

Office of National Drug Control Policy September 2007

Overview

According to the latest *National Survey on Drug Use and Health*, over 20 million people need - but do not receive - treatment for illicit drug or alcohol use. To help close this treatment gap, President Bush has implemented an ambitious new program that increases the availability of treatment services in the United States and helps

free drug addicts from the disease of addiction.

Launched in 2003, the Access to Recovery (ATR) program provides vouchers for treatment services as well as recovery support services. For the first time, Access to Recovery expands treatment options by including faith and community-based providers. In so doing, clients can choose a treatment program best suited to meet their unique needs. Congress has appropriated \$300 million in funding for ATR over three years.

President Bush has requested an additional \$98.2 million in the FY 2007 budget to expand the program.

What Does Access to Recovery Do?

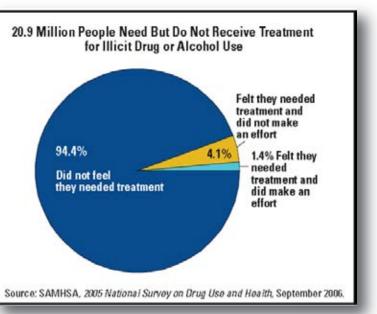
- ATR provides genuine, free, and independent client choice among eligible substance abuse clinical treatment and recovery support service providers
- ATR expands access to a comprehensive array of clinical treatment and recovery support options, including faith-based programmatic options
- ATR increases substance abuse treatment capacity

ATR: Effective at Healing Drug Users

To date, \$300 million over three years has been awarded in ATR grants to 14 States and one Tribal organization. Preliminary data regarding the program shows that the program has been a success.

As of March 31, 2007 the ATR program has:

- Provided treatment to over 170,000 people with substance abuse problems, exceeding the target of 125,000 to be served over three years.
- Nearly two thirds (63%) of those vouchers were used to cover critical recovery support services (i.e., employment coaching, transportation, family services, sober housing, peer support, etc).
- Expanded treatment and recovery support options for those in need by devoting 31% of funding to faith and community-based organizations.





Office of National Drug Control Policy September 2

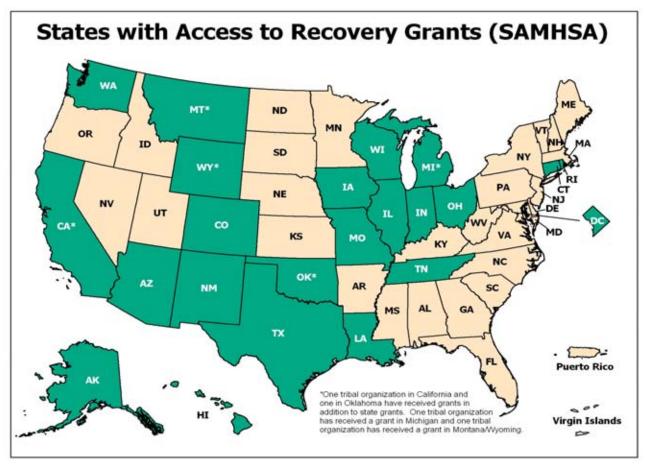
Outcomes:

To date, ATR grantees have collected discharge data on 105,873 clients. Some client outcomes are:

- Of those clients who reported using substances at intake, 71.4% were abstinent at discharge
- Of those clients who reported not having stable housing at intake, 22.3% reported being stably housed at discharge
- Of those clients who were unemployed at intake, 29.3% reported being employed at discharge
- Of those clients who reported not being socially connected at intake, 59.5% were socially connected (attended self help groups or had someone to whom they could turn in times of trouble) by discharge
- Of those clients who were involved with the criminal justice system at intake, 84.7% reported no involvement at discharge.

2007 Grantees:

The Bush Administration has released \$96 million in 2007 grant funds to 24 grantees (out of 40 total applications reviewed). Approximately \$25 million dollars of the new grant funding will be targeted to methamphetamine. Grantees include 8 new States, 4 new Tribes or Tribal organizations, plus the District of Columbia, in addition to 11 previous grantees. The 2007 grantees are: Alaska Southcentral Foundation, Arizona, California, California Rural Indian Health Board, Colorado, Connecticut, District of Columbia, Hawaii, Illinois, Indiana, Inter-Tribal Council of Michigan, Iowa, Louisiana, Missouri, Montana/Wyoming Tribal Leaders Council, New Mexico, Ohio, Oklahoma, Oklahoma Cherokee Nation, Rhode Island, Tennessee, Texas, Washington, and Wisconsin.



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