

LOUISIANA

State SSA Director

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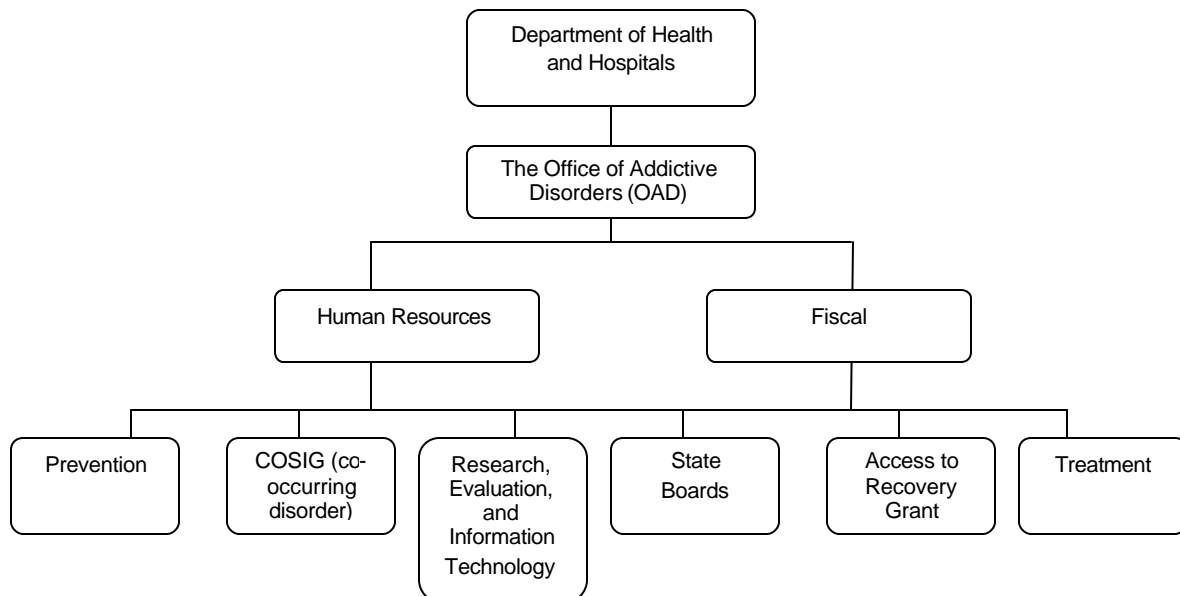
Structure and Function



The Office for Addictive Disorders (OAD) is the designated Single State Agency (SSA) in Louisiana. It is part of the Louisiana Department of Health and Hospitals and is focused on building and operating a system of prevention and treatment services that are client/family centered, evidence based, outcome driven, and cost effective. OAD envisions a State in which substance abuse prevention and treatment services are widely available and delivered by highly trained professionals.

OAD offers services through eight regional/district offices located throughout the State. Each region has an assigned regional manager who administers all programs and services through State-operated, contractual agreements and specific interagency agreements.

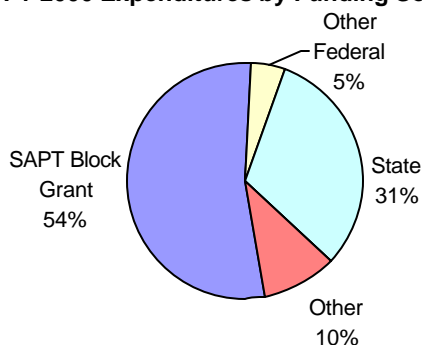
Single State Agency Structure



Single State Agency Funding Overview

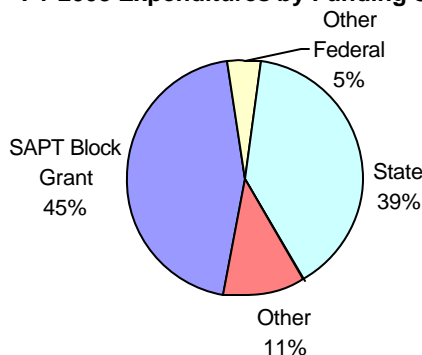
Louisiana's total SSA expenditures totaled \$57.7 million in FY 2003—a large increase from FY 2000 when they totaled \$46.2 million. The sources of funding also changed. In FY 2003, the largest source of SSA expenditures came from the Block Grant at 45 percent of total funds (compared with 54 percent in FY 2000), followed by 39 percent from the State (compared with 31 percent in FY 2000). During both time periods, about 15 percent of total SSA funds came from other Federal and other sources.

FY 2000 Expenditures by Funding Source

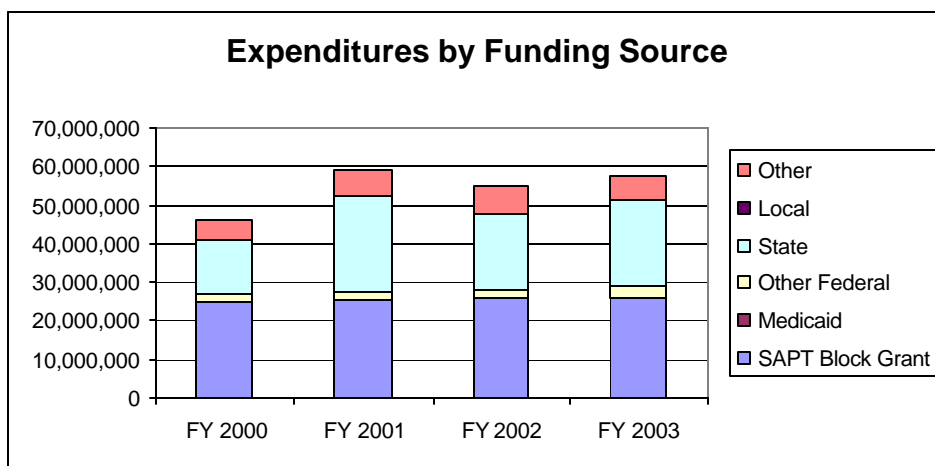


N=\$46,151,403

FY 2003 Expenditures by Funding Source



N=\$57,742,262



Single State Agency Expenditures From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	24,828,318	54	25,137,470	43	25,826,897	47	25,959,665	45
Medicaid	0	0	0	0	0	0	0	0
Other Federal	2,083,300	5	2,068,326	4	2,172,566	4	2,663,927	5
State	14,465,437	31	25,319,402	43	19,892,420	36	22,605,911	39
Local	0	0	0	0	0	0	0	0
Other	4,774,348	10	6,455,113	11	7,377,858	13	6,512,759	11
Total*	46,151,403	100	58,980,311	100	55,269,741	100	57,742,262	100

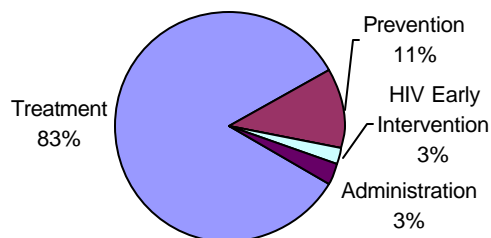
SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

*Totals may not equal 100 percent due to rounding.

Activities and Expenditures From All Funding Sources

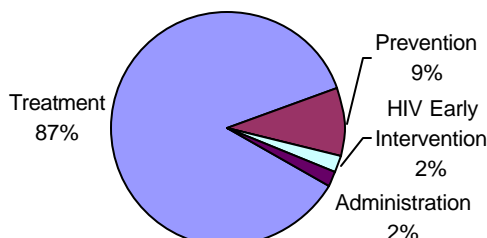
Most of the FY 2003 SSA expenditures in Louisiana went toward treatment services (87 percent), followed by prevention activities (9 percent). This distribution of funding was similar in FYs 2000 through 2002.

FY 2000 Expenditures by Activity

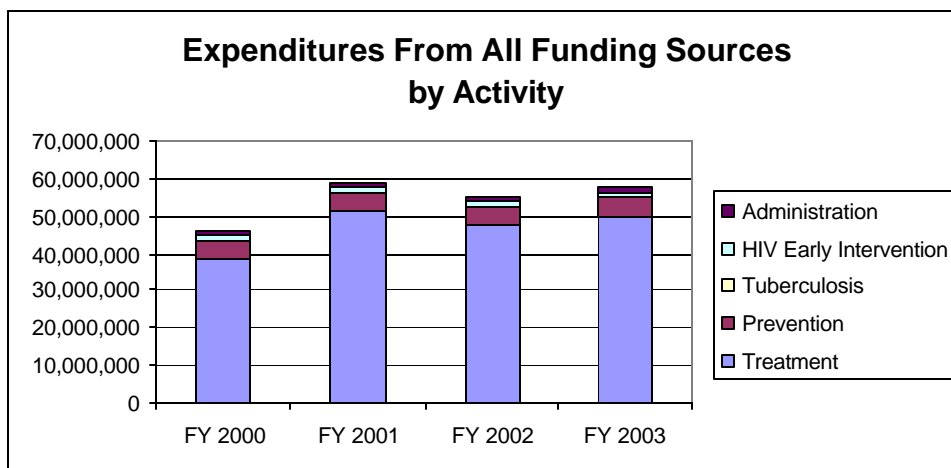


N=\$46,151,403

FY 2003 Expenditures by Activity



N=\$57,742,262



Single State Agency Expenditures From All Funding Sources by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	21,323,085	45	33,842,841	57	47,521,672	86	49,954,362	87
Alcohol Treatment	8,689,911	19	8,798,114	15				
Drug Treatment	8,689,911	19	8,798,114	15				
Prevention	4,965,664	11	5,027,494	9	5,165,379	9	5,191,933	9
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	1,241,416	3	1,256,874	2	1,291,345	2	1,297,984	2
Administration	1,241,416	3	1,256,874	2	1,291,345	2	1,297,983	2
Total*	46,151,403	100	58,980,311	100	55,269,741	100	57,742,262	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

NOTE: States with a specified HIV/AIDS case rate (10 or more per 100,000) must spend a portion of their SAPT Block Grant funds (usually 5%) on HIV early intervention activities.

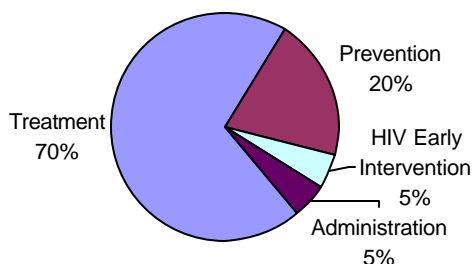
*Totals may not equal 100 percent due to rounding.

Expenditures of Block Grant and State Funds

Expenditures of Block Grant Funds

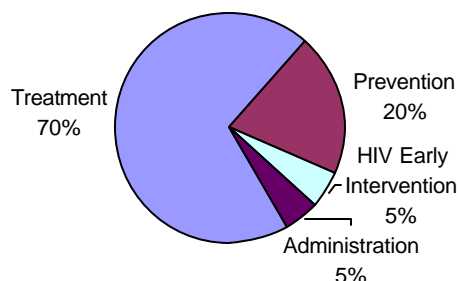
Block Grant funds in Louisiana have remained relatively stable over the past several years (increasing from \$24.8 million in FY 2000 to \$26 million in FY 2003), as has the distribution of funds to various services. Most (70 percent) of Block Grant funds in FY 2003 were earmarked for treatment services, followed by prevention services (at 20 percent) and HIV early intervention and administration costs (at 5 percent each).

FY 2000 Block Grant Expenditures by Activity

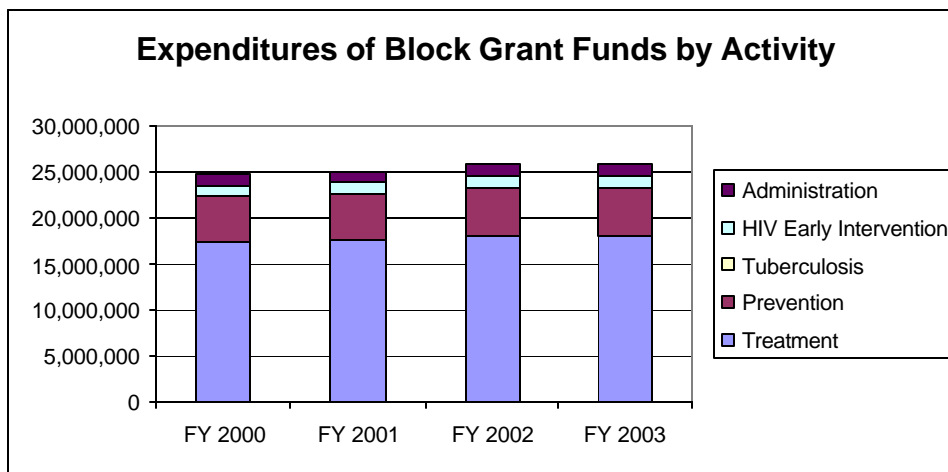


N=\$24,828,318

FY 2003 Block Grant Expenditures by Activity



N=\$25,959,665



Single State Agency Expenditures of Block Grant Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	0	0	0	0	18,078,828	70	18,171,765	70
Alcohol Treatment	8,689,911	35	8,798,114	35				
Drug Treatment	8,689,911	35	8,798,114	35				
Prevention	4,965,664	20	5,027,494	20	5,165,379	20	5,191,933	20
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	1,241,416	5	1,256,874	5	1,291,345	5	1,297,984	5
Administration	1,241,416	5	1,256,874	5	1,291,345	5	1,297,983	5
Total*	24,828,318	100	25,137,470	100	25,826,897	100	25,959,665	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

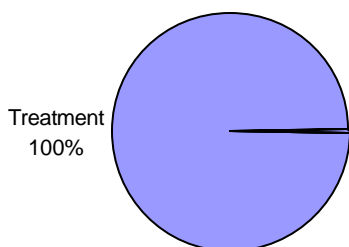
NOTE: States with a specified HIV/AIDS case rate (10 or more per 100,000) must spend a portion of their SAPT Block Grant funds (usually 5%) on HIV early intervention activities.

*Totals may not equal 100 percent due to rounding.

Expenditures of State Funds

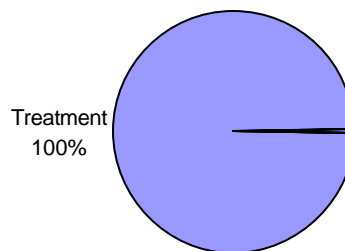
State expenditures in Louisiana increased dramatically between FYs 2000 and 2003 (from \$14.5 to \$22.6 million). One hundred percent of State funds were spent on treatment services—a stable proportion since FY 2000.

FY 2000 State Expenditures by Activity

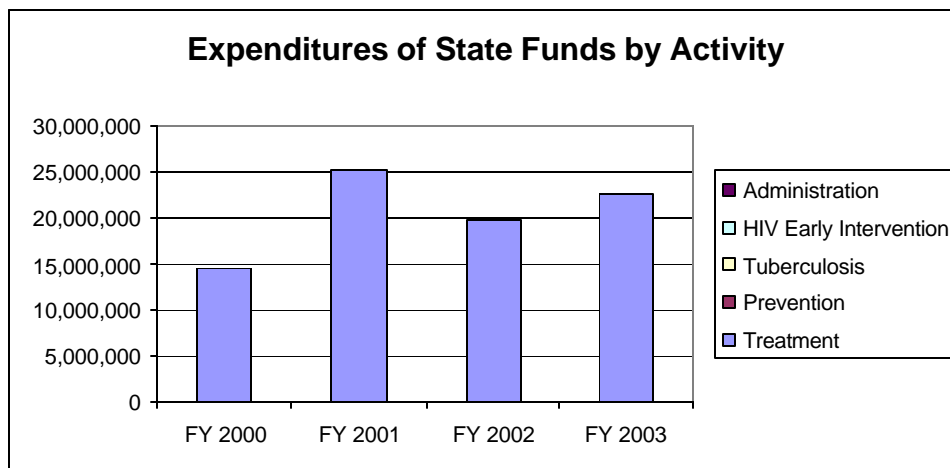


N=\$14,465,437

FY 2003 State Expenditures by Activity



N=\$22,605,911



Single State Agency Expenditures of State Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	14,465,437	100	25,319,402	100	19,892,420	100	22,605,911	100
Alcohol Treatment	0	0	0	0				
Drug Treatment	0	0	0	0				
Prevention	0	0	0	0	0	0	0	0
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	0	0	0	0	0	0	0	0
Total*	14,465,437	100	25,319,402	100	19,892,420	100	22,605,911	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

*Totals may not equal 100 percent due to rounding.

Prevention Services

The State's prevention goal is to develop, implement, maintain, and evaluate research-based prevention programs that address alcohol, tobacco, and other drug (ATOD) issues. This mission includes reducing high-risk behaviors associated with alcohol, tobacco, and other drugs and increasing the availability and effectiveness of a general health promotion and education message.

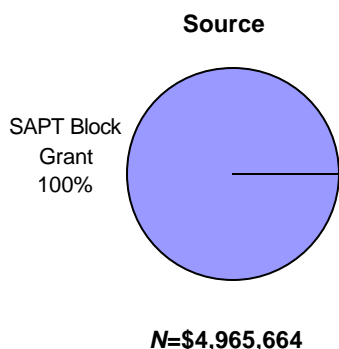
The Division of Prevention Services addresses the mission by: (1) funding a minimum of 40 community-based prevention projects using the Center for Substance Abuse Prevention's (CSAP's) six core strategies and following best practices; (2) promoting an evidence-based operating system to reduce the average age of onset for alcohol use using the steps of the Strategic Prevention Framework (SPF); (3) sponsoring youth drug prevention camps that are offered throughout the State; and (4) working to prevent underage tobacco and alcohol use.

Prevention Funding and Expenditures

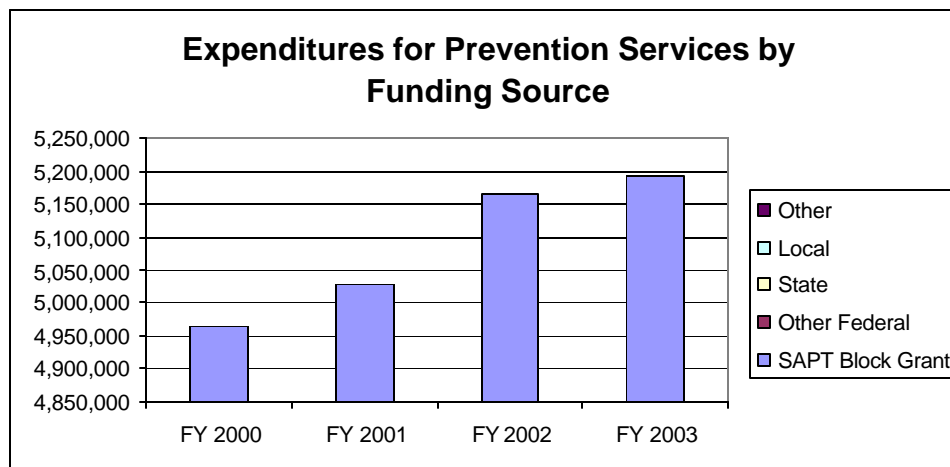
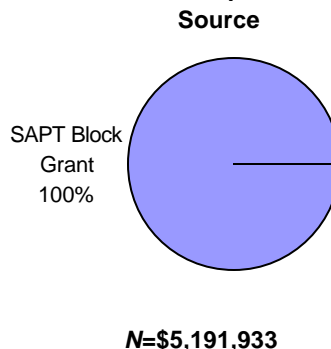
Prevention expenditures in the State have remained relatively stable since FY 2000 and totaled \$5.2 million in FY 2003. The SAPT Block Grant constituted 100 percent of Louisiana's prevention funding in FYs 2000-2003.

Between FYs 2000 and 2003 Block Grant prevention funding increased slightly from \$1.11 to \$1.16 per capita.

FY 2000 Prevention Expenditures by Funding Source



FY 2003 Prevention Expenditures by Funding Source



Single State Agency Expenditures for Prevention Services From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	4,965,664	100	5,027,494	100	5,165,379	100	5,191,933	100
Other Federal	0	0	0	0	0	0	0	0
State	0	0	0	0	0	0	0	0
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	4,965,664	100	5,027,494	100	5,165,379	100	5,191,933	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

*Totals may not equal 100 percent due to rounding.

Core Strategies

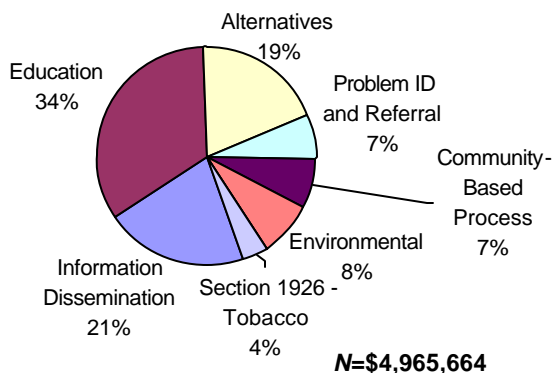
Examples of core prevention strategies supported by Block Grant funds include:

Core Strategy	Examples of Activities
Information Dissemination	Programs act as modified ATOD information clearinghouses. Regional Prevention Coordinators deliver presentations at schools, churches, agencies, and places of employment.
Education	Activities include instruction in life, social, refusal skills; delivery of parenting classes; use of youth and adult focus groups; and teleconferencing.
Alternatives	Activities include wilderness treks, ropes courses for team building, drug-free dances, summer camps, and basketball tournaments.
Community-Based Processes	Regional managers and prevention coordinators provide training and technical assistance in mobilization, resource assessment, drug abuse trends, new prevention strategies, use of the State's MIS system, and grant writing.
Environmental	Programs work with local governments on changes in ordinances regarding underage tobacco and alcohol use, conduct compliance checks, and educate merchants on sales to minors.
Problem Identification and Referral	The State provides an employee assistance program.

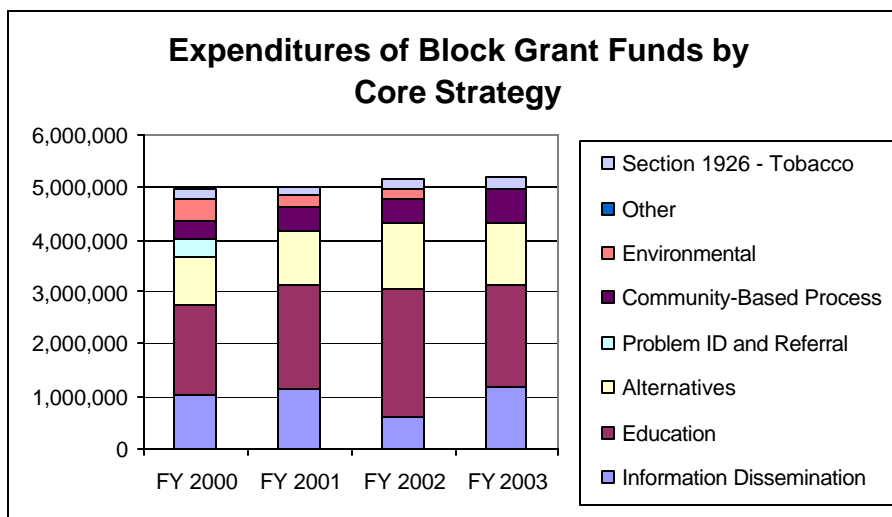
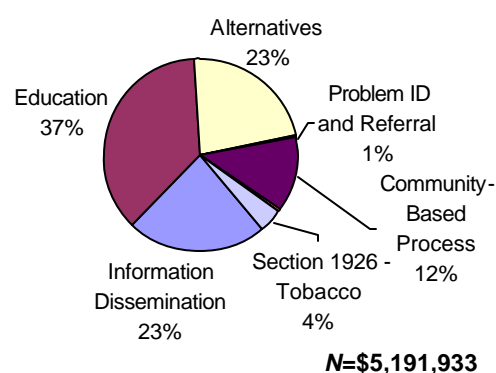
Expenditures of Block Grant Funds for Core Strategies

Block Grant funding for prevention strategies remained remarkably stable between FYs 2000 and FY 2003, when funds totaled \$5.2 million. The distribution of funds per core strategy also remained similar during that time period. In FY 2003, just over one-third of Block Grant prevention funds was spent on education, 23 percent each went toward alternative strategies and information dissemination, and 12 percent toward community-based processes.

FY 2000 Block Grant Expenditures by Core Strategy



FY 2003 Block Grant Expenditures by Core Strategy



Single State Agency Expenditures of Block Grant Funds by Core Strategy

Strategy	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Information Dissemination	1,043,477	21	1,143,447	23	617,698	12	1,194,145	23
Education	1,689,670	34	1,989,170	40	2,419,271	47	1,921,014	37
Alternatives	943,820	19	1,043,820	21	1,273,879	25	1,201,822	23
Problem ID and Referral	352,597	7	14,957	0	15,210	0	26,920	1
Community-Based Process	353,847	7	453,847	9	467,119	9	623,032	12
Environmental	397,253	8	197,253	4	167,202	3	25,000	0
Other	0	0	0	0	0	0	0	0
Section 1926 - Tobacco	185,000	4	185,000	4	205,000	4	200,000	4
Total*	4,965,664	100	5,027,494	100	5,165,379	100	5,191,933	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4a

*Totals may not equal 100 percent due to rounding.

Treatment and Rehabilitation Services

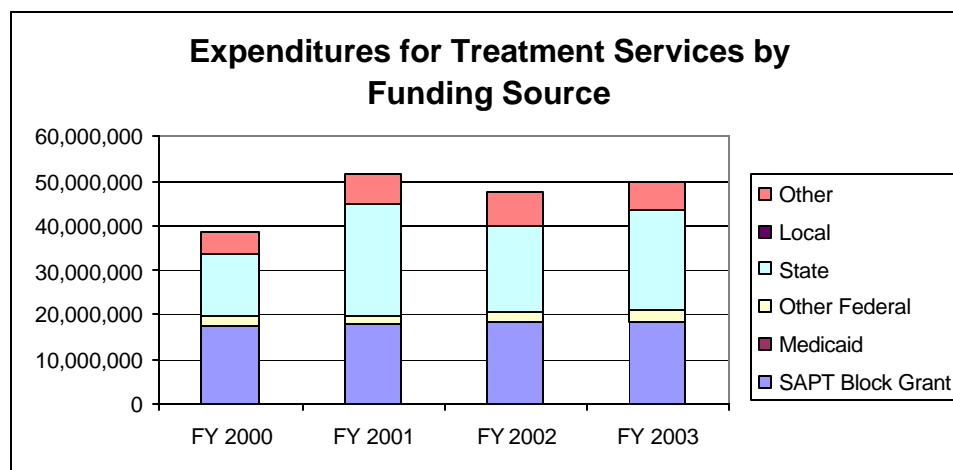
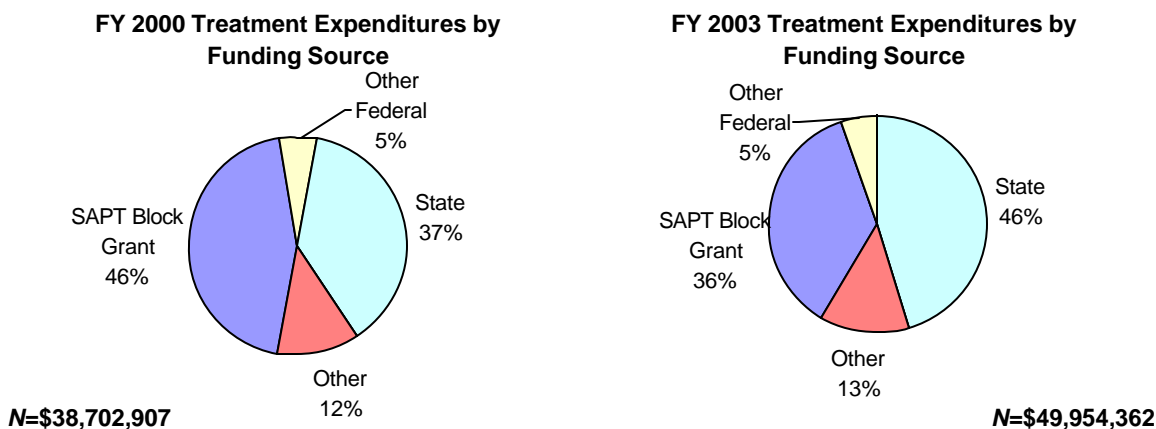
OAD conducts public forums in the regions and districts to identify treatment needs. A recurrent theme is a lack of adolescent treatment services including limited residential services for adolescents. Also, there is the need for services for persons with co-occurring disorders, training on faith-based initiatives, advocacy and legislative support, medical detoxification facilities, and halfway houses.

The State currently provides a continuum of services that includes medically supported and social detoxification programs, outpatient treatment programs, inpatient programs, a new adolescent inpatient program, drug court programs, and the IMPACT program run by the Department of Public Safety and Corrections that provides halfway house beds and aftercare services.

Treatment Funding and Expenditures

Treatment expenditures increased substantially between FYs 2000 and 2003 from \$38.7 to \$50 million. In FY 2003, the State provided the largest proportion (46 percent) of treatment funding, the Block Grant provided 36 percent, other Federal funding provided 5 percent, and other sources provided 13 percent. By contrast, in FY 2000 the Block Grant provided the largest proportion of treatment funding, followed by the State.

Block Grant treatment funding between FYs 2000 and 2003 increased steadily from \$3.89 per capita to \$4.05 per capita.



Single State Agency Expenditures for Treatment Services From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	17,379,822	45	17,596,228	34	18,078,828	38	18,171,765	36
Medicaid	0	0	0	0	0	0	0	0
Other Federal	2,083,300	5	2,068,326	4	2,172,566	5	2,663,927	5
State	14,465,437	37	25,319,402	49	19,892,420	42	22,605,911	45
Local	0	0	0	0	0	0	0	0
Other	4,774,348	12	6,455,113	13	7,377,858	16	6,512,759	13
Total*	38,702,907	100	51,439,069	100	47,521,672	100	49,954,362	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

*Totals may not equal 100 percent due to rounding.

Admissions

Louisiana's SAPT Block Grant application indicates that over 26,000 persons were admitted to treatment during FY 2002, of which most were admitted for outpatient (non-methadone), short-term residential, and free-standing residential.

Number of Persons Admitted by Type of Treatment Care

Type of Care	Total Number Admissions by Primary Diagnosis (N=26,250)		
	Alcohol Problems	Drug Problems	None Indicated
Detoxification (24-hour care)			
Hospital inpatient	492	569	3
Free-standing residential	1,949	4,169	42
Rehabilitation/Residential			
Hospital inpatient (rehabilitation)	0	0	0
Short-term residential	2,224	4,276	44
Long-term residential	235	814	53
Ambulatory (Outpatient)			
Outpatient (methadone)	0	0	0
Outpatient (non-methadone)	2,790	3,956	208
Intensive outpatient	1,575	2,690	161
Detoxification (outpatient)	0	0	0
Total	9,265	16,474	511

SOURCE: FY 2005 SAPT Block Grant Application Form 7a; Reported data for State FY 2002

Treatment Episode Data System (TEDS) data indicate more than 28,000 admissions (where at least one substance was known). Calculations (with imputation) from TEDS data show that less than 1 percent of persons admitted to treatment programs reported a psychiatric problem combined with alcohol or drug use. This rate did not vary when separating out alcohol-only abuse versus abuse of alcohol in combination with other drugs. (For a discussion of the different data sources, see Appendix D: Methodology.)

Percent of Admissions with a Psychiatric Problem by Primary Diagnosis

Admissions	2002	
	Admissions Where at Least One Substance Is Known	% with Psychiatric Problem*
Alcohol only	4,402	0.2
Alcohol in combination with other drugs	24,102	0.3
Total	28,504	0.3

SOURCE: Treatment Episode Data Set, 2002

*Values are imputed for admission records with missing information on other psychiatric diagnoses.

According to the National Survey of Drug Use and Health, 265,000 persons aged 12 and older (7.3 percent of Louisiana's population) needed, but did not receive, treatment for alcohol use and 104,000 persons (2.9 percent) needed, but did not receive, treatment for illicit drug use in Louisiana.

Treatment Gap by Age Group

Measure	% 12 and older	% 12–17	% 18–25	% 26 and older
Needing but not receiving treatment for alcohol use	7.34	5.09	16.67	5.81
Needing but not receiving treatment for illicit drug use	2.89	4.25	6.77	1.90

SOURCE: National Survey on Drug Use and Health; combined data for 2002 and 2003

State Needs Assessment Information

Louisiana, with assistance from a contractor, developed its own needs assessment methodology in 1999. The State has used these methods since that time. Findings for Louisiana's State fiscal year 2004 are shown in the following table.

Identified vs. Unmet Need

Service Type	Identified Need*	Need Met by Admissions (SFY 2004)	% in Need of Treatment
Adults	318,857	30,204 (10%)	90%
Adolescents	56,702	2,387 (5%)	95%
All Admissions	375,559**	32,591 (9%)	91%

*State of Louisiana: Integrated Population Estimates of Substance Abuse Treatment Needs (Herman-Stahl, Kuo, Moore, Teagle, Rachal, Becnel, Simmons, & Duffy, 1999)

**This number includes 74,400 persons (adults and adolescents) identified in need of treatment for gambling, of which 1,215 (2%) were admitted into treatment.

Resource Development Activities

Planning and Needs Assessment

The Governor's Commission on Addictive Disorders, a 13-member body selected by the Governor, (1) advises OAD concerning State policies for alcohol and drug abuse, (2) recommends an annual State plan that sets forth proposed policy and programs, (3) serves as the liaison among State and local governmental entities concerning substance abuse prevention and treatment, and (4) reports to the Governor, Secretary of the Department of Health and Hospitals, and legislative bodies. A Drug Policy Control Board established by the legislature advises elected officials regarding needed resources. An Interagency Coordinating Council and Children's Cabinet Youth Commission support the delivery of services for children and their families among State agencies.

To distribute new prevention and treatment funds OAD combines the results of State treatment needs assessment studies and the CSAP prevention needs assessment and risk and protective factors data gathered through the Communities That Care (CTC) youth survey. Historical funding and input from regional managers and public forums are used to determine allocations for existing programs.

To address the need for services for individuals with co-occurring disorders, OAD continues its partnership with the Office of Mental Health. Input from participants in public forums in 2004 identified the need for services for persons with co-occurring disorders as one of the top five issues in the State. To address this need for services, OAD collaborated with OMH and was awarded a Co-occurring State Infrastructure Grant (COSIG) through SAMHSA.

Evaluation

OAD monitors program compliance by conducting executive staff meetings and quarterly meetings with regional managers. It generates special reports that focus on utilization, productivity, and MIS data. A peer review program is in place to ensure and enhance the quality of treatment services by sharing programmatic and clinical expertise across regional administrations, programs, and profession disciplines, and to identify strengths and weaknesses in the service delivery system. A summary report of peer review findings and recommendations is sent to each program and OAD. In addition, there are quarterly OAD onsite inspections of treatment programs and quarterly program activity reports. Treatment programs and facilities are reviewed annually to determine if they meet licensure standards.

Training and Assistance

OAD coordinates workgroups with Louisiana colleges and universities, the Louisiana State Board of Certification for Substance Abuse Counselors, and the Gulf Coast Addiction Technology Transfer Center to address the educational needs of counselors and prevention professionals. Education and training services are provided by the Southwest CAPT, colleges and universities, and OAD.

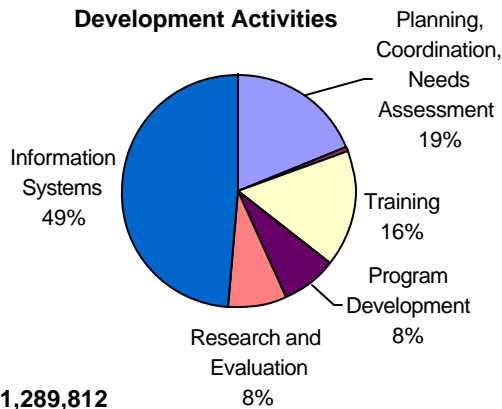
OAD delivers intense training and technical assistance to individual regions on an ongoing basis. The training and assistance is provided in the areas identified by a needs assessment. Examples of training provided to staff include prevention research, planning and evaluation, and contract development.

Texas Christian University conducted a statewide study of the impact of training on clinical practice. It provides outcome data and the affects the extent to which clinicians adopt co-occurring best practices and solution-focused therapy into direct practice. The study also assesses elements that affect adoption and influence outcomes.

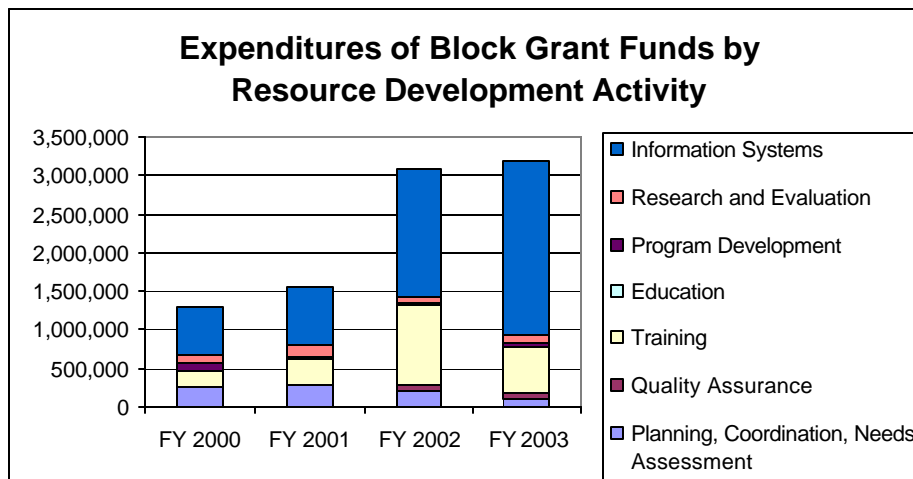
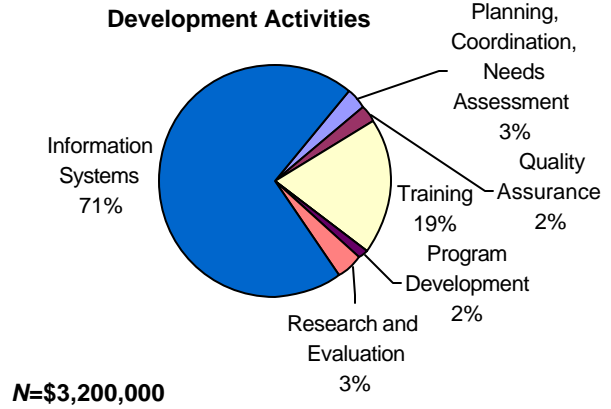
Expenditures of Block Grant Funds for Resource Development Activities

Between FYs 2000 and 2003, Block Grant expenditures on resource development activities more than doubled (from \$1.3 to \$3.2 million). During that time period, information systems strategies received the most funds, but the proportions differed—49 percent in FY 2000 compared with 71 percent in FY 2003.

FY 2000 Block Grant Expenditures on Resource Development Activities



FY 2003 Block Grant Expenditures on Resource Development Activities



Single State Agency Expenditures of Block Grant Funds by Resource Development Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Planning, Coordination, Needs Assessment	249,000	19	275,000	18	208,000	7	100,000	3
Quality Assurance	5,000	0	10,000	1	85,000	3	70,000	2
Training	205,000	16	320,000	21	1,016,000	33	600,000	19
Education	0	0	0	0	0	0	0	0
Program Development	100,000	8	30,000	2	20,000	1	50,000	2
Research and Evaluation	100,000	8	150,000	10	88,000	3	110,000	3
Information Systems	630,812	49	770,000	50	1,660,000	54	2,270,000	71
Total*	1,289,812	100	1,555,000	100	3,077,000	100	3,200,000	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4b
 *Totals may not equal 100 percent due to rounding.

Discretionary Funding

Center for Substance Abuse Prevention

The Center for Substance Abuse Prevention (CSAP) awarded \$1 million in discretionary funds for prevention in FY 2004. Most (5 of the 7) awards went to drug-free communities.

Center for Substance Abuse Prevention Discretionary Awards for FY 2004

CSAP Discretionary Awards	Number of Awards	Total \$ Amount
CSAP 2004 Earmarks	1	298,230
Drug Free Communities	5	75,000
HIV/AIDS Cohort 4 Services	1	350,000
Total	7	1,070,514

SOURCE: www.samhsa.gov

Center for Substance Abuse Treatment

The Center for Substance Abuse Treatment (CSAT) awarded a total of nearly \$10 million in discretionary funds for treatment in FY 2004. The majority of funds (\$7.6 million) went toward Access to Recovery (ATR) grants.

Center for Substance Abuse Treatment Discretionary Awards for FY 2004

CSAT Discretionary Awards	Number of Awards	Total \$ Amount
State Data Infrastructure	1	100,000
CSAT 2004 Earmarks	1	70,581
Access to Recovery	1	7,591,723
Targeted Capacity - HIV/AIDS	2	911,948
Treatment of Persons with Co-Occurring Substance Related and Mental Disorders	1	1,095,298
Strengthening Access and Retention	1	197,179
Total	7	9,966,729

SOURCE: www.samhsa.gov