OKLAHOMA

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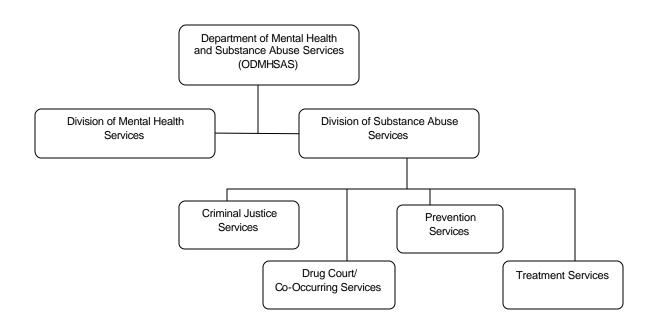
Structure and Function



The Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) is the State's Single State Agency (SSA) for substance abuse services. A governing board provides oversight regarding function and activities related to the care, treatment, and recovery of persons suffering from mental illness and substance abuse.

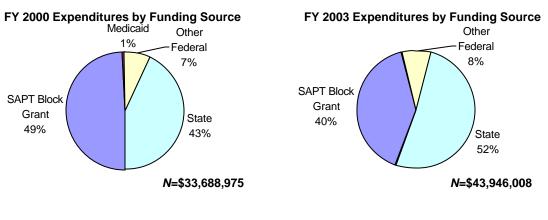
ODMHSAS provides services through a statewide network of programs. Programs for individuals dependent on alcohol or other drugs range from outpatient counseling to extended residential treatment. ODMHSAS also supports prevention programs to reduce the occurrence of substance abuse among young people. Area Prevention Resource Centers are funded to offer education and assistance to schools, parents, and community groups.

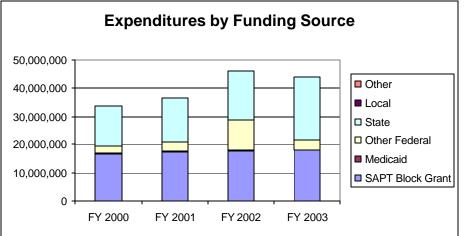
Single State Agency Structure



Single State Agency Funding Overview

Total SSA funding for drug and alcohol abuse services in Oklahoma increased between FYs 2000 and 2003 from \$33.7 to \$43.9 million. In FY 2003, more than half (52 percent) of the funding came from the State (up from 43 percent in FY 2000), followed by 40 percent from the Block Grant (down from 49 percent in FY 2000), and 8 percent from other Federal sources.





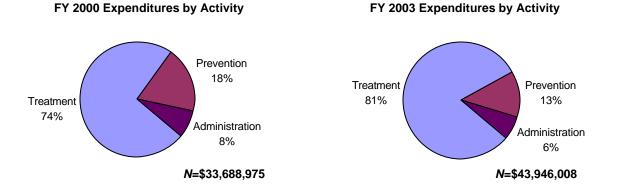
Single State Agency Expenditures From All Funding Sources

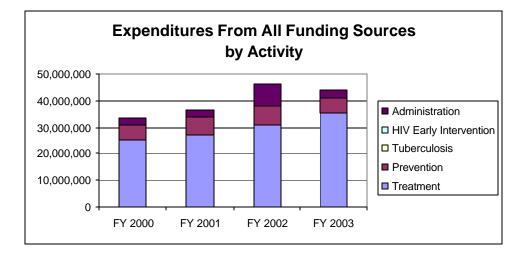
Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
r unung Source	\$ Spent	%						
SAPT Block Grant	16,559,798	49	17,257,097	47	17,697,861	38	17,788,840	40
Medicaid	188,449	1	189,727	1	189,727	0	189,727	0
Other Federal	2,471,021	7	3,352,843	9	10,901,470	24	3,402,519	8
State	14,469,707	43	15,910,330	43	17,355,772	38	22,564,922	51
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	33,688,975	100	36,709,997	100	46,144,830	100	43,946,008	100

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

Activities and Expenditures From All Funding Sources

Of the \$43.9 million in FY 2003 total SSA funds, most (81 percent) were allocated for treatment services, 13 percent for prevention services, and 6 percent for administration costs. This distribution represents a change from FY 2000, when 74 percent went toward treatment services and 18 percent went toward prevention.





Single State Agency Expenditures From All Funding Sources by Activity

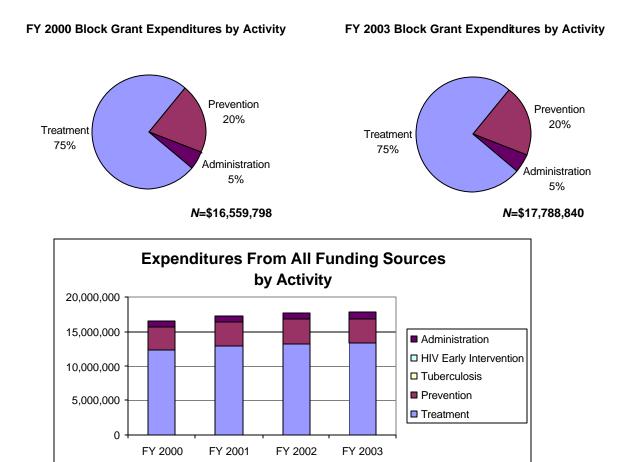
Activity	FY 2000)	FY 2001		FY 2002		FY 2003	
Activity	\$ Spent	%						
Treatment and Rehabilitation	12,462,933	37	26,835,996	73	30,915,967	67	35,627,533	81
Alcohol Treatment	6,245,984	19	0	0				
Drug Treatment	6,173,864	18	0	0				
Prevention	6,220,911	18	7,266,632	20	7,084,182	15	5,510,949	13
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	2,585,283	8	2,607,369	7	8,144,681	18	2,807,526	6
Total*	33,688,975	100	36,709,997	100	46,144,830	100	43,946,008	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.

Expenditures of Block Grant and State Funds

Expenditures of Block Grant Funds

Block Grant expenditures in Oklahoma increased between FYs 2000 and 2003 from \$16.6 to \$17.8 million. The distribution of funds was very stable during this time period: treatment received most (three-fourths) of the Block Grant expenditures, prevention services received 20 percent, and administration costs received 5 percent.



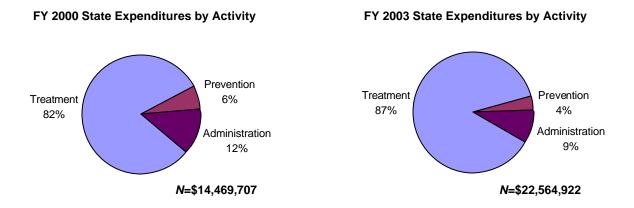
Single State Agency Expenditures of Block Grant Funds by Activity

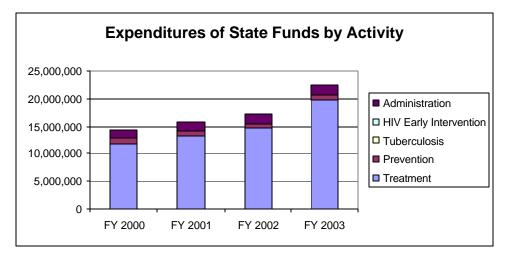
Activity	FY 2000	FY 2000		FY 2001		FY 2002		FY 2003	
Activity	\$ Spent	%							
Treatment and Rehabilitation	0	0	12,942,823	75	13,273,396	75	13,341,630	75	
Alcohol Treatment	6,245,984	38	0	0					
Drug Treatment	6,173,864	37	0	0					
Prevention	3,311,960	20	3,451,419	20	3,539,572	20	3,557,768	20	
Tuberculosis	0	0	0	0	0	0	0	0	
HIV Early Intervention	0	0	0	0	0	0	0	0	
Administration	827,990	5	862,855	5	884,893	5	889,442	5	
Total*	16,559,798	100	17,257,097	100	17,697,861	100	17,788,840	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.

Expenditures of State Funds

State expenditures for alcohol and drug abuse services increased dramatically between FYs 2000 and 2003 from \$14.5 to \$22.6 million. In FY 2003, treatment received most (87 percent) of State funds (up from 82 percent in FY 2000), administration costs received 9 percent (down from 12 percent in FY 2000), and prevention received 4 percent (down slightly from 6 percent in FY 2000).





Single State Agency Expenditures of State Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
Activity	\$ Spent	%						
Treatment and Rehabilitation	11,772,287	81	13,268,321	83	14,769,476	85	19,786,536	88
Alcohol Treatment	0	0	0	0				
Drug Treatment	0	0	0	0				
Prevention	940,127	6	897,495	6	777,243	4	860,302	4
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	1,757,293	12	1,744,514	11	1,809,053	10	1,918,084	9
Total*	14,469,707	100	15,910,330	100	17,355,772	100	22,564,922	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.

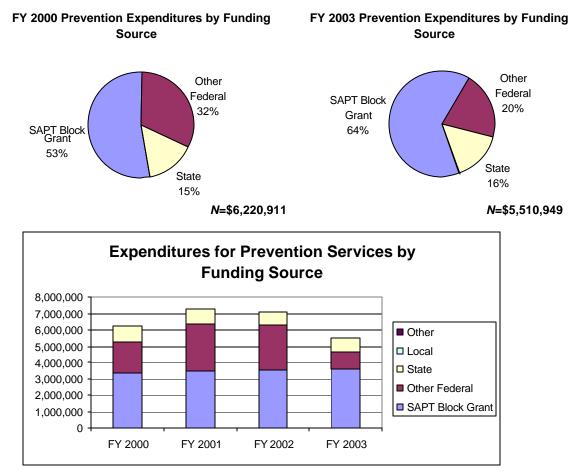
Prevention Services

ODMHSAS supports prevention programs to help young people build healthy lifestyles and acquire skills that reduce their risk of later developing alcohol or drug dependence. These programs involve training to develop strong, positive self-images, education about the dangers of alcohol and other drugs, literature and educational videos, and assistance to community groups in establishing effective organizations to fight substance abuse. To implement its prevention programs, ODMHSAS funds a network of 18 Area Prevention Resource Centers, as well as other programs offering education and assistance to schools, parents, and community groups. Three specialty centers provide services for specific populations throughout the State: the University of Oklahoma American Indian Institute, the Oklahoma State University Center for Health Sciences African American Institute, and the Latino Community Development Center. State monies fund a fourth specialty center educating Oklahomans about fetal alcohol spectrum. A mentoring program for high-risk children who are referred through the juvenile justice system is also funded through State resources.

Prevention Funding and Expenditures

Prevention funding in Oklahoma between FYs 2000 and 2002 ranged from \$6.2 to \$7 million. In FY 2003 these funds declined to \$5.5 million. The proportion of prevention funds supported by the Block Grant increased between FYs 2000 and 2003 from 53 to 64 percent of the total, while other Federal funds as a proportion of the total declined from 32 to 20 percent.

Between FYs 2000 and 2003 Block Grant prevention expenditures per capita ranged narrowly between \$0.96 and \$1.02.



Funding Source	FY 200	0	FY 2001		FY 2002		FY 2003	
	\$ Spent	%						
SAPT Block Grant	3,311,960	53	3,451,419	47	3,539,572	50	3,557,768	64
Other Federal	1,968,824	32	2,917,718	40	2,767,367	39	1,092,879	20
State	940,127	15	897,495	12	777,243	11	860,302	16
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	6,220,911	100	7,266,632	100	7,084,182	100	5,510,949	100

Single State Agency Expanditures for Provention Services From All Funding Sources

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

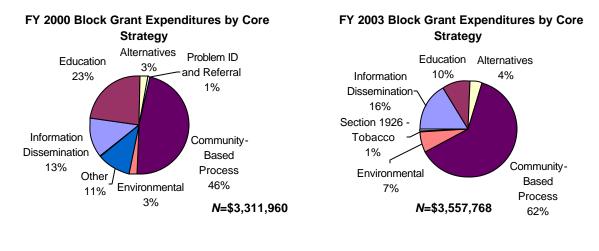
Core Strategies

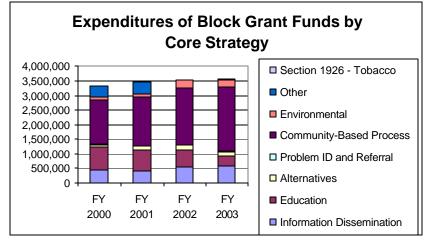
Examples of prevention strategies funded by the Block Grant include the following:

Core Strategy	Examples of Activities
Information Dissemination	The Oklahoma State University Center for Health Sciences supplements the efforts of the Partnership for a Drug-Free America that target underage alcohol use and seek support for public service announcements (PSAs).
Education	Training for teachers, counselors, volunteers, and others fosters sustainability of prevention efforts. Funding also supports the delivery of "A Pregnant Pause" education program on fetal alcohol spectrum and the delivery of the youth leadership camp 'Project Under 21' program focused on underage alcohol use.
Alternatives	The State sponsors drug-free dances and team-building activities and maintains "Teenline" for teens and young adults that provides trained volunteers to talk callers through problems and concerns.
Community-Based Processes	Activities support for community-based coalitions and training for coalitions on risk and protective factors.
Environmental	Partnerships are formed with tobacco and alcohol outlets to educate them about youth access issues and with the Oklahoma Highway Safety Office on a media campaign at football games with drinking prevention messages.
Problem Identification and Referral	The booklet the "Yellow Pages" lists statewide substance abuse prevention and treatment providers as well as mental health and domestic violence programs.
Other:	Logic models are used by community coalitions and prevention programs.

Expenditures of Block Grant Funds for Core Strategies

Block Grant funds for prevention strategies have remained relatively stable between FYs 2000 and 2003, increasing from \$3.3 to \$3.6 million. In FY 2003, community-based processes received the majority (62 percent) of Block Grant core strategy funds.





Single State Agency Expenditures of Block Grant Funds by Core Strategy

Strategy	FY 2000		FY 2001		FY 2002		FY 2003	
Strategy	\$ Spent	%						
Information Dissemination	442,939	13	412,046	12	530,935	15	569,242	16
Education	767,769	23	719,328	21	601,727	17	355,776	10
Alternatives	88,588	3	117,553	3	141,582	4	142,310	4
Problem ID and Referral	29,529	1	18,272	1	3,539	0	3,557	0
Community-Based								
Process	1,535,547	46	1,694,776	49	1,986,569	56	2,213,948	62
Environmental	88,588	3	83,444	2	247,770	7	245,485	7
Other	359,000	11	406,000	12	0	0	0	0
Section 1926 - Tobacco	0	0	0	0	27,450	1	27,450	1
Total*	3,311,960	100	3,451,419	100	3,539,572	100	3,557,768	100

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

Treatment and Rehabilitation Services

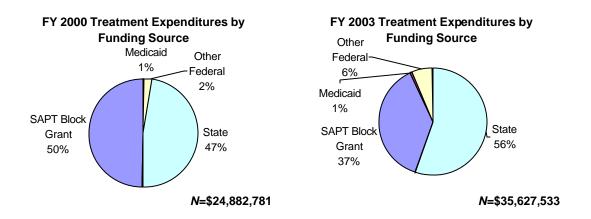
ODMHSAS contracts with private, nonprofit, certified agencies to provide detoxification, residential, halfway house, outpatient, intensive outpatient, and early intervention services. Seven ODMHSAS-operated agencies provide residential and outpatient treatment services. In addition, the University of Oklahoma Health Sciences Centers provides screening, assessment, and treatment planning for children with fetal alcohol spectrum. ODMHSAS contracts with six agencies to provide early intervention services to selected schools to work with school personnel and parents. The Department of Human Services provides screening, assessments, and outpatient substance abuse services to TANF clients and child welfare clients. The Oklahoma legislature continues to fund drug court programs. The Oklahoma Department of Corrections funds substance abuse screening and assessment, residential treatment, and other services at prisons, community correction centers, and for individuals in the probation and parole system.

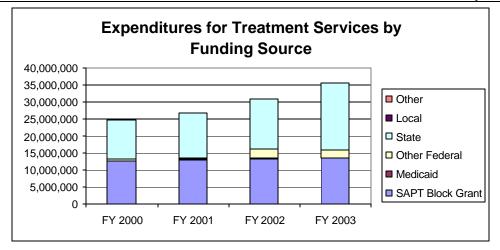
ODMHSAS set a priority on strengthening substance abuse case management to promote effective referrals and linkage for services in and outside of the substance abuse arena. An experienced case management professional is on staff to assist with this priority. Further, ODMHSAS contracts for or operates multiple programs to provide integrated co-occurring treatment services. Four agencies provide residential treatment and five provide outpatient or intensive outpatient care. A full-time staff member focuses exclusively on co-occurring services. Overall, ODMHSAS is moving toward a more integrated system of services for mental health, domestic violence, and substance abuse.

Treatment Funding and Expenditures

Funds for treatment in Oklahoma increased from \$24.9 to \$35.6 million between FYS 2000 and 2003. The State provided the majority (56 percent) of treatment funds in FY 2003, followed by the Block Grant (37 percent) and other Federal funds (6 percent). This distribution represents a shift since FY 2000 when the State provided only 47 percent of the total and the Block Grant provided half.

Between FYs 2000 and 2003 Block Grant treatment expenditures in Oklahoma increased from \$3.60 to \$3.81 per capita.





Single State Agency Expenditures for Treatment Services From All Funding Sources

Funding Source	FY 2000	FY 2000		FY 2001		2	FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	12,419,848	50	12,942,823	48	13,273,396	43	13,341,630	37
Medicaid	188,449	1	189,727	1	189,727	1	189,727	1
Other Federal	502,197	2	435,125	2	2,683,368	9	2,309,640	6
State	11,772,287	47	13,268,321	49	14,769,476	48	19,786,536	56
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
	24,882,781	100	26,835,996	100	30,915,967	100	35,627,533	100

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

Admissions

Oklahoma's SAPT Block Grant application indicates that over 22,000 persons were admitted for treatment services during FY 2002.

Number of Persons	Admitted by	/ Type of	Treatment Care
	Aumilieu Dy		

T	Total Number Admiss	sions by Primary Diag	gnosis (<i>N</i> =22,333)
Type of Care	Alcohol Problems	Drug Problems	None Indicated
Detoxification (24-hour care)			
Hospital inpatient	110	65	0
Free-standing residential	1,729	2,382	0
Rehabilitation/Residential			
Hospital inpatient (rehabilitation)	0	0	0
Short-term residential	972	2,811	92
Long-term residential	313	720	298
Ambulatory (Outpatient)			
Outpatient (methadone)	0	0	0
Outpatient (non-methadone)	3,917	8,117	780
Intensive outpatient	5	20	2
Detoxification (outpatient)	0	0	0
Total	7,047	14,114	1,172

Treatment Episode Data Set (TEDS) data indicate nearly 17,000 admissions (where at least one substance is known). Calculations (with imputation) from TEDS data show that approximately 40 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.)

	2002				
Admissions	Admissions Where at Least One Substance Is Known	% with Psychiatric Problem*			
Alcohol only	4,020	41.7			
Alcohol in combination with other drugs	12,901	39.7			
Total	16,921	40.1			

Percent of Admissions with a	Psychiatric Problem b	ov Primary Diagnosis

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, 188,000 persons aged 12 and older (6.6 percent of Oklahoma's population) needed, but did not receive treatment for alcohol use and 78,000 persons (2.7 percent) needed, but did not receive treatment for illicit drug use in Oklahoma.

Treatment Gap by Age Group

Measure	% 12 and older	% 12–17	% 18–25	% 26 and older
Needing but not receiving treatment for alcohol use	6.61	5.41	16.77	4.83
Needing but not receiving treatment for illicit drug use	2.74	4.91	7.25	1.56

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

Resource Development Activities

Planning and Needs Assessment

Oklahoma is divided into eight substate planning regions. Regional Advisory Boards are being encouraged to merge with community coalitions to involve local persons in departmental planning. Coalitions develop needs assessments in their communities to identify resources and gaps in services. They prioritize the needs and develop plans on how best to fill those gaps.

ODMHSAS conducts a series of surveys to determine the needs for substance abuse treatment among various population groups. The studies result in a series of reports. The Oklahoma State Treatment Needs Assessment Studies, Alcohol and Other Drugs report includes information on incidence, prevalence, and need. Data are collected by substate planning regions. The Provider Management Reports and Regional Provider Management Reports utilize information from the Integrated Client Information System (ICIS), which contains information used throughout the year for planning.

Prevention needs assessment data are obtained from the County-Based Inferential Indicators for Substance Abuse and Other Prevention Issues report and include social indicators such as per capita income, dropout rates, and juvenile arrest rates, among others. Other prevention data are collected through the Oklahoma Kid's Count Data Book, the Oklahoma Tobacco Survey Report, the Oklahoma Prevention Needs Assessment Survey, and the National Survey on Drug Use and Health.

Evaluation

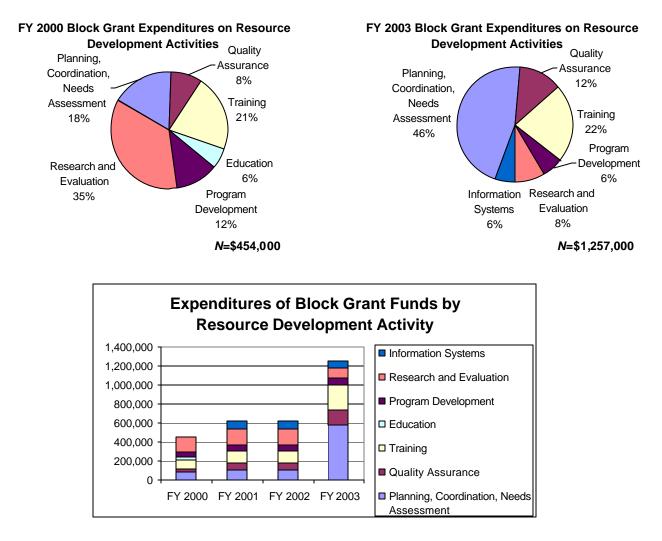
Information on treatment clients and client services is maintained in the ICIS database. Services are linked to client characteristics and clients are tracked across agencies and over time. An annual Data Book summarizes demographic information and services for clients served in ODMHSAS-funded agencies. The report is accessible through the ODMHSAS Web site. The Provider Management Reports and the Regional Provider Management Reports, using ICIS data, provide facilities and program staff with up-to-date performance indicator information. At least 5 percent of treatment programs receiving SAPT Block grant funds receive an independent peer review each year to assess and improve the quality and appropriateness of treatment services.

Training and Assistance

ODMHSAS provides continuing education for staff who provide prevention and treatment services. Training includes the annual Substance Abuse Conference. ODMHSAS also provides trainings each year for substance abuse staff through the Donahue series that includes such topics as the Addiction Severity Index, Infectious Diseases Management and Treatment, Motivational Interviewing, and Women and Addiction, among others. Prevention training programs focus on topics such as community mobilization and prevention specialist certification issues.

Expenditures of Block Grant Funds for Resource Development Activities

Block Grant expenditures on resource development activities in Oklahoma more than doubled between FYs 2000 and 2003 (from \$454,000 to \$1.3 million). In FY 2003 planning, coordination, and needs assessment activities received the largest proportion (46 percent) of resource development funds, followed by training (at 22 percent).



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	80,000	18	100,000	16	100,000	16	579,000	46
Quality Assurance	38,000	8	75,000	12	75,000	12	150,000	12
Training	95,000	21	130,000	21	130,000	21	276,000	22
Education	25,000	6	0	0	0	0	0	0
Program Development	55,000	12	60,000	10	60,000	10	75,000	6
Research and Evaluation	161,000	35	171,000	28	171,000	28	105,000	8
Information Systems	0	0	80,000	13	80,000	13	72,000	6
	454,000	100	616,000	100	616,000	100	1,257,000	100

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

Discretionary Funding

Center for Substance Abuse Prevention

The Center for Substance Abuse Prevention (CSAP) discretionary prevention funds in Oklahoma totaled \$1.7 million in FY 2004. Drug-free communities received 14 of the 17 grants and totaled nearly \$1.3 million.

CSAP Discretionary Grant	Number of Awards	Total \$ Amount
Centers for Application of Prevention Technology	1	337,588
Drug Free Communities	14	1,256,566
Drug Free Communities Mentoring	1	73,264
HIV/AIDS Cohort 2 Youth Services Cooperative Agreements	1	63,636
Total	17	1,731,054

SOURCE: www.samhsa.gov

Center for Substance Abuse Treatment

In FY 2004 Oklahoma received \$1.5 million in Center for Substance Abuse Treatment (CSAT) discretionary funds for treatment. Grants were awarded for homeless addictions treatment, pregnant/post-partum women, and State data infrastructure.

Center for Substance Abuse Treatment Discretionary Awards for FY 2004

CSAT Discretionary Grant	Number of Awards	Total \$ Amount
Homeless Addictions Treatment	2	904,513
Pregnant/Post-Partum Women	1	499,984
State Data Infrastructure	1	100,000
Total	4	1,504,497

SOURCE: www.samhsa.gov