OHIO

State SSA Director

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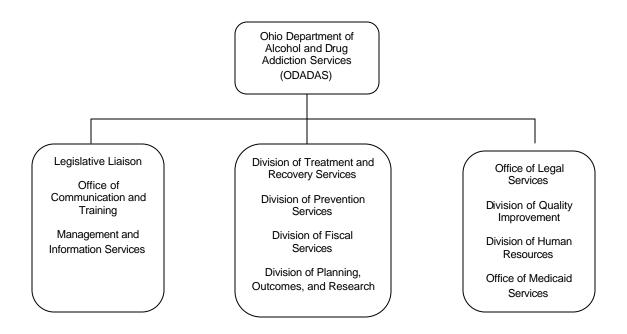
Structure and Function



Ohio's alcohol and other drug services system is composed of the Ohio Department of Alcohol and Drug Addiction Services (ODADAS), 50 community boards, known as the Alcohol and Drug Addiction Services (ADAS) and Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Boards, and over 900 local programs. ODADAS is the designated Single State Agency that provides statewide leadership in establishing a high quality addiction, prevention, treatment, and recovery services system of care

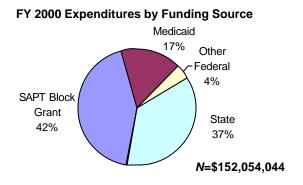
that is effective, accessible, and valued by all Ohioans. To achieve this mission, ODADAS plans, initiates, and coordinates an extensive system of services. ODADAS, by statute (Am. Sub. H.B. 317), coordinates the alcohol and other drug services of State departments, the criminal justice system, law enforcement, the legislature, local programs, and prevention and treatment professionals.

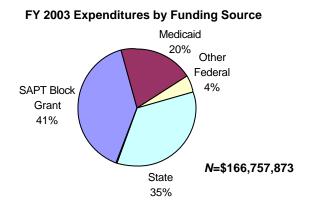
Single State Agency Structure

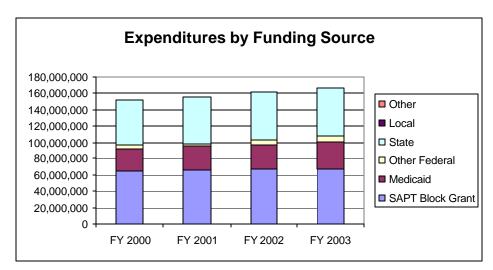


Single State Agency Funding Overview

SSA funding in Ohio increased between FYs 2000 and 2003 from \$152.1 to \$167 million. In FY 2003 the Block Grant provided the largest portion (41 percent) of total funds, followed by the State (at 35 percent), Medicaid (at 20 percent), and other Federal sources (at 4 percent). These proportions were similar to those in FYs 2000, 2001, and 2002.







Single State Agency Expenditures From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
Tunding Source	\$ Spent	%						
SAPT Block Grant	65,062,200	43	65,872,337	42	66,599,900	41	66,942,269	40
Medicaid	25,567,219	17	29,079,448	19	29,591,089	18	34,174,236	20
Other Federal	5,897,284	4	4,159,123	3	7,149,151	4	7,355,204	4
State	55,527,341	37	55,971,106	36	58,834,091	36	58,286,164	35
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	152,054,044	100	155,082,014	100	162,174,231	100	166,757,873	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

In FY 2003 most (78 percent) of the SSA expenditures in Ohio were spent on are treatment services, followed by prevention services (15 percent), and administration costs (6 percent). This distribution was similar to that in FYs 2000 through 2002.

FY 2000 Expenditures by Activity

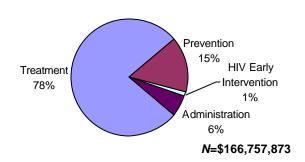
Treatment 78%

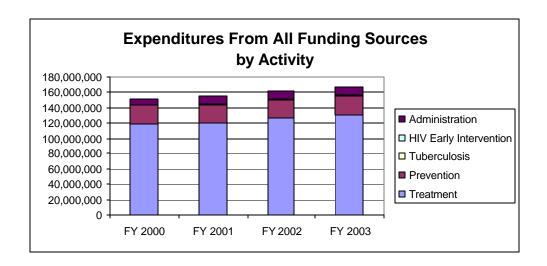
Prevention 16%

Administration 6%

N=\$152,054,044

FY 2003 Expenditures by Activity





Single State Agency Expenditures From All Funding Sources by Activity

Activity	FY 2000		FY 2001	l	FY 2002	:	FY 2003	3
Activity	\$ Spent	%						
Treatment and Rehabilitation	118,827,087	78	119,831,763	77	126,905,199	78	130,209,265	78
Alcohol Treatment	0	0	0	0				
Drug Treatment	0	0	0	0				
Prevention	24,509,613	16	23,305,869	15	22,830,749	14	24,806,999	15
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	1,924,036	1	1,886,539	1	1,848,808	1
Administration	8,717,344	6	10,020,346	6	10,551,744	7	9,892,801	6
Total*	152,054,044	100	155,082,014	100	162,174,231	100	166,757,873	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.

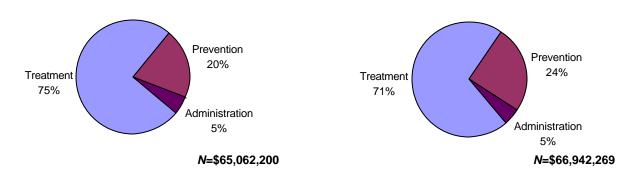
Expenditures of Block Grant and State Funds

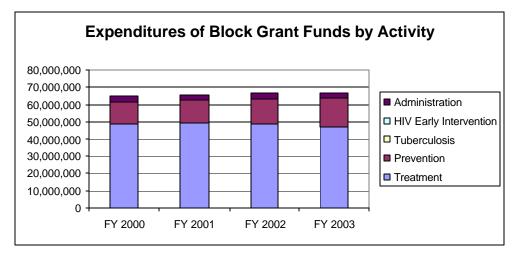
Expenditures of Block Grant Funds

Total Block Grant expenditures in Ohio remained relatively stable over the past several years, ranging from a low of \$65 million in FY 2000 to a high of \$67 million in FY 2003. The distribution of these funds was stable during this time period. In FY 2003, treatment received the majority (71 percent) of Block Grant funds, prevention services received about one-quarter, and administration received 5 percent.

FY 2000 Block Grant Expenditures by Activity

FY 2003 Block Grant Expenditures by Activity





Single State Agency Expenditures of Block Grant Funds by Activity

Activity	FY 2000)	FY 200	1	FY 2002	2	FY 2003	
Activity	\$ Spent	%						
Treatment and Rehabilitation	48,730,057	75	49,259,605	75	49,047,183	74	47,461,285	71
Alcohol Treatment	0	0	0	0				
Drug Treatment	0	0	0	0				
Prevention	13,079,032	20	13,319,115	20	14,222,722	21	16,270,812	24
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	3,253,111	5	3,293,617	5	3,329,995	5	3,210,172	5
Total*	65,062,200	100	65,872,337	100	66,599,900	100	66,942,269	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.

Expenditures of State Funds

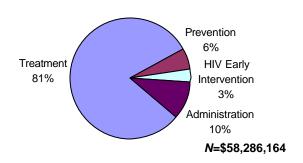
Between FYs 2000 and 2003 State expenditures for alcohol, tobacco, and other drug (ATOD) services in Ohio increased from \$55.5 to \$58.3 million. Treatment as a proportion of total expenditures increased from 76 to 81 percent during this time period, prevention's proportion declined from 14 to 6 percent, and administration's proportion remained stable at 10 to 11 percent of the total.

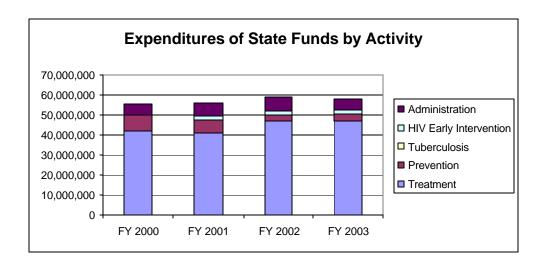
FY 2000 State Expenditures by Activity

Treatment 76%

Administration 10%

FY 2003 State Expenditures by Activity





N=\$55,527,341

Single State Agency Expenditures of State Funds by Activity

Activity	FY 2000)	FY 200	1	FY 2002		FY 200	FY 2003	
Activity	\$ Spent	%							
Treatment and Rehabilitation	42,331,174	76	41,175,019	74	47,334,992	80	47,325,308	81	
Alcohol Treatment	0	0	0	0					
Drug Treatment	0	0	0	0					
Prevention	7,853,986	14	6,435,663	11	3,011,445	5	3,263,239	6	
Tuberculosis	0	0	0	0	0	0	0	0	
HIV Early Intervention	0	0	1,924,036	3	1,886,539	3	1,848,808	3	
Administration	5,342,181	10	6,436,388	11	6,601,115	11	5,848,809	10	
Total*	55,527,341	100	55,971,106	100	58,834,091	100	58,286,164	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

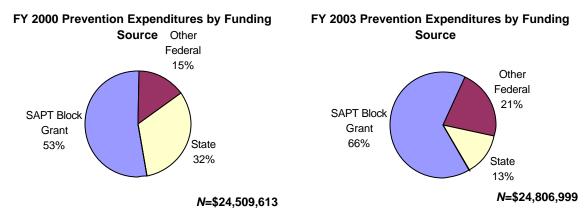
ODADAS distributes primary prevention funds to the 50 local boards. Based on community prevalence, needs, and priorities each board contracts with local service providers for ATOD prevention services. ODADAS funds community efforts in primary prevention, such as components of the Urban Minority Alcoholism and Drug Abuse Outreach Programs and special grant initiatives. It also provides training opportunities for Ohio's prevention providers and youth.

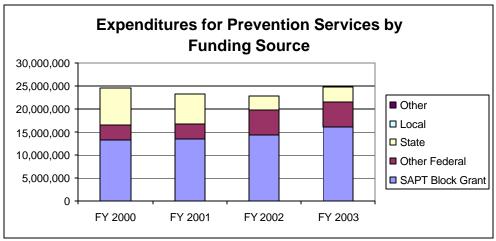
In 2002, the State received a State Incentive Grant (SIG) from the Center for Substance Abuse Prevention (CSAP). ODADAS manages the \$3- million award to develop and implement a comprehensive substance abuse prevention strategy to optimize the use of all funding streams and resources and to support implementation of evidence-based prevention planning processes and programs. The evidence-based interventions consist of 12 different youth- and family-focused strategies (e.g., Athena, Parenting Wisely) and 2 environmental strategies (e.g., Communities Mobilizing for Change on Alcohol) being implemented in single communities, plus 5 other multicommunity interventions (e.g., LifeSkills Training, All Stars).

Prevention Funding and Expenditures

Prevention funding in Ohio remained relatively stable between FYs 2000 and 2003, ranging from \$22.8 to \$24.8 million. During this time period the Block Grant's proportion of prevention funding increased from 53 to 66 percent as did the proportion of other Federal sources (from 15 to 21 percent). By contrast, the State's proportion of the total declined from 32 to 13 percent.

Block Grant funding per capita for prevention services in Ohio increased steadily from FYs 2000 through 2002, from \$1.15 to \$1.25. In FY 2003 per capita expenditures increased further to \$1.42.





Single State Agency Expenditures for Prevention Services From All Funding Sources

Funding Source	FY 2000)	FY 200	1	FY 2002 FY 2		FY 200	3
r unumg oource	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	13,079,032	53	13,319,115	57	14,222,722	62	16,270,812	66
Other Federal	3,576,595	15	3,551,091	15	5,596,582	25	5,272,948	21
State	7,853,986	32	6,435,663	28	3,011,445	13	3,263,239	13
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	24,509,613	100	23,305,869	100	22,830,749	100	24,806,999	100

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

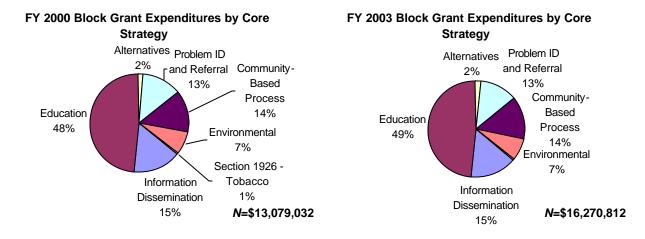
Core Strategies

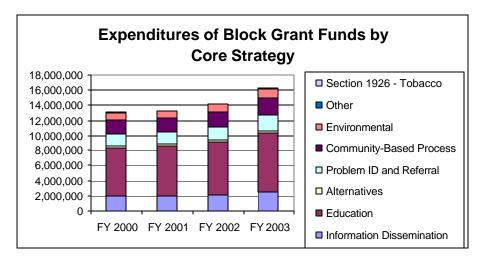
Examples of core prevention strategies supported by SAPT Block Grant funds include:

Core Strategy	Examples of Activities
Information Dissemination	Strategies include information for tobacco vendors on health concerns of tobacco use and State law regarding sales to minors and the Ohio Resource Network for Safe and Drug-Free Schools (the Regional Alcohol and Drug Awareness Resources [RADAR] site, and six satellite centers). Strategies also provide support to local grantees for speakers' bureaus, health/community fairs, and media campaigns.
Education	The Local Teen Institute provides programs for middle and high school youth. Other activities include medication misuse prevention programs for senior citizens. Head Start staff and administrators are trained about ways to integrate ATOD prevention information into the Head Start curriculum.
Alternatives	Community-based organizations provide afterschool prevention programs, mentoring, and tutorial programming for youth.
Community-Based Processes	Ohio Violence Prevention Process provides skill-building trainings for adults, and local Boards are encouraged to provide seed money to community-based organizations. Two youth conferences (Teen Institute [TI] and Junior TI) and two adult conferences (Ohio Drug and Alcohol Studies Institute and the Ohio Prevention Education Conference) are held annually.
Environmental	Ohio Parents for Drug Free Youth provide statewide training and technical assistance to 42 Ohio colleges and universities on high-risk drinking prevention and program development. ODADAS provides support to 14 drug-free community coalitions.
Problem Identification and Referral	Six Prevention at Work programs build drug-free workplace programming. The programs collaborate with a county job and family services agency and a shelter to identify individuals whose behaviors can be reversed through education.

Expenditures of Block Grant Funds for Core Strategies

Block Grant funding for prevention activities in Ohio increased between FYs 2000 and 2003 from \$13.1 to \$16.3 million. The allocation of funds remained similar during that time period with nearly half going toward education-related services.





Single State Agency Expenditures of Block Grant Funds by Core Strategy

Strategy	FY 200	0	FY 2001		FY 2002		FY 2003	
Strategy	\$ Spent	%						
Information								
Dissemination	1,983,202	15	2,032,497	15	2,160,264	15	2,471,948	15
Education	6,321,294	48	6,478,418	49	6,885,666	48	7,879,134	48
Alternatives	278,116	2	285,029	2	302,947	2	346,656	2
Problem ID and								
Referral	1,659,600	13	1,700,851	13	1,807,770	13	2,068,597	13
Community-Based								
Process	1,788,261	14	1,832,710	14	1,947,919	14	2,228,966	14
Environmental	965,609	7	989,610	7	1,051,819	7	1,203,577	7
Other	0	0	0	0	0	0	0	0
Section 1926 - Tobacco	82,950	1	0	0	66,337	0	71,934	0
Total*	13,079,032	100	13,319,115	100	14,222,722	100	16,270,812	100

SOURCE: FY 2003-2006 SAPT Block Grant Applications, Form 4a

^{*} Totals may not equal 100 percent due to rounding.

Treatment and Rehabilitation Services

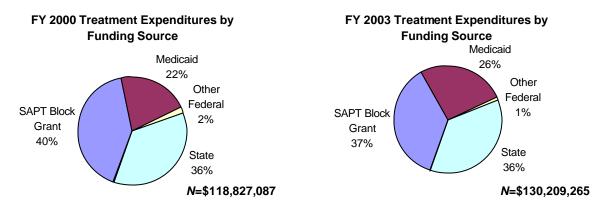
ODADAS' goal is to fund services proportionate to the State's prevalence of alcohol and other drug problems and to the need for alcohol and other drug prevention and treatment services. The community boards determine local needs, plan, contract for services, and monitor local programs. The majority of funds are distributed on a modified per capita basis. Exceptions to this approach are for initiatives for populations with critical treatment needs, i.e., pregnant women and addicted offenders. As a result of these initiatives, ODADAS is actively involved at the State level with welfare reform and in State sentencing reform.

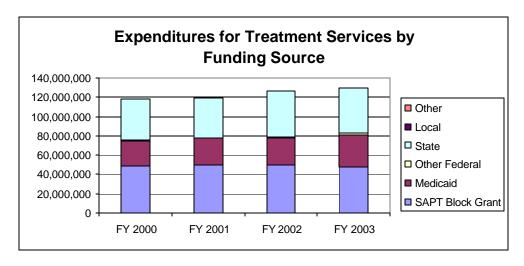
A priority area for ODADAS is the provision of treatment services for pregnant and parenting women. Continuing efforts are also made to establish improved access to and accountability for offender treatment. ODADAS makes treatment available to offenders through the Treatment Alternatives to Street Crime, drug court programs, and partnership with the Ohio Supreme Court.

Treatment Funding and Expenditures

Treatment funding in Ohio increased between FYs 2000 and 2003 from \$118.8 to \$130.2 million. The distribution of funds during this time remained fairly stable. In FY 2003, the largest portion of funds came from the Block Grant (at 37 percent of the total) and the State (at 36 percent), followed by Medicaid (at 26 percent).

Between FYs 2000 and 2002 Block Grant expenditures per capita on treatment in Ohio remained stable, ranging from \$4.29 to \$4.33. In FY 2003, Block Grant expenditures on treatment and rehabilitation declined to \$4.15 per capita.





Single State Agency	Expenditures for	Treatment Services	From All Funding Sources

Funding Source	FY 2000	FY 2000			FY 2002		FY 2003	3
i unumg source	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	48,730,057	41	49,259,605	41	49,047,183	39	47,461,285	36
Medicaid	25,567,219	22	29,079,448	24	29,591,089	23	34,174,236	26
Other Federal	2,198,637	2	317,691	0	931,935	1	1,248,436	1
State	42,331,174	36	41,175,019	34	47,334,992	37	47,325,308	36
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	118,827,087	100	119,831,763	100	126,905,199	100	130,209,265	100

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

Admissions

Ohio's SAPT Block Grant application indicates that over 130,000 persons were admitted to treatment during FY 2002, of which most were admitted for outpatient (non-methadone) treatment services.

Number of Persons Admitted by Type of Treatment Care

Type of Care	Total Number /	Admissions by Prim (<i>N</i> =130,894)	ary Diagnosis			
Type of our	Alcohol Problems	Drug Problems	None Indicated			
Detoxification (24-hour care)						
Hospital inpatient	117	212	3			
Free-standing residential	1,470	2,606	218			
Rehabilitation/Residential						
Hospital inpatient (rehabilitation)	0	0	0			
Short-term residential	1,154	2,406	0			
Long-term residential	405	673	0			
Ambulatory (Outpatient)						
Outpatient (methadone)	10	2,562	492			
Outpatient (non-methadone)	42,839	44,121	13,568			
Intensive outpatient	7,155	9,037	937			
Detoxification (outpatient)	281	628	0			
Total	53,431	62,245	15,218			

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

Treatment Episode Data Set (TEDS) data indicate more than 55,000 admissions (where at least one substance is known), of which nearly 14,000 were for alcohol only. Calculations (with imputation) from TEDS data show that approximately 27 percent of persons admitted to treatment programs reported a psychiatric problem combined with alcohol or drug use. This rate varied slightly 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.)

^{*}Totals may not equal 100 percent due to rounding.

Percent of Admissions with a Psychiatric Problem by Primary Diagnosis

	2002					
Admissions	Admissions Where at Least One Substance Is Known	% with Psychiatric Problem*				
Alcohol only	13,836	23.0				
Alcohol in combination with other drugs	41,470	28.6				
Total	55,306	27.2				

According to the National Survey of Drug Use and Health, 702,000 persons aged 12 and older (7.5 percent of Ohio's population) needed, but did not receive, treatment for alcohol use and 245,000 persons (2.6 percent) needed, but did not receive, treatment for illicit drug use in Ohio.

Treatment Gap by Age Group

Measure	% 12 and older	% 12–17	% 18–25	% 26 and older
Needing but not receiving treatment for alcohol use	7.47	5.59	17.69	5.97
Needing but not receiving treatment for illicit drug use	2.61	5.24	7.76	1.36

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

SOURCE: Treatment Episode Data Set, 2002
*Values are imputed for admission records with missing information on other psychiatric diagnoses.

Resource Development Activities

Planning and Needs Assessment

ODADAS prepared a comprehensive statewide alcohol and drug addiction services plan (Five-Year State Plan, SFYs 2004-2008) that provides the State and its system of boards and local providers with strategic direction. The plan describes current policy concerns and priorities and performance objectives that support the strategic direction. The Five-Year Plan was developed with the assistance of a wide variety of constituents representing multiple service systems (e.g., education, health, child welfare, housing) as well as departments and agencies. The Governor's Advisory Council on Alcohol and Drug Addiction Services, comprising State departments, local boards, providers, families, and the judiciary, reviewed and approved the plan. Ohio's community boards are also required to assess community needs for alcohol and other drug prevention and treatment services, establish priorities, develop plans, and contract with local programs to provide services.

Information and data used to assist in the development of performance objectives and priorities for the Five-Year Plan were obtained from multiple sources. These sources include the Ohio Substance Abuse Monitoring Network, PRIDE and Youth Risk Behavior Survey data, ODADAS' Multi-Agency Community Services Information System (MACSIS), ADAMHS/ADAS Boards' community plans, and regional focus groups and town meetings. MACSIS provides trend information about clients served in Ohio's publicly funded treatment system. It provides data about admissions, client demographics, and drug of choice. MACSIS also provides data on service delivery based on the six core prevention strategies and the Institute of Medicine's categories of universal, selected, and indicated.

Evaluation

ODADAS assesses and strives to improve the quality and appropriateness of services delivered by providers through independent peer review, review of MACSIS data, and other means. Each of Ohio's boards uses independent peer review to assess the quality of treatment services. Board financial records are examined as part of ODADAS' compliance review process.

ODADAS provides requires all Board-contracted treatment agencies to use the ODADAS protocol for Levels of Care placement criteria for adult and youths and requires all treatment programs to be certified by ODADAS and have a quality assurance program.

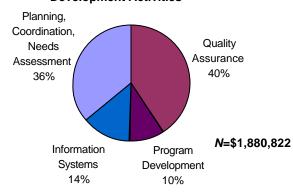
Training and Assistance

Alcohol and other drug prevention and treatment service providers are offered professional development and training opportunities by ODADAS. These opportunities include the annual Ohio Drug and Alcohol Studies Institute that featured more than 70 professional development sessions and continuing education credits; the Outcome Framework Initiative to create an outcome management infrastructure; and the Ohio Prevention Education Conference. Outcome core trainings are held for prevention and treatment program staff with followup consultations for participating agencies. Statewide training for staff in the Public Children's Services Agency are held and focused on confidentiality. Cross-Disciplinary training provides criminal justice and substance abuse treatment professionals with instruction to foster working relationships between the systems. New trainings in FY 2004 included the Faith in the AOD System conference, Medication-Assisted Treatment conference, and Fetal Alcohol Spectrum Disorders Town Hall meeting.

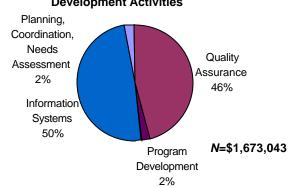
Expenditures of Block Grant Funds for Resource Development Activities

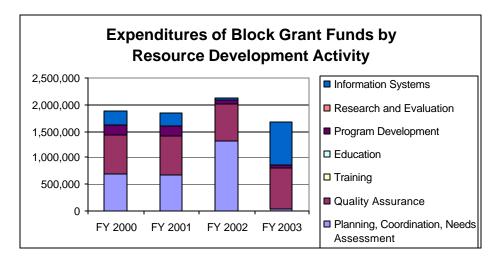
Between FYs 2000 and 2003 Block Grant funding for resource development activities in Ohio declined slightly from \$1.9 to \$1.7 million. The distribution of funds changed somewhat during this time period. In FY 2000, most of the expenditures went toward quality assurance (40 percent) and planning, coordination, and needs assessment (36 percent). In FY 2003, while quality assurance activities still received nearly half of funds (46 percent), information systems received 50 percent of total expenditures, and planning, coordination, and needs assessment's activities received only 2 percent.

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	%						
Planning, Coordination, Needs Assessment	682,352	36	675,310	36	1,297,015	61	40,544	2
Quality Assurance	758,174	40	735,109	40	725,707	34	770,742	46
Training	0	0	0	0	0	0	0	0
Education	0	0	0	0	0	0	0	0
Program Development	184,850	10	184,850	10	60,238	3	40,545	2
Research and Evaluation	0	0	0	0	0	0	0	0
Information Systems	255,446	14	255,446	14	40,450	2	821,212	50
Total*	1,880,822	100	1,850,715	100	2,123,410	100	1,673,043	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

Center for Substance Abuse Prevention (CSAP) discretionary funding for Ohio prevention efforts in FY 2004 totaled \$6.2 million. Most of the grants (20 of the 28) went toward drug-free communities. The largest single award was a State Incentive Cooperative Agreement for \$3 million.

Center for Substance Abuse Prevention Discretionary Awards for FY 2004

CSAP Discretionary Grant	Number of Awards	Total \$ Amount
CSAP 2004 Earmarks	1	497,050
Drug Free Communities	20	1,743,773
Drug Free Communities Mentoring	4	261,145
HIV/AIDS Cohort 3 Services	1	349,328
Prevention of Methamphetamine and Inhalant Use	1	350,000
State Incentive Cooperative Agreements	1	3,000,000
Total	28	6,201,296

SOURCE: www.samhsa.gov

Center for Substance Abuse Treatment

In FY 2004, the Center for Substance Abuse Treatment (CSAT) discretionary funding for treatment in Ohio totaled nearly \$7.7 million. Awards included grants for Targeted Capacity-HIV/AIDS, Adult Juvenile and Family Drug Courts, and Rehabilitation and Restitution.

Center for Substance Abuse Treatment Discretionary Awards for FY 2004

CSAT Discretionary Grant	Number of Awards	Total \$ Amount
Adult Juvenile and Family Drug Courts	3	1,200,000
Effective Adolescent Treatment	2	497,134
Homeless Addictions Treatment	2	766,354
Recovery Community Support - Recovery	1	350,000
Rehabilitation and Restitution	1	1,350,000
Strengthening Communities - Youth	1	750,000
Targeted Capacity Expansion	2	987,824
Targeted Capacity - HIV/AIDS	4	1,760,747
Total	16	7,662,059

SOURCE: www.samhsa.gov