SAPT Block Grant Evaluation *Highlights*

**Substance Abuse and Mental Health Services Administration (SAMHSA)**

An independent evaluation of the Substance Abuse Prevention and Treatment (SAPT) Block Grant Program resulted in a number of key findings about the outcomes and impacts of the program as well as successes and areas for improvement in program processes and implementation. This paper summarizes six key findings.

**Key Finding 1:** The SAPT Block Grant Program has demonstrated positive effects on the health and lives of substance abuse treatment clients.

Clients showed positive outcomes in all six client-level National Outcome Measure (NOM) domains:

- **Increased Alcohol Abstinence**
  - **Admission 44%**
  - **Discharge 64%**

- **Increased Employment and School Participation**
  - **Admission 36%**
  - **Discharge 44%**

- **Increased Social Connectedness**
  - **Admission 43%**
  - **Discharge 64%**

- **Increased Drug Abstinence**
  - **Admission 40%**
  - **Discharge 59%**

- **Increased Stable Housing**
  - **Admission 92%**
  - **Discharge 94%**

- **Decreased Criminal Justice Involvement**
  - **Admission 33%**
  - **Discharge 12%**

**Key Finding 2:** The SAPT Block Grant Program has acted as a major impetus for improving State prevention and treatment systems’ infrastructure and capacity.

- Availability of services for diverse and underserved populations
- Development and implementation of evidence-based practices
- Development and maintenance of State data management systems

In addition, States have shown an improvement in the development and collection of specific outcome measures, serving as a catalyst for data-driven assessment and decision-making at the State level.

**Key Finding 3:** States have leveraged SAPT Block Grant requirements, resources, and Federal guidance to sustain and improve their State systems.

States have used the BG funding to go beyond the expected outcomes of the Program, leveraging resources to improve State prevention and treatment systems. Three outcomes were demonstrated:

- **Prevented State legislature reductions** in funds for prevention and treatment and advocated for additional funding
- **Set State policies and priorities** based on Federal leadership and development of national policies and priorities
- **Used BG funds for new programs** that other organizations subsequently funded

These outcomes demonstrate the importance of the BG in the development of State systems.
Key Finding 4: CSAT, CSAP, and the States effectively and efficiently manage the SAPT BG Program through a standard system of communication, monitoring, and reporting.

A nationwide grant program as complex as the SAPT BG Program requires effective and efficient management to coordinate a myriad of Program activities across diverse States. Management involves the following crucial activities:

- **Communication of Program goals and activities to create a standardized system.** CSAT and CSAP communicate Program goals and expectations to the States in ways that lead to uniform documentation and assessment of State BG activities.

- **Monitoring and oversight to facilitate open communication.** Monitoring and oversight activities encourage open and flexible communication among Federal, State and sub-recipient levels.

- **Leading of complex data collection and reporting activities.** Federal data collection helps provide a “big picture view” of outcome measures to improve State systems and program performance.

- **Providing TA and training to promote systems improvement and ensure compliance and to aid States in meeting their goals.** SAMHSA supports States by providing access to online training and TA and by providing flexible training and TA to allow for a range of State circumstances and need.

CSAP and CSAT have developed several successful management strategies to steer States as they work toward the 17 legislative goals.

Key Finding 5: The SAPT BG Program has contributed to the development and maintenance of successful State collaborations with other agencies and stakeholders concerned with preventing and treating substance abuse.

Single State Authorities have increased the development and maintenance of collaborative working relationships with a variety of other State and local agencies and providers. Five goals were addressed:

- To **expand** services and programs available through joint funding initiatives
- To **increase** the ability to address statewide critical public health or safety issues
- To **improve** the coordination of prevention services
- To **improve** the coordination of treatment services
- To **increase** achievement of Synar Program goals and objectives

SSAs fostered many of these partnerships as they worked to accomplish the Program’s 17 legislative goals.

Key Finding 6: Although baseline data support the need for prevention services and activities, the use of national survey State estimates data alone to assess the NOMs limits CSAP’s ability to attribute changes in the NOMs to SAPT BG-funded prevention services and activities.

- To reduce the data collection burden for State and local prevention agencies, CSAP uses data from the National Survey on Drug Use and Health (NSDUH) to fulfill NOMs data requirements, including 30-day substance use, perceived risk or harm from use, age of first use, perception of disapproval/attitude towards substance use, and perception of workplace policy.

- Two significant difficulties are inherent in this strategy: conclusions about NOMs changes as a result of BG-funded prevention services and activities cannot be made based primarily on the results of national survey State estimates that do not identify individuals or groups who may have been affected by BG-funded activities, and the NSDUH is limited by small sample sizes in many States, which leads to under coverage of some populations.

- Additional data are needed to link changes in NOMs measures to interaction with BG-funded prevention services and activities.