0.0	-160.0	0.0
Proposed budget increases:				
-Spirit/Recovery Camp Development	357.0	0.0	0.0	357.0
-Transitional Housing for Recovering Substance Abusers	0.0	0.0	200.0	200.0
-Mini-grants for Chronic Alcoholic Beneficiaries	0.0	0.0	40.0	40.0
-API 2000 Dual Diagnosis and Detox Treatment	0.0	180.0	0.0	180.0
-Adult alcohol treatment services expansion	2,000.0	0.0	0.0	2,000.0
-Juvenile alcohol treatment services expansion	1,010.5	0.0	0.0	1,010.5
FY2002 Governor	17,261.7	5,092.9	1,483.3	23,837.9