



FY 2013 BUDGET AND PERFORMANCE SUMMARY

Companion to the
National Drug Control Strategy

APRIL 2012



National Drug Control Strategy
FY 2013 Budget and Performance Summary
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I. Executive Summary

Executive Summary

The Administration's inaugural *National Drug Control Strategy (Strategy)*, published in May 2010, represented a new direction in our efforts to reduce illicit drug use and its consequences in the United States, with the goal to achieve a 15 percent reduction in the rate of drug use and similar reductions in drug use consequences over the course of five years. This effort, which was continued in the President's 2011 *Strategy*, includes:

- preventing illicit drug use and addiction before their onset;
- bringing more Americans in need of treatment into contact with the appropriate level of care;
- protecting public safety while also ensuring that drug-involved offenders have the opportunity to end their drug use and rebuild their lives;
- countering drug production and trafficking within the United States;
- implementing new strategies to secure our borders against illicit drug flows;
- working with our international partners to reduce drug production and trafficking and strengthen rule of law, democratic institutions, transparency in government, alternative livelihoods, and respect for human rights around the world.

For two years these principles have guided the Administration's efforts – and ONDCP will continue to pursue a balanced approach that brings all sectors of society together in a national effort to improve public health and public safety. The requested Fiscal Year (FY) 2013 National Drug Control Budget demonstrates

commitment to these goals, requesting \$25.6 billion to reduce drug use and its consequences in the United States. This represents an increase of \$415.3 million (1.6%) over the FY 2012 enacted level of \$25.2 billion.

The FY 2013 request includes two new Departments and two new bureaus to the National Drug Control Budget. These additions are consistent with the restructuring of the budget in FY 2012 that provided for a reliable, accurate, and transparent accounting of Federal funding spent in support of the President's *Strategy*. The new bureaus or programs, which will be reflected in the *National Drug Control Strategy: FY 2013 Budget and Performance Summary (Summary)* are:

- Department of Labor's Employment and Training Administration (a comprehensive drug prevention and intervention program for all Job Corps participants)
- Department of Housing and Urban Development's Continuum of Care (housing and other efforts in support of homeless with substance abuse disorders)
- Department of Defense's Defense Health Program (drug abuse treatment provided by military treatment facilities and private sector care)
- Department of Health and Human Services' Administration for Children and Families (enhancing the safety of children affected by parental methamphetamine or other substance abuse)

Highlights of the FY 2013 Budget by Function

Treatment

The FY 2013 Budget proposes \$9.2 billion in Federal funds for early intervention and treatment services for individuals with drug problems. This represents an increase of 4.6 percent (\$403.0 million) over the FY 2012 enacted funding level. The major efforts and changes are highlighted below:

Centers for Medicare & Medicaid Services

**Department of Health and Human Services:
\$4,751.1 million¹**

(Reflects \$283.7 million increase from FY 2012)

The Nation's substance abuse treatment providers treated an estimated 2.6 million clients in specialty facilities in 2010. Substance abuse treatment most often is paid for by two or more public and private sources (private health insurance, Medicaid, Medicare, state and local funds, and other Federal support). The Federal Government makes its largest contribution to the payment for treatment through the Medicaid and Medicare programs. These programs are increasing in size and scope, with the expansion of populations and/or services covered.

Substance Abuse & Mental Health Services Administration (SAMHSA) Programs of Regional and National Significance - Treatment

**Department of Health and Human Services -
SAMHSA: \$364.1 million**

(Reflects \$61.1 million decrease from FY 2012)

The SAMHSA request includes a bundle of programs that are awarded directly to providers. These programs advance specific

treatment methods, modalities, and services to targeted groups. Grants are awarded on a competitive basis to ensure the funding supports a particular identified need. These include:

- \$93.8 million (decreased \$4.5 million from FY 2012 enacted) for Access to Recovery, which provides states funding for vouchers, coupled with state flexibility and executive discretion, to create positive change in substance abuse treatment and recovery service delivery across the Nation.
- \$30 million (decreased \$21.1 million from FY 2012 enacted) for a Screening, Brief Intervention, and Referral to Treatment approach, which provides grants to health care providers to intervene early in the disease process before individuals become dependent, and motivate the addicted client to engage in substance abuse treatment.
- \$65.1 million (decreased \$2.4 million from FY 2012 enacted) for Criminal Justice Activities, including Treatment Drug Courts and Ex-Offender Reentry program grants. Drug Courts help reduce recidivism and substance abuse among offenders and increase an offender's likelihood of successful rehabilitation through early, continuous, and intense judicially supervised treatment, mandatory periodic drug testing, community supervision, and appropriate sanctions and other rehabilitation services. Ex-Offender Reentry program grants provide screening, assessment, and comprehensive treatment and recovery support services to offenders reentering the community, as well as to offenders who are currently on or being released from probation or parole.

¹ Please reference footnote #4 of Table 2 for further explanation of these estimates.

- \$41.6 million (no change from FY 2012 enacted) for Treatment Systems for the Homeless grants, which combine long-term, community-based housing assistance with intensive individualized treatment and recovery support services.
- \$52.5 million (decreased \$13.5 million from FY 2012 enacted) for the Minority AIDS Initiative, which delivers and sustains high quality and accessible substance abuse and HIV prevention services.
- \$13.3 million (decreased \$14.7 million from FY 2012 enacted) for Targeted Capacity Expansion (TCE) grants, which are designed to address gaps in treatment capacity by supporting rapid and strategic responses to demands for substance abuse (including alcohol and drug) treatment services in communities with serious, emerging drug problems, as well as communities with innovative solutions to unmet needs.
- \$57.0 million (decreased \$0.9 million from FY 2012 enacted) for several other Treatment Capacity programs including: Opioid Treatment Programs and Regulatory Activities; Children and Family Programs; Pregnant and Post-Partum Women; and the Recovery Community Services Program.

Substance Abuse Treatment Block Grant

Department of Health and Human Services -

SAMHSA: \$1,448.6 billion

(Reflects a decrease of \$7.4 million over FY 2012)

This formula-based funding to states expands substance abuse treatment services, while providing maximum flexibility to states. States and territories may expend their funds only for the purpose of planning, carrying out, and evaluating activities related to these

services. In FY 2013, the grant will continue to support the delivery of treatment while allowing states to access funding for prevention services.

Bureau of Prisons (BOP) Drug Treatment Efforts

Department of Justice: \$109.3 million

(Reflects \$15.8 million increase from FY 2012)

Approximately 40 percent of new inmates entering BOP custody have a diagnosis of a substance use disorder. Accordingly, BOP's strategy of strong and comprehensive drug abuse treatment consists of screening and assessment; drug abuse education; non-residential drug abuse treatment services; residential drug abuse treatment programming; and community transitional drug abuse treatment. There is enormous demand for these services, in part because of the possible 1 year reduction in sentence after successful completion of the program for some non-violent offenders. Due to limited capacity, inmates eligible for the reduction receive an average reduction of about 8 months. Resources requested in this budget are vital to allow expansion of drug treatment capacity, and will help BOP reach the goal of providing 12 month sentence credits to all eligible inmates.

Problem Solving Justice

Department of Justice: \$52.0 million

(Reflects \$8.0 million increase from FY 2012 (levels for programs consolidated))

In FY 2013, the Office of Justice Programs (OJP) requests \$52.0 million to increase their support to problem solving courts and other strategies. OJP provides grants to criminal justice agencies to implement and improve drug court and community court programs, as well as focus on mental health and other issues. The program focuses on the risks and needs of offenders through drug court programs and other problem-

solving approaches in an effort to decrease recidivism and improve public health and safety.

Residential Substance Abuse Treatment

**Department of Justice: \$21.0 million
(Reflects \$11.0 million increase from FY 2012)**

The Residential Substance Abuse Treatment program for state prisoners was established to help states and local governments develop, implement, and improve residential substance abuse treatment programs in correctional facilities, and establish and maintain community-based aftercare services for probationers and parolees. Ultimately, the program goal is to help offenders become drug-free and learn the skills needed to sustain themselves upon return to the community. The Department of Justice will assist states and local jurisdictions to improve substance abuse-related services for offenders and increase the number of offenders served.

Homeless Assistance Grants - Continuum of Care

**Department of Housing and Urban Development: \$542.4 million
(Reflects \$96.4 million increase from FY 2012)**

The Continuum of Care – Homeless Assistance Grants support efforts to eliminate homelessness by financing local solutions to locate, intervene, and house the homeless population. The Continuum of Care programs are designed to provide housing and supportive services on a long-term basis for homeless persons with disabilities (primarily those with serious mental illness, chronic problems with alcohol and/or drugs, and AIDS or related diseases). With 28 percent of the persons using housing under these programs having a demonstrated substance use disorder, the *Strategy* specifically calls for programs to prevent homelessness as a step toward

recovery from addiction. Finding stable and affordable housing is among the most difficult barriers for individuals in recovery to overcome.

Trainee Employment Assistance Program

**Department of Labor - Job Corps: \$6.6 million
(Reflects no increase from FY 2012)**

Job Corps is a no-cost education and career technical training program administered by the U.S. Department of Labor that helps young people ages 16 through 24 improve the quality of their lives through career technical and academic training. The Job Corps program is authorized by Title I-C of the Workforce Investment Act of 1998. The Job Corps operates 125 regional offices and employs approximately 125 Trainee Employment Assistance Program counselors who provide drug prevention and early intervention to nearly 60,000 at risk youth enrolled in the program. Costs associated with its Trainee Employment Assistance Program include salaries of the counselors and the cost of administering drug testing.

Veterans Health Administration Treatment

**Department of Veterans Affairs: \$568.2 million
(Reflects \$19.4 million increase over FY 2012)**

The Veterans Health Administration (VHA) operates a national network of substance abuse treatment programs located in the Department's medical centers, residential rehabilitation facilities, and outpatient clinics. Reflecting the Administration's commitment to combat veteran homelessness and provide compassionate and caring treatment to veterans, VHA increasingly treats substance use disorders in a mental health setting, including when it co-occurs with Post Traumatic Stress Disorder (PTSD).

Prevention

Federal resources totaling \$1.4 billion support education and outreach programs aimed at preventing the initiation of drug use. This represents a nearly 1 percent decrease (\$-12.9 million) over the FY 2012 enacted level; the major efforts and changes are highlighted below:

Successful, Safe, and Healthy Students Grant Program

Department of Education: \$108.3 million
(Reflects \$43.4 million increase over FY 2012)

This new program will support student achievement and help ensure students are mentally and physically healthy and ready to learn. The objective is to provide resources and programming to selected local educational agencies that are trying to create an improved school climate that reduces drug use, violence, and harassment and improves school safety and students' physical and mental well-being. Within the program, the Department of Education would use:

- \$85.9 million to award grants to assist state educational agencies and local educational agencies (LEAs) to develop and implement programs and activities that create safe environments. Included in this amount is \$37.3 million for Successful, Safe, and Healthy Students State and Local Grants and \$48.6 million for grants for Safe and Supportive Schools projects to support statewide measurement of, and targeted programmatic interventions to improve, conditions for learning in order to help schools improve student safety and reduce drug abuse.
- \$17.0 million for grant awards under the "Safe Schools/Healthy Students" initiative. Safe Schools/Healthy Students supports LEAs and

communities in developing and implementing a comprehensive set of programs and services to prevent youth drug use and violence, support early childhood development activities, and provide needed student mental health services. Safe Schools/Healthy Students is a joint initiative funded by Education and the Department of Health and Human Services' (HHS) Youth Violence Prevention Program, administered in collaboration with the Department of Justice.

Substance Abuse & Mental Health Services Administration (SAMHSA) Prevention Grants

Department of Health and Human Services: \$404.5 million

(Reflects \$49.5 million decrease from FY 2012)

In support of a national, community-based prevention system to protect our adolescents, the Department of Health and Human Services' (HHS) SAMHSA budget request includes a newly designed State Substance Abuse Prevention Grant that combines the Prevention set-aside and the Strategic Prevention Framework programs focusing exclusively on preventing substance abuse. The program will identify and address problems in communities, create a sustainable and predictable source of prevention funding that will focus on high risk communities and youth, integrate the Strategic Prevention Framework State Incentive Grant (SPF-SIG) principles more widely, and hold states and territories accountable for achieving measurable outcomes in their prevention programs.

Drug Free Communities (DFC)

Office of National Drug Control Policy: \$88.6 million
(Reflects \$3.4 million decrease from FY 2012)

The FY 2013 request includes \$88.6 million in DFC funding to support the development

of community drug-free coalitions throughout the United States, fully funding 644 grants, including 20 mentoring grants. Community coalitions strive to develop local solutions and increase community involvement and effectiveness in carrying out a wide array of drug prevention strategies, initiatives, and activities.

Youth Drug Prevention Media Program

Office of National Drug Control Policy: \$20.0 million

(Reflects \$20.0 increase from FY 2012)

The FY 2013 request will allow for the continuance of a national media program with a community focus to educate youth about the adverse and serious consequences of drug use and to inspire teens to live “above the influence” through positive behaviors. The Media Program will continue to build upon the high level of awareness of its “Above the Influence” (ATI) brand with teens by executing its multi-tiered messaging approach – strong community-level local ATI drug prevention efforts delivered through various youth-serving organizations combined with a base level of national-level ATI messaging to maintain the integrity of the ATI brand.

Drugged Driving

Department of Transportation, National Highway Traffic Safety Administration: \$4.0 million

(Reflects \$1.3 million increase from FY 2012)

The National Highway Traffic Safety Administration’s (NHTSA) FY 2013 request will support the Drug-Impaired Driving Program, provide public information, outreach efforts, and improved law enforcement training to help reduce drugged driving. Funding will support the development of a roadside survey of drug use by drivers and the analysis of case control study data to determine the crash risk of drugged driving.

Domestic Law Enforcement

Over \$9.4 billion in FY 2013 Federal resources are requested to support domestic law enforcement efforts, an increase of \$61.4 million (0.7%) over the FY 2012 enacted level. The Departments of Justice, Homeland Security, and the Treasury, with support from the Department of Defense’s National Guard, provide key domestic law enforcement support; the major efforts are highlighted below.

Department of Defense (DoD) Domestic Counterdrug Support

Department of Defense: \$146.9 million

(Reflects \$124.6 million decrease from FY 2012)

In FY 2013, DoD’s request will support Federal, state, and local drug law enforcement agencies requests for domestic operational and logistical support to address drug-related crime. The change from the prior year is largely the result of lower funding for the National Guard State Plans.

Prescription Drug Monitoring Program (PDMP)

Department of Justice (DOJ): \$7.0 million

(Reflects no change from FY 2012)

The PDMP program provides grants to states for PDMP planning, implementation, and enhancement. Funding will also support training and technical assistance to states; further develop a clearinghouse of best practices and measures of effectiveness for PDMPs; and provide technical support for states to engage in electronic interstate data sharing.

Drug Enforcement Administration (DEA) – Diversion Control Account

Department of Justice: \$352.6 million (Reflects \$30.6 million increase from FY 2012)
DEA's Office of Diversion Control (ODC) enforces the provisions of both the Controlled Substances Act and the Chemical Diversion and Trafficking Act by preventing, detecting and investigating the diversion of controlled pharmaceuticals and listed chemicals from legitimate sources. The FY 2013 President's Budget for the Diversion Control Fee Account includes an increase of \$8 million and 87 positions to support Tactical Diversion Squads. Additional personnel will perform duties related to intelligence gathering and dissemination, laboratory analysis of evidence, legal counsel and action against violators, technology for internet investigative support, headquarters program support including internal controls, drug and chemical scheduling, liaison and policy, regulatory drafting, financial management, and clerical case support.

Incarceration Operations

Department of Justice/Federal Judiciary: \$4,527.2 million (Reflects \$141.8 million increase over FY 2012)
The Bureau of Prisons, the U.S. Marshals Service - Federal Prisoner Detention, and the Federal Judiciary conduct activities associated with the incarceration and/or monitoring of drug-related offenders. As a consequence of drug abuse, the FY 2013 request includes funding for the costs associated with inmate care, security and facility maintenance, contracted confinement, and general management and administration.

High Intensity Drug Trafficking Areas (HIDTA) Program

Office of National Drug Control Policy: \$200.0 million (Reflects \$38.5 million decrease from FY 2012)
HIDTA coordinates Federal, state, tribal and local collaboration of law enforcement investigations and operations to disrupt and dismantle complex drug trafficking organizations.

Interdiction

The Federal budget request for interdiction totals \$3.7 billion in FY 2013, for an increase of \$89.3 million (2.5%) over the FY 2012 enacted level. The Departments of Homeland Security and Defense perform activities designed to interrupt the trafficking of illicit drugs into the United States by targeting the transportation link; major efforts and changes are highlighted below.

Customs and Border Protection - Border Security at Ports of Entry (POEs)

Department of Homeland Security: \$946.7 million (Reflects \$53.2 million increase over FY 2012 enacted level)
The FY 2013 President's Budget request proposes a \$53.2 million increase over the FY 2012 enacted level for border security and trade facilitation at the POEs. The increase in resources will further drug interdiction efforts at POEs.

Customs and Border Protection - Air & Marine Support

Department of Homeland Security: \$644.9 million (Reflects \$66.9 million decrease from FY 2012 enacted level)
The decrease in the FY 2013 request is due to a one-time FY 2012 non-recurring enhancement for the Office of Air and Marine's (OAM) fleet acquisition of new aircraft and marine vessels and for the P-3

Service Life Extension Program's structural inspections and wing and tail replacements and upgrades. The decrease also reflects a reduction in OAM mission and field support staff.

United States Coast Guard Acquisition, Construction and Improvements

Department of Homeland Security: \$401.9 million (Reflects \$147.4 million increase over FY 2012 enacted level)

The FY 2013 request proposes an increase of \$147.4 million, primarily due to the Coast Guard's planned procurement of the sixth National Security Cutter.

International

The FY 2013 Budget requests nearly \$2.0 billion to provide international support, a decrease of \$125.6 million (6.0%) from the FY 2012 enacted level. The Departments of Defense, Justice, and State perform a wide range of drug-control activities primarily focused on or conducted in areas outside of the United States. These programs help facilitate the disruption or dismantlement of the most significant international drug organizations, and increase the demand reduction and drug enforcement capabilities of partner nations. Major efforts and changes are highlighted below.

United States Agency for International Development (USAID)

Department of State: \$179.1 million (Reflects \$104.2 million decrease from FY 2012)

The FY 2013 request will focus on efforts to disrupt the market for illegal drugs through alternative development programs in the Andean Region. In Afghanistan, USAID will continue to focus on reducing the production of illegal crops by promoting alternative livelihoods programs. The majority of the decreased funding in FY2013

is in Afghanistan, and is due to a shift away from stabilization- and staple crop-focused alternative development programs to those more closely integrating stabilization, alternative development, and market-led agricultural development objectives. The decrease also is due to the ability of the Government of Colombia to support many alternative development programs themselves in the Andean Region.

Colombia

Department of State/INL: \$114.0 million (Reflects \$16.4 million decrease from FY 2012)

The United States will continue supporting Colombian-led interdiction and eradication efforts as the Colombian Government works to implement its National Consolidation Plan. Additional support will expand local drug prevention programs and enhance the Colombian National Police's capability to maintain a security presence in former conflict and drug trafficking regions while expanding access to state institutions and services in these regions. Much of the decrease in the FY 2013 request is due to the successful nationalization of the Colombian Army Aviation and Counterdrug Brigade programs in FY 2012, which resulted in no request for funding in FY 2013.

Mexico

Department of State/INL: \$55.0 million (Reflects \$12.0 million decrease from FY 2012)

In FY 2013, support will continue to include counternarcotics, law enforcement, and demand reduction initiatives in an effort to dismantle drug trafficking and other criminal organizations, and strengthen justice sector institutions while expanding their capacity to attack and deter crime affecting the United States, especially along our shared border. The reduction in

counternarcotics funding is due to the successful maturation of programs that will become the responsibility of the Government of Mexico.

Caribbean Basin Security Initiative

**Department of State/INL: \$11.5 million
(Reflects \$6.3 million decrease from FY 2012)**

The FY 2013 request will include support for law enforcement professionalization and capacity building, as well as interdiction operations. Other priorities include rule of law initiatives and enhancements in the judicial process. The decrease in funding in FY 2013 is attributed to a focus on training and capacity building for law enforcement and less emphasis on logistical support and equipment.

Central America Regional Security Initiative (CARSI)

**Department of State/INL: \$14.0 million
(Reflects \$4.8 million decrease from FY 2012)**

The FY 2013 request will be used to combat international drug trafficking in Central America. In addition, support will be provided to assist law enforcement and justice sector capacity building and prevention programs. The decrease is attributed to the end of funding for the aviation program in Guatemala, as the 4-year program ended in FY 2012.

Afghanistan and Central Asia

**Department of State/Department of Defense:
\$653.3 million
(Reflects \$72.5 million increase over FY 2012)**

U.S. efforts in Afghanistan and Central Asia, provided by the Departments of State and Defense, will focus on interdiction, justice reform, and law enforcement capacity building efforts, as well as building the capacity of the Afghan government so it can independently support counternarcotics activities. Funding also will support

reducing the supply of illicit crops through the Afghan Governor-led eradication and the Good Performers Initiative programs, and providing demand reduction efforts. The majority of the increase in drug control funding in FY 2013 is attributed to increased requirements to support the Counternarcotics Police of Afghanistan and the work of the DEA in Afghanistan.

Performance Measurement

Performance represents a key tool for ONDCP in its oversight of Federal agencies – it enables ONDCP to assess the extent to which the *Strategy* meets its goals, and the relative contributions of drug control agencies. Section 1705 of Title 21 of the United States Code and the Government Performance and Results Modernization Act of 2010 (GPRAMA) set the framework for a range of performance requirements.

21 USC §1705(c) requires ONDCP to track and report on progress of the *Strategy* as reflected in performance measures and targets established for each goal and objective in the *Strategy*. ONDCP has worked to develop such a performance monitoring and assessment mechanism – the Performance Reporting System (PRS). The PRS will monitor key performance measures to inform ONDCP whether drug control programs are performing as expected.

The PRS was developed through an extensive interagency process that brought together subject matter experts, policy and program analysts, researchers, statisticians, and leadership from Federal drug control agencies. Targets were then determined by interagency groups for each measure based on baseline data and trend lines.

The PRS will collect and report on data for each performance measure in the PRS including the data source, agencies responsible for achieving the target, and the agency that reports the data. This information will be used to inform budget formulation and resource allocation, *Strategy* implementation, policymaking, and planning, and will show progress toward the *Strategy's* Goals and Objectives. The first PRS Report will be released with the 2011 *Strategy*.

II. Drug Control Funding Tables

Table 1: Federal Drug Control Spending by Function

FY 2011 – FY 2013
(Budget Authority in Millions)

Function	FY 2011	FY 2012	FY 2013	FY12-FY13 Change	
	Final	Enacted	Request	Dollars	Percent
Function					
Treatment	8,953.9	8,747.5	9,150.5	+403.0	+4.6%
<i>Percent</i>	35.0%	34.2%	36.3%		
Prevention	1,478.1	1,400.5	1,387.6	-12.9	-0.9%
<i>Percent</i>	5.8%	5.5%	5.5%		
Domestic Law Enforcement	9,143.0	9,357.5	9,418.9	+61.4	+0.7%
<i>Percent</i>	35.7%	36.6%	37.4%		
Interdiction	3,977.1	3,591.6	3,680.9	+89.3	+2.5%
<i>Percent</i>	15.5%	14.0%	14.6%		
International	2,027.6	2,087.6	1,962.0	-125.6	-6.0%
<i>Percent</i>	7.9%	8.2%	7.8%		
Total	\$25,579.7	\$25,184.7	\$25,599.9	+\$415.3	+1.6%
Supply/Demand Split					
Demand Reduction	10,431.9	10,148.0	10,538.2	+390.2	+3.8%
<i>Percent</i>	40.8%	40.3%	41.2%		
Supply Reduction	15,147.7	15,036.6	15,061.8	+25.2	+0.2%
<i>Percent</i>	59.7%	58.9%	59.3%		
Total	\$25,579.7	\$25,184.7	\$25,599.9	+\$415.3	+1.6%

Table 2: Federal Drug Control Spending by Agency
(Budget Authority in Millions)

	FY2011 Final	FY2012 Enacted	FY2013 Request
Department of Agriculture			
U.S. Forest Service	15.3	15.3	14.7
Court Services and Offender Supervision Agency for the District of Columbia	52.8	53.1	52.4
Department of Defense			
Drug Interdiction and Counterdrug Activities ² /OPTEMPO ³	1,743.3	1,828.8	1,630.3
Defense Health Program	<u>93.3</u>	<u>96.5</u>	<u>94.9</u>
Total DoD	1,836.5	1,925.3	1,725.2
Department of Education	123.9	64.9	108.3
Federal Judiciary	1,126.9	1,133.3	1,164.5
Department of Health and Human Services			
Administration for Children and Families	20.0	20.0	20.0
Centers for Medicare & Medicaid Services ⁴	4,643.8	4,467.4	4,751.1
Health Resources and Services Administration	16.9	18.1	18.3
Indian Health Service	96.0	98.1	96.8
National Institute on Alcohol Abuse and Alcoholism	56.9	57.0	56.8
National Institute on Drug Abuse	1,048.8	1,052.1	1,054.0
Substance Abuse and Mental Health Services Administration ⁵	<u>2,576.8</u>	<u>2,565.8</u>	<u>2,470.9</u>
Total HHS	8,459.2	8,278.6	8,467.9
Department of Homeland Security			
Customs and Border Protection	2,238.3	2,280.3	2,276.4
Federal Emergency Management Agency ⁶	8.3	7.5	0.0
Federal Law Enforcement Training Center	47.8	48.5	46.3
Immigration and Customs Enforcement	504.5	523.5	503.1
United States Coast Guard ⁷	1,408.1	977.3	1,124.9
Office of Counternarcotics Enforcement	<u>2.9</u>	<u>1.8</u>	<u>0.0</u>
Total DHS	4,209.9	3,838.9	3,950.7
Department of Housing and Urban Development			
Community Planning and Development	464.2	446.0	542.4
Department of the Interior			
Bureau of Indian Affairs	10.0	10.0	10.0
Bureau of Land Management	5.1	5.1	5.1
National Park Service	<u>3.3</u>	<u>3.3</u>	<u>3.3</u>
Total Interior	18.4	18.4	18.4

	FY2011 Final	FY2012 Enacted	FY2013 Request
Department of Justice			
Assets Forfeiture Fund	214.7	224.8	236.0
Bureau of Prisons	3,287.7	3,396.9	3,517.3
Criminal Division	12.3	12.3	12.6
Drug Enforcement Administration	2,305.9	2,347.0	2,387.9
Organized Crime Drug Enforcement Task Force Program	527.5	527.5	524.8
Office of Justice Programs	226.3	162.0	244.6
National Drug Intelligence Center	34.0	20.0	0.0
U.S. Attorneys	82.2	79.5	80.6
U.S. Marshals Service	237.7	248.9	250.8
U.S. Marshals Service - Federal Prisoner Detention	<u>533.0</u>	<u>580.0</u>	<u>604.0</u>
Total Justice	7,461.3	7,598.9	7,858.5
Department of Labor			
Employment and Training Administration	6.6	6.6	6.5
Office of National Drug Control Policy			
High Intensity Drug Trafficking Areas	238.5	238.5	200.0
Other Federal Drug Control Programs	140.6	105.6	118.6
Salaries and Expenses	<u>27.1</u>	<u>24.5</u>	<u>23.4</u>
Total ONDCP	406.2	368.6	342.0
Small Business Administration	1.0	0.0	0.0
Department of State			
Bureau of International Narcotics and Law Enforcement Affairs ⁸	575.3	513.2	507.8
United States Agency for International Development	<u>198.6</u>	<u>283.3</u>	<u>179.1</u>
Total State	773.9	796.5	686.9
Department of Transportation			
Federal Aviation Administration	27.9	28.7	28.8
National Highway Traffic Safety Administration	<u>2.7</u>	<u>2.7</u>	<u>4.0</u>
Total Transportation	30.6	31.4	32.8
Department of the Treasury			
Internal Revenue Service	60.1	60.3	60.6
Department of Veterans Affairs			
Veterans Health Administration ⁹	532.9	548.7	568.2
	\$25,579.7	\$25,184.7	\$25,599.9

¹ Detail may not add due to rounding.

² DOD amounts include funding appropriated or requested for overseas contingency operations.

³ OPTEMPO funding (flight hours and steaming days) is reported by the military services and is not part of DOD's counter-drug activities budget request.

⁴The Department of Health and Human Services' (HHS) Centers for Medicare and Medicaid Services (CMS) outlay estimates include substance abuse treatment expenditures for both Medicare and Medicaid. While CMS's Office of the Actuary (OACT) developed the Medicare estimates, Medicaid estimates were developed as a placeholder by ONDCP, based on data in the 2008 Report from HHS entitled 'SAMHSA spending estimates: MHSAs spending projections for 2004–2014'. OACT did not develop nor approve the Medicaid estimates. Medicaid estimates are not consistent with the FY 2013 President's Budget Medicaid baseline projections, and do not incorporate the impact of recent legislation (including the Recovery Act and the Affordable Care Act), or recent economic and policy changes to the programs. These estimates are for use while HHS develops a more precise estimate consistent with current program spending.

⁵Includes budget authority and funding through evaluation set-aside authorized by Section 241 of the Public Health Service (PHS) Act.

⁶FEMA amount reflects Operation Stonegarden grant funding.

⁷The USCG budgets by appropriation rather than individual missions. The USCG projects resource allocations by mission through use of an activity-based costing system. Actual allocations will vary depending upon operational environment and mission need. In FY 2011, the USCG anticipated allocating \$1,162.3 toward the drug interdiction mission. According to the USCG operations database, however, actual EOY allocation totaled \$1,408.1 million.

⁸State Department amounts include funding appropriated or requested for overseas contingency operations.

⁹VA Medical Care receives advance appropriations; FY 2013 funding was provided in the Consolidated Appropriations Act, 2012 (Public Law 112–74).

Table 3: Historical Drug Control Funding by Function

FY 2004 – FY 2013
(Budget Authority in Millions)

FUNCTIONS	FY 2005 Final	FY 2006 Final	FY 2007 Final	FY 2008 Final	FY 2009 Final	FY 2010 Final	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
<u>Demand Reduction</u>									
Drug Abuse Treatment	6,761.8	6,811.0	7,135.0	7,422.9	8,426.9	8,937.2	8,953.9	8,747.5	9,150.5
Drug Abuse Prevention	2,040.0	1,964.5	1,934.2	1,841.0	1,954.0	1,566.4	1,478.1	1,400.5	1,387.6
Total Demand Reduction	8,801.9	8,775.5	9,069.2	9,263.9	10,380.9	10,503.6	10,431.98	10,148.0	10,538.2
<i>Percentage</i>	<i>43.2%</i>	<i>41.5%</i>	<i>40.8%</i>	<i>41.2%</i>	<i>40.5%</i>	<i>40.5%</i>	<i>40.8%</i>	<i>40.3%</i>	<i>41.8%</i>
<u>Supply Reduction</u>									
Domestic Law Enforcement	7,266.1	7,525.2	7,921.2	8,268.9	8,994.0	9,155.5	9,143.0	9,357.5	9,418.9
Interdiction	2,433.6	2,924.1	3,045.9	2,968.7	3,699.2	3,662.4	3,977.1	3,591.6	3,680.9
International	1,873.7	1,895.8	2,191.4	1,998.5	2,532.6	2,595.0	2,027.6	2,087.6	1,962.0
Total Supply Reduction	11,573.4	12,357.2	13,158.5	13,236.1	15,225.9	15,412.9	15,147.7	15,036.6	15,061.8
<i>Percentage</i>	<i>56.8%</i>	<i>58.5%</i>	<i>59.2%</i>	<i>58.8%</i>	<i>59.5%</i>	<i>59.5%</i>	<i>59.2%</i>	<i>59.7%</i>	<i>58.8%</i>
TOTALS	20,375.2	21,1207.7	22,227.7	22,500.0	25,606.8	25,916.5	25,579.7	25,184.6	25,599.9

III. Agency Budget Summaries

DEPARTMENT OF AGRICULTURE



DEPARTMENT OF AGRICULTURE

U.S. Forest Service

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$0.200	\$0.200	\$0.200
Investigations	14.000	14.000	13.600
Prevention	0.100	0.100	0.100
Prosecution	0.300	0.300	0.200
State and Local Assistance	0.700	0.600	0.600
Total Drug Resources by Function	\$15.300	\$15.200	\$14.700
Drug Resources by Decision Unit			
Law Enforcement Agency Support	\$15.300	\$15.200	\$14.700
Total Drug Resources by Function	\$15.300	\$15.200	\$14.700
Drug Resources Personnel Summary			
Total FTEs (direct only)	68	68	66
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$5.1	\$4.8	\$4.9
Drug Resources Percentage	0.3%	0.3%	0.3%

Program Summary

MISSION

The mission of the U.S. Forest Service (FS) is to sustain the health, diversity, and productivity of the Nation's forests and grasslands to meet the needs of present and future generations. In support of this mission, the FS' Law Enforcement and Investigations (LE&I) program's basic mission is public and employee safety, resource protection, enforcement of US Criminal Law, and to provide enforcement expertise to other agency managers. The FS manages 193 million acres in 44 states, the Virgin Islands, and Puerto Rico encompassing 155 national forests and 20

national grasslands. Most of this land is located in extremely rural areas of the United States.

The FS LE&I program is directed at protecting the public, employees, and natural resources. Three drug enforcement issues are of specific concern to the FS: marijuana cultivation, methamphetamine production, and smuggling across international borders. These activities increase the risks to the health and safety of the visiting public and employees, and the continued viability of the Nation's natural resources.

METHODOLOGY

The U.S. Forest Service (FS) budget structure includes a Law Enforcement and Investigations (LEI) budget line item within the National Forest System (NFS) appropriation. Within the LEI budget line item, funds allocated for drug enforcement activities are based on an analysis of workload that takes into account all law enforcement responsibilities related to the mission of the FS.

BUDGET SUMMARY

The FY 2013 request is \$14.7 million, which is a decrease of \$0.5 million from the FY 2012 enacted level.

Law Enforcement and Investigations

Total FY 2013 Request: \$14.7 million
(Reflects \$0.5 million decrease from FY 2012 enacted level)

Through ongoing activities, the FS identifies, investigates, disrupts and dismantles drug trafficking organizations involved in marijuana cultivation, including their supporting co-conspirators (transportation and financial components), that are responsible for the large-scale marijuana grow operations on NFS lands. With the collection, dissemination, and use of intelligence pertaining to individuals, organizations, and co-conspirators who are involved in the cultivation and trafficking of marijuana on NFS lands, the FS provides prosecutorial support and convictions for marijuana cultivators and their co-conspirators.

As part of the FS investigative process, marijuana being cultivated on NFS lands will be eradicated. Grow sites are then cleaned as part of the rehabilitative process in order to deter the reuse of the site for marijuana cultivation.

FY 2013 Changes (-0.5 million): In FY 2013, the FS will conduct a multi-agency eradication operation to target the eradication of marijuana cultivated on NFS lands. The FS continues its participation in the Office of National Drug Control Policy's High Intensity Drug Trafficking Area program to leverage resources with Federal, state, and local agencies, and places emphasis on NFS lands along the Southwest and Northern borders to decrease trafficking and movement of drugs in support of the President's *National Drug Control Strategy*.

PERFORMANCE

This section on the FY 2011 performance of the drug control mission of the FS's LE&I program is based on agency GPRA documents and other agency information.

The FY 2011 performance information for the LE&I program is provided below.

U.S. Forest Service Law Enforcement and Investigations		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Number of marijuana plants eradicated on National Forest Service lands	2,300,00	2,389,870
» Percent of cases referred for adjudication	6.9*	7.5*
» Percent of documented law enforcement incidents per 10,000 forest visits	7.6*	6.5*

* These data include all law enforcement activities, including drug control.

Discussion

National Forest System (NFS) lands are used by Drug Trafficking Organizations (DTOs) in the unlawful production of marijuana and other controlled substances. To address this threat 10.5 percent of the time of sworn officers is spent on drug enforcement for both activities. In FY 2011, there were 642 sworn officers for LE&I.

Reflecting the multi-mission nature of the Law Enforcement units, the accounting system is keyed to reflect all investigations and enforcement activities; drug control focused results are not disaggregated. The LE&I program relies on the Law Enforcement Investigations Management Attainment Reporting System (LEIMARS) database to estimate seizures of money, property, firearms and specific drugs (marijuana, methamphetamines, cocaine, etc.)

In FY 2011, 2,389,870 marijuana plants were eradicated from NFS lands. 77 percent of marijuana grown on Federal public lands is grown on National Forest Lands. 88 percent of all Drug Trafficking Organization activity in NFS lands occurs in California; all 18 National Forests in California have DTO activity. Since FY 2000, 19,440,676 marijuana plants have been eradicated nationally.

COURT SERVICES AND OFFENDER SUPERVISION AGENCY



COURT SERVICES AND OFFENDER SUPERVISION AGENCY

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prevention	\$17.775	\$18.814	\$18.072
Treatment	34.985	34.241	34.364
Total Drug Resources by Function	\$52.760	\$53.055	\$52.436
Drug Resources by Decision Unit			
Community Supervision Program	35.582	35.676	35.838
Pretrial Services Agency	17.178	17.379	16.598
Total Drug Resources by Decision Unit	\$52.760	\$53.055	\$52.436
Drug Resources Personnel Summary			
Total FTEs (direct only)	271	280	282
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$212.0	\$213.0	\$215.5
Drug Resources Percentage	24.9%	24.9%	24.3%

Program Summary

MISSION

The mission of the Court Services and Offender Supervision Agency (CSOSA) is to increase public safety, prevent crime, reduce recidivism, and support the fair administration of justice in close collaboration with the District of Columbia community. The CSOSA appropriation is comprised of two components: the Community Supervision Program (CSP) and the Pretrial Services Agency for the District of Columbia (PSA). CSP is responsible for supervision of offenders on probation, parole or supervised release, as well as monitoring Civil Protection Orders and deferred sentencing agreements. PSA is an independent entity within CSOSA. Its mission is to promote pretrial justice and

community safety by assisting judicial officers in making appropriate release decisions, and by providing close supervision and pro-social interventions to defendants released to the community.

Seventy percent of convicted offenders serve all or part of their sentence in the community and approximately eighty percent of pretrial defendants are released to the community. As such, the effective supervision of pretrial defendants and convicted offenders is critical to public safety in the District of Columbia. Two strategic goals support CSOSA's mission. The first goal targets *public safety* by preventing the population supervised by CSOSA from engaging in criminal activity. The second goal targets the *fair*

administration of justice by providing accurate information and meaningful recommendations to criminal justice decision-makers, namely, the courts and the United States Parole Commission.

METHODOLOGY

The CSOSA appropriation does not have specific line items or programs for drug control activities. CSP's Drug Testing and Treatment activities correlate with ONDCP's Prevention and Treatment drug control function, respectively. CSP uses a cost allocation methodology to determine Drug Testing and Treatment activity resources, including both direct (e.g., direct staff, direct contracts) and indirect (e.g., rent, management) cost items supporting CSP Drug Testing and Treatment activities.

PSA has two program areas related to its drug control mission - drug testing and drug treatment. The Drug Testing and Compliance Unit (DTCU) is responsible for the collection of urine samples and the Forensic Toxicology Drug Testing Laboratory (FTDTL) provides forensic toxicology drug testing and analysis. Drug Treatment is provided by or coordinated through PSA's Treatment Program. The major cost elements for the drug testing program include labor expenses for the FTDTL and DTCU staff, recurring expenses for lab reagents and other supplies, lease expenses for the FTDTL, and the purchase and maintenance of lab equipment. Overhead and agency administrative expenses are not included. PSA provides drug testing services to other Federal and non-Federal agencies on a limited reimbursable basis. Revenues from other agencies are netted against gross costs. The major cost elements for the Treatment Program include labor expenses and contractual services.

BUDGET SUMMARY

The total drug control request for CSOSA for FY 2013 is \$52.4, a net decrease of \$0.6 million below FY 2012 Enacted levels.

CSP Drug Testing

FY 2013 Request: \$6.5 million

(Reflects no change from FY 2012)

In FY 2011, approximately 83 percent of the offenders placed under CSP supervision reported having a history of substance abuse. CSP drug testing is intended to monitor compliance with supervision conditions and prevent drug use. Drug test results may be used, along with other factors, as an indicator of an offender's need for substance abuse treatment. All offenders are placed on a drug testing schedule, with frequency of testing dependent upon prior substance abuse history, supervision risk level, and length of time under CSP supervision. In addition, all offenders are subject to random spot testing at any time. Offenders submit urine samples at the CSOSA Re-entry and Sanctions Center and four CSP illegal substance collection units located throughout the District of Columbia. Each urine sample may be tested for up to seven drugs (Marijuana, PCP, Opiates, Methadone, Cocaine, Amphetamines and Alcohol). CSP offender urine samples are tested by PSA and results provided back to CSP within 48 hours after the sample is taken.

FY 2013 Changes (no change): The FY 2013 request will provide resources to continue offender drug testing at current levels.

CSP Treatment

FY 2013 Request: \$29.3 million

(Reflects \$0.1 million increase from FY 2012)

CSP provides sanctions-based treatment and support services, as determined by CSP offender drug testing, assessments, and other factors, to assist offenders in reintegrating into the community. Drug-involved offenders are evaluated through individualized assessments and, based on priority and funds availability, are referred to a variety of contracted treatment services, including residential and intensive out-patient treatment programs, transitional housing and other specialized assessment and treatment services as indicated through continuing evaluations. Typically, an offender who has serious, persistent substance abuse problem requires a treatment program continuum consisting of three separate substance abuse treatment placements (in-house or contract) to fully address his or her issues. In FY 2011, CSP made 2,117 contract substance abuse treatment placements and 624 transitional housing placements using appropriated funds. In addition, CSOSA's Re-entry and Sanctions Center (RSC) at Karrick Hall provides high risk offenders and defendants with a 28-day intensive assessment, re-entry and treatment readiness counseling program in a residential setting. The RSC program is specifically tailored for offenders/defendants with long histories of crime and substance abuse coupled with long periods of incarceration and little outside support. These individuals are particularly vulnerable to both criminal and drug relapse.

FY 2013 Changes (+\$0.1 million): The FY 2013 budget will provide resources

to continue offender treatment services at current levels.

PSA Drug Prevention

FY 2013 Request: \$11.572 million

(Reflects \$0.8 million decrease from FY 2012)

With a majority of all criminal defendants having substance dependence problems, drug testing services are integral to the judicial process in the District of Columbia and to public safety. Continuation of the services provided by PSA's DCTU and the FTDTL is paramount to the Agency's mission success. Drug testing provides much of the diagnostic and supervision information needed to ensure lower rearrest rates and defendant return for court appearances. Drug use monitoring facilitates risk assessment, enables close supervision, measures the success of drug treatment and assists in predicting future criminality. It is critical to effective community supervision of those on pretrial release, probation and parole; and provides data for law enforcement partners. The FTDTL also provides additional service to the DC Superior Court in testing for juveniles and families.

FY 2013 Changes (-\$0.8 million): PSA's FY 2012 enacted budget includes a multiple year appropriation of \$1,000,000 to relocate the FTDTL. This amount includes the estimated costs of new space build-out, laboratory design expertise, increased lease cost, contract assistance, and miscellaneous expenses. The FY 2013 budget request reflects a reduction of \$800,000 in one-time costs associated with FY 2012 funding to relocate the Lab. In order to offset anticipated additional rent costs at the new location, \$200,000 is added to the FY 2013 requested base budget.

Except for the \$1,000,000 to relocate the PSA lab, PSA's enacted FY 2012 funding level remained at the FY 2011 enacted funding level. In order to cover inflationary increases in operating expenses, PSA made one-time reductions totaling approximately \$1.3M to its FY 2012 operating budget plan. PSA has curtailed spending in training, information technology resources, and other operating costs, and in its drug testing services and contracted drug treatment programs.

In order to meet funding targets in FY 2012 and FY 2013, PSA determined it had to reprioritize how substance-involved defendants are drug tested and treated. PSA will only focus treatment and drug testing resources on defendants under its supervision with the highest risk/need indicators. As part of PSA's efforts to channel its resources to the high risk population, effective November 30, 2011, PSA no longer tests for marijuana in the adult pretrial population, except in limited circumstances, such as defendants participating in treatment programs.

PSA Drug Treatment

FY 2013 Request: \$5.025 million
(Reflects no change from FY 2012)

PSA's Treatment Program include Superior Court Drug Intervention Program (Drug Court), the New Directions Program, the D.C. Misdemeanor and Traffic Initiative (DCMTI), the Specialized Supervision Unit (SSU), and the Sanctions Based Treatment Program (SBT). (The Treatment Program also includes a Social Services and

Assessment Unit that assesses defendants for substance dependence treatment, mental health services, and social services needs). Each of the drug treatment programs is designed to motivate defendants toward compliant behavior and to reduce drug use. Treatment is delivered using in-house staff and contract providers. Each program uses a treatment plan that guides case managers in tailoring and modifying therapeutic interventions for a population involved in the criminal justice system.

FY 2013 Changes (no change): PSA reduced contractual treatment services in order to reach funding targets in FY 2013. Effective January 1, 2012, PSA no longer provides outpatient drug treatment. Reduction of the treatment services will result in fewer defendants receiving the critical care needed as a condition of release pending trial and lessen PSA's ability to respond to public safety concerns, given the correlation between drug usage and rearrest. Supervision of drug-dependent individuals is not effective when the justice system cannot respond quickly to continued drug use with treatment and immediate sanctions.

PERFORMANCE

FY 2011 drug control program mission performance is based on Agency Government Performance and Results Act (GPRA) documents and other agency information. The FY 2011 performance data is displayed below.

Court Services and Offender Supervision Agency		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
>> Percentage of CSP active tested offender population reporting at least one positive drug test (excluding alcohol)	Not Established	40%
>> Percentage of PSA defendants who have a reduction in drug usage following placement in a sanction-based treatment program	74%	84%

Note: Community Supervision Program (CSP) previously identified this measure as an intermediate outcome for which CSP did not establish performance measure targets.

Discussion

Community Supervision Program

CSOSA's CSP has a drug testing policy to both monitor the offender's compliance with the releasing authority's requirement to abstain from drug use and to assess the offender's level of need for substance abuse treatment. This policy also defines the schedule under which eligible offenders are drug tested. Offenders can become ineligible for testing (other than initial testing at intake) for a variety of administrative reasons, including change from active to warrant status, case transfer from DC to another jurisdiction, rearrest, and admission to substance abuse treatment (at which point testing is conducted by the treatment provider). The policy also includes spot testing for offenders who are on minimum supervision, as well as those who do not have histories of drug use and who have established a record of negative tests.

Each offender urine sample may be tested for up to seven drugs (Marijuana, PCP, Opiates, Methadone, Cocaine, Amphetamines and Alcohol). CSP offender samples are tested by the Pretrial Services Agency for the District of Columbia and results provided back to CSP within 48 hours after the sample is taken. On average, CSP drug tested 31,113 samples from 9,044 unique offenders each month in FY 2011.

Of the FY 2011 tested offender population, 40 percent tested positive for illicit drugs at least one time (excluding alcohol) during FY 2011. This is a decrease from FY 2010 when 42 percent tested positive. Data indicate that the slight decline in FY 2011 drug use is due to fewer offenders testing positive for PCP and Cocaine. Use of other drugs including marijuana, opiates, methadone, and amphetamines did not decline in FY 2011. Although a relatively small percentage of the tested offender population produced positive results for PCP, CSP aggressively addresses these high-risk, non-compliant offenders by initiating actions to remove these individuals from the community through placement in residential treatment or a sanctions program. CSP will continue to monitor these trends is currently revising the agency's performance measures and performance targets.

Pretrial Services Agency

Drug using, mentally ill defendants (referred to as dually diagnosed) are at higher risk for rearrest and failure to appear for court. The measures associated with PSA's integration of supervision with treatment are focused on addressing the specialized needs (e.g., drug use, unemployment, and mental health problems) of released defendants. Success in reducing rearrest and failure to appear for court depends on two key factors: 1) identifying and treating drug use and other social problems, and 2) establishing swift and certain consequences

for continued drug use. Sanction-based treatment is one of the most effective tools for breaking the cycle of substance abuse and crime. In addition to public safety benefits, the community also benefits from the cost savings of providing treatment in lieu of incarceration. PSA provides sanctions-based treatment programs to the defendant population as a mechanism for enhancing community safety. In FY 2011, drug-using defendants had a rearrest rate of 16 percent, while non-drug using defendants had a rearrest rate of only 7 percent.

PSA responds to drug use by referring defendants to appropriate treatment and working to ensure their placement.

DEPARTMENT OF DEFENSE



DEPARTMENT OF DEFENSE

Defense Health Program

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Treatment ¹ (for drug abuse only)	\$88.063	\$90.350	\$93.224
Research and Development ² (for alcohol and drug abuse)	\$5.200	\$6.100	\$1.700
Total Drug Resources by Function	\$93.263	\$96.450	\$94.924
Drug Resources by Decision Unit			
Defense Health Program (DHP)	\$93.263	\$96.450	\$94.924
Total Drug Resources by Decision Unit	\$93.263	\$96.450	\$94.924

Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions) ³	\$35.963	\$37.463	\$36.838
Drug Resources Percentage	0.26%	0.26%	0.26%

¹ Treatment estimates reflect medical care costs only and exclude the following costs: administrative expenses, pharmaceuticals, health care costs of Medicare-eligible beneficiaries, and enrollees of the US Family Health Plan.

² Research estimates include one-time Congressional funding additions of \$5.1 million in FY 2011 and \$4.5 million in FY 2012.

³ Total agency budget represents the Unified Medical Care budget less the Medicare Eligible Retiree Health Care Fund.

Program Summary

MISSION

The medical mission of the Department of Defense (DoD) is to enhance DoD and the nation's security by providing health support for the full range of military operations and sustaining the health of all those entrusted to their care. The Defense Health Program (DHP) appropriation funding provides for worldwide medical and dental services to active forces and other eligible beneficiaries, veterinary services, medical command headquarters, specialized services for the training of medical personnel, and occupational and industrial health care.

Included are costs associated with provisions of the TRICARE benefit, as well as the costs of a relatively new program in Alcohol and Substance Abuse research supported by the DHP. The TRICARE benefit provides for the health care of active duty service members, National Guard and Reserve members, retirees, their families, survivors and certain former spouses worldwide. As a major component of the Military Health System (MHS), TRICARE brings together the health care resources of the uniformed services and supplements them with networks of civilian health care

professionals, institutions, pharmacies, and suppliers to provide access to high-quality health care services while maintaining the capability to support military operations.

METHODOLOGY

With the exception of Congressionally-directed research activities, the DHP appropriation does not have specific line items or programs designated for drug control activities. As a result, the FY 2011 reported amount for substance abuse treatment costs is based on an extract of inpatient and ambulatory encounter claims data containing selected drug abuse primary diagnoses and procedures, whether provided by MHS staff (direct care) or from private providers (purchased care). Excluded from the total treatment cost are administrative expenses (e.g. contract, claims processing), prescription costs (because pharmaceutical records do not contain diagnoses codes), Medicare-eligible beneficiary treatment costs (not paid by the Defense Health Program appropriation), US Family Health Plan (a TRICARE health plan) and beneficiary treatment costs (because such care is funded on a capitated basis, and claims level data are not available for these beneficiaries).

The treatment costs reported for FY 2012 and FY 2013 are estimates. These amounts were derived by applying the estimated growth rates of the direct care and purchased care system costs to the FY 2011 actual treatment costs. DoD and ONDCP are working to improve the methodology for developing more reliable estimates of future DHP drug treatment costs. Over the past several years, the DHP has experienced greater increases in drug treatment expenditures than the overall medical inflation rate. However, it is possible that

these increases could slow down significantly in future years with the conclusion of the Department's combat mission in Iraq. Additional analysis is needed in the coming years to better understand underlying factors associated with these costs.

Costs for DHP-related research activities are based upon current planning, and actuals may vary based upon projects received and selected for funding.

BUDGET SUMMARY

The DoD budget request of \$94.9 million, within the DHP appropriation for FY 2013 health care costs and research efforts relating to treatment and research into the causes of drug dependence and abuse, prevention and treatment. This amount reflects an overall decrease of \$1.5 million from the FY 2012 level of \$96.5 million. The FY 2012 estimate includes a \$4.5 million one-time Congressional addition for "Peer-Reviewed Research in Alcohol and Substance Abuse Disorders Research." Treatment costs are estimated to increase by \$2.9 million over FY 2012.

Defense Health Program

FY 2013 Request: \$94.9 million
(Reflects \$1.5 million decrease from FY 2012)

The FY 2013 request for DoD's Defense Health Program (DHP) appropriation includes \$94.9 million for drug-related treatment and research activities. In support of its mission to provide medical services and support to members of the Armed Forces to keep them physically prepared for deployment, the DoD provides a comprehensive TRICARE substance abuse treatment benefit to all members of the armed forces, delivered in a regional

environment, with a seamless worldwide continuity of care. In addition, pursuant to applicable authorities, the DoD offers substance abuse treatment to all eligible beneficiaries.

FY 2013 Changes (-\$1.5 million): The overall reduction is due to a \$4.5 million one-time Congressional add-on for "Peer-Reviewed Research in Alcohol and Substance Abuse Disorders Research" provided in FY 2012.

prevention and treatment interventions for alcohol and substance use disorders applicable to military populations. Future research will aim to translate and evaluate effectiveness of brief interventions for preventing and treating alcohol and substance use disorders.

PERFORMANCE

Information regarding the activities of the DHP is drawn from agency documents and other DHP information. The MHS will be revising guidance to the Services on substance use disorder screening, evaluation and treatment to evaluate existing and potential metrics. ONDCP will be working with MHS to develop appropriate performance measurements that reflect the agency's contribution to the *National Drug Control Strategy*.

The DoD medical research portfolio aims to address the continuum of alcohol and substance abuse, including research aimed at prevention, screening, assessment, and diagnosis, as well as treatment and recovery. In FY 2011, the DHP supported a relatively new program in Alcohol and Substance Abuse research. The initial research effort focused on understanding the underlying mechanisms of alcohol and substance abuse within the context of other behavioral health issues (e.g., posttraumatic stress, depression) in general and also within the military context (e.g., military service, deployment, reintegration, operational stressors). Studies were also aimed at developing evidence-based

DEPARTMENT OF DEFENSE

Drug Interdiction and Counterdrug Activities

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$185.350	\$202.216	\$231.206
Interdiction	480.143	506.636	495.809
International	680.777	685.474	642.361
Investigations	14.076	14.610	14.709
Prevention	121.504	155.618	109.606
Research and Development	15.834	12.857	9.512
State and Local Assistance	245.596	251.424	127.084
Total Drug Resources by Function	\$1,743.280	\$1,828.835	\$1,630.287
Drug Resources by Decision Unit			
Drug Interdiction and Counterdrug Activities	1,154.706	1,209.620	998.650
Overseas Contingency Operations	440.510	456.458	469.025
Counternarcotics OPTEMPO	\$148.064	\$162.757	\$162.612
Total Drug Resources by Decision Unit	\$1,743.280	\$1,828.835	\$1,630.287
Drug Resources Personnel Summary			
Total FTEs (direct only)	1,711	1,810	1,753
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$708.2	\$670.9	\$614.0
Drug Resources Percentage	0.23%	0.29%	0.27%

Program Summary

MISSION

The Department of Defense's (DoD) authorities and resources provide useful and flexible tools to achieve national security goals. The threat to U.S. national security posed by illicit drugs extends beyond traditional challenges to public health and safety. Illicit drug trafficking is a powerful and corrosive force weakening the rule of law in affected countries and preventing governments from effectively

reducing or containing other transnational threats such as terrorism, insurgency, organized crime, weapons trafficking, money laundering, human trafficking, and piracy.

DoD has long recognized the linkages between international drug trafficking organizations (DTOs), transitional criminal organizations (TCOs), and international terrorism; these actors often finance their activities with the proceeds from narcotics

trafficking. The Department's counternarcotics programs and activities can detect, monitor, and support the interdiction, disruption, or curtailment of the ever-expanding narcotics-related threats to our national security. Counternarcotics resources and authorities provide an effective combination of tools that support U.S. and partner nation efforts to combat international narcotics trafficking.

METHODOLOGY

The majority of DoD counternarcotics resources (except for substance abuse treatment – see the Defense Health Program) are requested through the Drug Interdiction and Counterdrug Activities appropriation. These funds are allocated to specific programs and projects and then transferred to the most appropriate Service or DoD agency for implementation. With this flexibility, the DoD counternarcotics program can address the ever-changing patterns in the narcotrafficking threats by shifting counterdrug resources where it will most effectively be used.

CN OPTEMPO is defined as the estimated level of funding for DoD's aircraft flight hours and ship steaming days in support of counternarcotics activities. The Military Services derive these estimates by multiplying the aircraft cost per flight hour/ship steam days to the number of hours/days the system is employed in counternarcotics activities, and may include transit time, on-station time, and training.

BUDGET SUMMARY

The Department of Defense request of \$1,630.3 million for FY 2013 reflects a program decrease of \$198.5 million from

the FY 2012 level of \$1,828.8 million. This decrease primarily reflects the elimination of lower priority programs, while preserving our most important capabilities; savings and efficiency initiatives resulting from reductions in overhead, contract services, civilian and military compensation; and the reduction in some core program areas.

Counternarcotics

(Includes Operating Tempo (OPTEMPO) and supplemental overseas contingency operations (OCO) requests)

Total FY 2013 Request: \$1,630.3 million

(Reflects \$198.5 million decrease from FY 2012)

Department of Defense counternarcotics resources are initially appropriated into the Central Transfer Account. These funds are allocated to specific programs and projects, and then transferred to the most appropriate Service for implementation.

Demand Reduction

FY 2013 Request: \$109.6 million

(Reflects \$46.0 million decrease from FY 2012)

The total \$109.6 million request will provide \$28.4 million for the Military Services collections; \$20.2 million for Military Service prevention, education and outreach; \$44.9 million for Military Service laboratory testing operations; \$10.1 million for Joint Service operations; \$5.4 million for DoD Agency civilian collection and laboratory testing; and \$0.6 million for DoD Agency civilian prevention, education, and outreach. These funds support 100 percent drug testing for active duty and reserve personnel and DoD civilian employees, drug abuse prevention/education activities for military and civilian personnel and their dependents, and drug treatment for military personnel.

FY 2013 Changes (-\$46.0 million): This change from prior year primarily is reflective of a onetime increase in FY 2012 only to improve drug testing of military applicants during the accession process and implement random drug testing for possible misuse of prescription drugs.

Domestic Support

FY 2013 Request: \$147.7 million

(Reflects \$90.5 million decrease from FY 2012)

This funding supports Federal, state, and local drug law enforcement agencies' (DLEAs) requests for domestic operational and logistical support to address drug-related crime. Of this amount, \$116.6 million will support a portion of the total National Guard State Plans that supports domestic law enforcement efforts and counter-narcoterrorism schools; \$12.0 million is for Domestic Operational Support, such as U.S. Northern Command (USNORTHCOM) counter-narcoterrorism support to DLEAs and Title 10 National Guard translation efforts; and \$19.1 million is for domestic detection and monitoring efforts, such as Tethered Aerostats.

FY 2013 Changes (-\$90.5 million): This change from the prior year is largely the result of lower funding for the National Guard State Plans.

Intelligence and Technology

FY 2013 Request: \$191.8 million

(Reflects \$18.8 million decrease from FY 2012)

Intelligence programs collect, process, analyze, and disseminate information required for counternarcotics operations. Technology programs increase DoD's capabilities to target the nexus among narcotics traffickers, terrorists, and insurgents activity. A total of \$73.9 million

will provide counter-narcoterrorism intelligence support and analysis; \$61.3 million is for signals intelligence (SIGINT) collection and processing; \$26.9 million is for Military Service and Special Operations command and control programs; \$16.0 million is for counternarcotics technology efforts; and \$13.7 million will provide Operational Support.

FY 2013 Changes (-\$18.8 million): This decrease primarily reflects a decrease in technology activities in support of the Combatant Commands.

International Support

FY 2013 Request: \$1,181.2 million

(Reflects \$43.2 million decrease from FY 2012)

International support programs include efforts in the U.S. Central Command, U.S. Southern Command, U.S. Pacific Command, U.S. Northern Command, U.S. Africa Command, and U.S. European Command, areas of responsibility (AOR) to detect, interdict, disrupt, or curtail activities related to substances, material, weapons, or resources used to finance, support, secure, cultivate, process, or transport illegal drugs. \$775.7 million supports operations in these AORs, including providing equipment under Section 1033 authority (this includes \$469.0 million requested as a part of the Department's Overseas Contingency Operations (OCO) request); \$246.6 million is for detection and monitoring platforms and assets (including CN OPTEMPO), primarily in the Western Hemisphere Transit Zone; \$5.8 million is for technology; \$5.1 million is for support and analysis; and \$48.0 million is for command and control support, including operations of Joint Interagency Task Force-South (JIATF-S) and Joint Interagency Task Force-West (JIATF-W).

FY 2013 Changes (-\$43.2 million): The decrease is primarily the result of lower funding in support for building capacity efforts within the Geographic Combatant Commands' Areas of Responsibility. The request does include a \$12.6 million increase over FY 2012 in OCO funding to support continued counternarcotics interdiction efforts in Afghanistan and Central Asia, along with further counternarcotics law enforcement capacity building.

PERFORMANCE

This section on the FY 2011 performance of the DoD counternarcotics program is based on agency Government Performance and Results Act (GPRA) documents and other agency information. It includes selected performance measures, targets, and achievements for the latest year in which data were available. In FY 2011, DoD refocused its counternarcotics activities around three strategic goals:

- *Strategic Goal 1* - To disrupt and, to the degree possible disable, not only the nexus of actors and activities but also the individual activities of trafficking, insurgency, corruption, threat finance, terrorism and distribution of precursor chemicals in Afghanistan/Pakistan such that material support for the insurgency and terrorists is significantly reduced, the Afghan National Police and other law enforcement agencies are strengthened, and the governments of Afghanistan and Pakistan are reinforced.
- *Strategic Goal 2* - Illicit drug and drug precursor trafficking and related transnational organized criminal threats to U.S. national security interests in the Western Hemisphere – particularly in

Mexico, Central America, Colombia, and Peru – are reduced sharply in a manner sustained by partner nations.

- *Strategic Goal 3* - The size, scope, and influence of targeted Transnational Criminal Organizations and trafficking networks are mitigated such that these groups pose only limited, isolated threats to U.S. national security and international security. The United States and partner nations have developed layered, coordinated approaches that regularly disrupt the operations of these organizations and networks, limit their access to funding, reduce their assets, and raise their costs of doing business.

These strategic goals are intrinsically linked to the *National Drug Control Strategy's Strengthen International Partnerships* principles, and through these goals, DoD successfully implemented its transition plan to improve the quality and usefulness of its counternarcotics performance measurement system. The system enables DoD to logically assess its contribution to achieving the *National Drug Control Strategy*.

DoD continued to provide significant support to U.S. and partner nation drug law enforcement agencies in the areas of training, communications support, infrastructure, intelligence, transportation, equipment, command and control, and detection and monitoring. Additionally, the Department is committed to keeping drug use low among its active duty and civilian personnel. Selected examples of performance measures used to monitor and evaluate DoD counternarcotics activities are provided in the following table.

Department of Defense		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
Demand Reduction		
» Active duty military personnel testing positive for drug use	under 2%	0.94%
» DoD civilian personnel testing positive for drug use	under 1%	0.28%
Strategic Goal 1		
» Counter Narcotics Task Force (CNTF) Capability Milestone Rating**	CM-2	CM-3
Strategic Goal 2		
» Support interagency operations to disrupt 40% of the cocaine flow by 2015	32%	26%
Strategic Goal 3		
» Total value in U.S. dollars of black market goods seized (Western Hemisphere)***	*	\$16,000,000
Counternarcotics OPTEMPO (Western Hemisphere)		
» Air platforms: Number of flight hours	*	46,404
» Sea platforms: Number of ship steaming days	*	859

* Targets not established.

** The primary method for metrics utilized by the CNTF programs is the Capability Milestones (CM) Rating System. This system was developed and is utilized by the NATO Training Mission – Afghanistan (NTM-A) and is a critical part of the Afghanistan Ministry of Interior Development Plan (MDP). The CM Rating System is applied to all Ministry components utilizing a numeric rating (1 through 4) to determine level of capability. A significant portion of the ratings are subjective and qualitative, depending on the subjective nature of the assessed rating area. Quantitative data is also applied as much as possible to support the rating. The generic definition of the rating system is outlined below:

- CM-1 (85% to 100% Capability) – ability to accomplish mission or task autonomous or with minimal coalition oversight
- CM-2 (70% to 84% Capability) – ability to accomplish mission or task with some coalition assistance
- CM-3 (50% to 69% Capability) – ability to accomplish mission or task with significant coalition assistance
- CM-4 (49% or less Capability) – cannot accomplish mission or task

*** Seizures of goods associated with transnational trade-based money laundering of drug trafficking proceeds

Discussion

Demand Reduction: DoD is on track to keep the illicit drug positive rate below two percent. Defense policy is to ensure 100 percent random urine drug testing for all active, reserve, and National Guard. Given the success of Defense civilian drug testing

program, the DoD random testing rate for civilians in testing designated positions will be 100 percent over a 2-year period, or 50 percent of the workforce per year.

Strategic Goal 1: The objective of the CNTF programs is to create and transition to the

Government of the Islamic Republic of Afghanistan accountable, effective, and self-reliant Afghan counternarcotics security forces capable of containing the illicit drugs trade, including by strengthening U.S. and foreign law enforcement support capabilities (through the provision of training, equipment, infrastructure, intelligence support, and command, control, communications, computers, and intelligence systems) to sustain counternarcotics efforts as U.S. military forces draw down. The CNTF program has contributed to 582 metric tons of drug seizures and revenue from border law enforcement in the amount of \$18 million dollars. Training was an issue for Afghan counternarcotics security forces and led to increased reliance on coalition assistance. DoD has increased its focus on train-the-trainer programs and ensuring all training program graduates meet required training criteria. DoD also is committed to capacity building projects to increase the habitability of facilities used by Afghan counternarcotics security forces.

Strategic Goal 2: DoD supports U.S. Government efforts to reduce the quantity of illicit drugs entering the United States from Mexico and Central and South America. DoD contributes to the *National Drug Control Strategy* goal of interdicting 40 percent of the cocaine moving through the Western Hemisphere transit zone by 2015. Defense counternarcotics activities support the establishment of a whole-of-government concept of operations, synchronized with transit zone interdiction efforts, for interdicting bulk cash and illicit weapons exiting the United States to Mexico. DoD continues to work with other government agencies and Departments to build the capacity of Western Hemisphere

partners to deny Transnational Criminal Organizations the use of their territory, air space, and surrounding sea lines of communication. In Central America, DoD provided 72 tactical border vehicles and 9 maritime interdiction boats to Partner Nations and expanded surveillance in maritime high trafficking areas. In Mexico, DoD provided training in human rights, rule of law, and ethics/values and shared information with Mexican authorities. The effect of information sharing was strong, with between 51 percent – 75 percent of success in counternarcotics operations being attributable to information sharing. DoD encountered significant challenges with sustainment and maintenance of equipment provided to Partner Nations, which limited operational readiness rates to below 85 percent.

Strategic Goal 3: DoD counternarcotics activities supports DoD's work with other government agencies and Departments to build the capacity of Asian partners (with a focus on the Philippines, Indonesia, Thailand, Vietnam, and Cambodia) to disrupt and degrade the nexus among Transnational Criminal Organizations, illicit drug trafficking, foreign terrorist organizations, and militant movements. Efforts also include working with U.S. interagency and foreign partners to develop policies and procedures to discourage piracy and to build the counter piracy capacity of partner nations (with a particular focus on Kenya; the Seychelles; the Strait of Malacca and Singapore; and the Tri-Border region of the Philippines, Malaysia, and Indonesia). Defense counternarcotics activities in the Europe Region focus on work with other government agencies and Departments and local counternarcotics and law enforcement

agencies to engage with and build the capacity of European partners (with a particular focus on Turkey, Bulgaria, the Balkans, and other Mediterranean countries) to secure their borders, deny the use of air, land, and coastal waters for illicit drug trafficking and transnational criminal activities, and prevent illicit drugs from entering and ill-gotten proceeds from exiting these countries. In the Pacific, DoD provided law enforcement training to 1,177 students and delivered 10 facilities for use in border control, law enforcement, and information sharing. Information sharing enabled DoD to provide intelligence cueing that resulted in the seizure of 623 metrics tons of illicit chemicals used in the production of amphetamine type substances. In Africa, DoD executed 105 capacity building events that increased Partner Nation capabilities in border control, interdiction, law enforcement, information sharing, and operations. In Europe, DoD provided border management and law enforcement training to 157 students, delivered 2 base of operations facilities, and installed 3 information sharing systems.

DEPARTMENT OF EDUCATION



DEPARTMENT OF EDUCATION
Office of Safe and Drug-Free Schools

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prevention	\$123.888	\$64.877	\$108.250
Total Drug Resources by Function	\$123.888	\$64.877	\$108.250
Drug Resources by Decision Unit			
Safe and Drug-Free Schools and Communities	\$123.888	\$64.877	\$0.000
<i>Alcohol Abuse Reduction (non-add)</i>	6.907	0.000	0.000
<i>Safe and Supportive Schools (non-add)</i>	47.751	47.543	0.000
<i>Safe Schools/Healthy Students (non-add)</i>	63.487	17.334	0.000
<i>Other Activities and Set-asides (non-add)</i>	3.868	0.000	0.000
Successful, Safe and Healthy Students	0.000	0.000	108.250
<i>Safe and Supportive Schools (non-add)</i>	0.000	0.000	48.610
<i>Safe Schools/Healthy Students (non-add)</i>	0.000	0.000	17.000
<i>State and Local Grants (non-add)</i>	0.000	0.000	37.327
<i>Other Activities and Set-asides (non-add)</i>	0.000	0.000	5.313
Total Drug Resources by Decision Unit	\$123.888	\$64.877	\$108.250

Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$45.3	\$45.3	\$47.0
Drug Resources Percentage	0.3%	0.1%	0.2%

The total agency budget reflects discretionary funds only, excluding Pell Grants. FY 2012 continuation costs of approximately \$86.8 million for Safe and Supportive Schools, and \$27.2 million for Alcohol Abuse Reduction would be provided from the appropriation for the Successful, Safe, and Healthy Students program.

Program Summary

MISSION

The Department of Education administers programs to help ensure that all students can meet challenging standards and to improve elementary and secondary education; special education and early intervention programs for children with disabilities; English language acquisition for limited English proficient and immigrant

children; career, technical, and adult education; and higher education. In addition, Education carries out research, data collection, and civil rights enforcement activities.

METHODOLOGY

The programs funded under the Safe and Drug-Free School and Communities (SDFSC)

Act and the proposed Successful, Safe, and Healthy Students program comprise the only Education operations included in the drug control budget. The SDFSC program includes grants and discretionary activities to foster a safe, secure, and drug-free learning environment, facilitate emergency management and preparedness, and prevent student drug use and violence at all educational levels. The Successful, Safe, and Healthy Students program would consolidate several existing, sometimes narrowly targeted, programs (including safe and drug-free schools, access to counseling and mental health services, and fostering a physically fit and healthy lifestyle) to help schools provide the programs and activities (including those that foster a healthy drug free learning environment) that support students' success. The SDFSC program supports (and the Successful, Safe, and Healthy Students program once enacted and funded would support) the prevention mission of the *National Drug Control Strategy*.

The Department's budget for drug control programs includes all funding under SDFSC National Programs in FY 2011 and FY 2012, with the exception of the following activities that have no clear drug control nexus: Project SERV (School Emergency Response to Violence), a crisis response program that provides education-related services to local educational agencies in which the learning environment has been disrupted due to a violent or traumatic crisis; and School Emergency Preparedness initiatives.

For FY 2013, Education's budget request for drug control programs includes all funding for Successful, Safe, and Healthy Students, except for amounts corresponding to the

components of the request that have no clear drug control nexus (School Emergency Preparedness initiatives, and continuation costs that would be subsumed under the proposed Successful, Safe, and Healthy Students program for projects originally funded under the Physical Education program and the Elementary and Secondary School Counseling program.)

BUDGET SUMMARY

The Department of Education request of \$108.3 million for FY 2013 reflects a \$43.4 million increase from the FY 2012 level of \$64.9 million.

Successful, Safe, and Healthy Students Program

**Total FY 2013 Request: \$108.3 million
(Reflects \$43.4 million increase over FY 2011)**

This new program will support student achievement and help ensure students are mentally and physically healthy and ready to learn. The objective is to create an improved school climate that reduces drug use, violence, and harassment and improves school safety and students' physical and mental well-being. Within the program, the Department would use \$85.9 million to award grants to assist state educational agencies and local educational agencies (LEAs) to develop and implement programs and activities that create safe environments. Included in this amount is \$37.3 million for Successful, Safe, and Healthy Students State and Local Grants, and \$48.6 million for grants for Safe and Supportive Schools projects to support statewide measurement of, and targeted programmatic interventions to improve, conditions for learning in order to help schools improve student safety and reduce drug abuse.

\$17 million would provide grant awards under the “Safe Schools/Healthy Students” initiative. Safe Schools/Healthy Students supports LEAs and communities in developing and implementing a comprehensive set of programs and services to prevent youth drug use and violence, support early childhood development activities, and provide needed student mental health services. Education blends this initiative with the Department of Health and Human Services (HHS) Youth Violence Prevention Program and administers it in collaboration with both HHS and the Department of Justice.

FY 2013 Changes (+\$43.4 million): The FY 2013 President’s Budget provides funding to support the additional *Successful, Safe, and Healthy Students* National Activities described above, as well as cover continuation costs of grants originally funded under SDFSC National Programs, including Safe and Supportive Schools grants, which the Administration created in 2010 to support statewide measurement of, and targeted programmatic interventions to improve, conditions for learning in order to help schools improve safety and reduce drug use.

PERFORMANCE

This section on the FY 2011 performance of the SDFSC program is based largely on agency GPRA documents and other agency information. The table includes performance measures, targets, and achievements for the latest year for which data are available.

Department of Education		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
Alcohol Abuse Reduction		
2008 cohort – Percentage of Alcohol Abuse Reduction grantees whose target students show a measurable decrease in binge drinking	70%	*
2009 cohort – Percentage of Alcohol Abuse Reduction grantees whose target students show a measurable decrease in binge drinking	65%	67%
2010 cohort – Percentage of Alcohol Abuse Reduction grantees whose target students show a measurable decrease in binge drinking	**	*
2008 cohort – Percentage of Alcohol Abuse Reduction grantees showing measurable increase in the percentage of target students who believe alcohol abuse is harmful to their health	65%	*
2009 cohort – Percentage of Alcohol Abuse Reduction grantees showing measurable increase in the percentage of target students who believe alcohol abuse is harmful to their health	100%	67%
2010 cohort – Percentage of Alcohol Abuse Reduction grantees showing measurable increase in the percentage of target students who believe alcohol abuse is harmful to their health	**	*
2008 cohort – Percentage of Alcohol Abuse Reduction grantees that show measurable increase in the percentage of target students who disapprove of alcohol abuse	65%	*
2009 cohort – Percentage of Alcohol Abuse Reduction grantees that show measurable increase in the percentage of target students who disapprove of alcohol abuse	100%	67%
2010 cohort – Percentage of Alcohol Abuse Reduction grantees that show measurable increase in the percentage of target students who disapprove of alcohol abuse	**	*
Safe Schools/Healthy Students		
2007 cohort – Percentage of Safe Schools/Healthy Students grant sites that report a decrease in the percentage of their students who report current (30-day) marijuana use	59.9%	51.9%
2008 cohort – Percentage of Safe Schools/Healthy Students grant sites that report a decrease in the percentage of their students who report current (30-day) marijuana use	52.5%	58.3%
2009 cohort – Percentage of Safe Schools/Healthy Students grant sites that report a decrease in the percentage of their students who report current (30-day) marijuana use	50%	55.2%
2007 cohort – Percentage of Safe Schools/Healthy Students grant sites that report a decrease in the percentage of their students who report current (30-day) alcohol use	79.5%	70.4%
2008 cohort – Percentage of Safe Schools/Healthy Students grant sites that report a decrease in the percentage of their students who report current (30-day) alcohol use	61.8%	75%*
2009 cohort – Percentage of Safe Schools/Healthy Students grant sites that report a decrease in the percentage of their students who report current (30-day) alcohol use	50%	58.6%

Department of Education		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
Student Drug Testing		
2008 cohort – Percentage of Student Drug Testing grantees experiencing 5% annual reduction in past-month drug use by students in target population served by grants	70%	*
2008 cohort – Percentage of Student Drug Testing grantees experiencing 5% annual reduction in past-year drug use by students in target population served by grants	65%	*
Safe and Supportive Schools		
2010 cohort – Percentage of eligible schools implementing programmatic interventions funded by Safe and Supportive Schools that experience a decrease in the percentage of students who report current (30-day) alcohol use	**	***
2010 cohort – Percentage of eligible schools implementing programmatic interventions funded by Safe and Supportive Schools that experience an increase in the percentage of students who report current (30-day) alcohol use	**	***
2010 cohort – Percentage of eligible schools implementing programmatic interventions funded by Safe and Supportive Schools that experience an improvement in their school safety score	**	***
2010 cohort – Percentage of eligible schools implementing programmatic interventions funded by Safe and Supportive Schools that experience a worsening in their school safety score	**	***

* 2011 data expected in 2012

** Target not established since 2 years of performance data are needed to establish the baseline for this cohort

*** 2011 achievement not applicable because 2 years of performance data are needed to establish the baseline for this cohort

Discussion

The Department has identified outcome measures and targets for the SDFSC National Programs grant competitions; FY 2011 grantee data have not yet been compiled for all of the measures. Data are based primarily on analyses of grantee performance reports.

The **Safe Schools/Healthy Students** initiative provides support to LEAs for implementation of a comprehensive plan to create safe, disciplined, and drug-free environments that provide needed mental health services and support healthy development. Grantees collect and report data on rates of student alcohol and drug

use (marijuana) as two of the initiative's GPRA measures.

The most recent FY 2011 GPRA data available indicate improvement between 2010 and 2011 on all six of the above GPRA measures. For example, 51.9, 58.3, and 55.2 percent, respectively, of the 2007, 2008, and 2009 grant cohorts reported a decrease in the percentage of students reporting current (30 day) marijuana use—compared to only 37.5, 43.6, and zero percent, respectively, in 2010. Similarly, 70.4 percent, 75 percent, and 58.6 percent, respectively, of the 2007, 2008, and 2009 grant cohorts reported a decrease in the percentage of their students who report

current alcohol use—compared to only 66.7, 60, and zero percent in 2010.

The first evaluation of this program focused on the fiscal year 1999, 2000, and 2001 cohorts supported under the initiative, a total of 97 sites. Data from this evaluation identified statistically significant improvements in student outcomes related to alcohol, tobacco, and other drug use. For example, student self-report data for high school students reflected decreases in 30-day alcohol and tobacco use and cigarette sales on school property; those data also reflected increases in perceived disapproval of peer substance use. Initial data from a second evaluation, of 175 sites in the fiscal year 2005–2009 cohorts, also demonstrate positive findings, including reduced alcohol and other drug use by students.

The ***School-Based Student Drug Testing*** program provided grants to LEAs and other entities to support development, implementation, or expansion of school-based student drug testing programs. Congress last appropriated funds for new awards in FY 2008. The drug testing funded by these grants was required to be part of a comprehensive drug prevention program in the schools served by the grant and provide for the referral to treatment or counseling of students identified as drug users. The projects supported were also required to be consistent with Supreme Court decisions regarding student drug testing.

There was wide variation in performance across grant cohorts on the GPRA measures in FY 2010 (the most recent year for which data are available), possibly due in part to diverse factors including cohort size and how far along (in terms of years) the projects were in their implementation.

Final (2011) data for the 2008 cohort are expected later in 2012.

The ***Grants to Reduce Alcohol Abuse*** program, which was last funded in 2011, provided funds to LEAs to support the implementation of evidence-based strategies designed to reduce the use and abuse of alcohol by secondary school students. Results for several cohorts of grantees reflect some successes in meeting the targets for measurable decreases in student binge drinking, percentage of students who believe that alcohol abuse is harmful to their health, and percentage of students who disapprove of alcohol abuse. For example, the 2007 cohort achievement (83 percent of grantees reporting that their target students showed a measurable decrease in binge drinking in 2010) exceeded its target of 49.4 percent. Likewise, 88.9 percent of 2007 cohort grantees reported a measureable increase in the percentage of students who disapproved of alcohol abuse in 2010 (exceeding the 49.4 percent target); and 88.9 percent of 2007 cohort grantees reported a measurable increase in the percentage of target students who believe that alcohol abuse is harmful to their health (exceeding the target of 80.3 percent). As indicated in the note to the table above 2011 data on these measures for the 2008 and 2010 cohorts are expected later in 2012.

The ***Grants to Prevent High-Risk Drinking among College Students*** competition, which was last funded in 2010, provided funds to institutions of higher education (IHEs) and other eligible entities to prevent alcohol abuse and violent behavior by college students. Grantees from the FY 2007 cohort have completed their projects

and reported baseline and project-end data: 73 percent of these grantees reported at least a 5 percent decrease in high-risk drinking by students served.

The ***Grants for Coalitions to Prevent and Reduce Alcohol Abuse at Institutions of Higher Education*** competition provided funds in 2009 and 2010 to IHEs, state agencies, and nonprofit entities to develop, expand, or enhance statewide coalitions to prevent and reduce alcohol abuse by targeting under-age students at IHEs, both on campuses and in surrounding communities. Baseline data for the 2009 cohort will be available in 2012 on the following performance measures: (1) the percentage of grantees that demonstrate a reduction in 30-day alcohol use among under-age students at participating IHEs; and (2) the percentage of grantees that demonstrate a reduction in 30-day binge drinking among under-age students at participating IHEs.

In 2010 the Department awarded the first round of ***Safe and Supportive Schools grants*** to state educational agencies for targeted interventions to help schools improve safety and reduce substance abuse. Baseline data will be available by 2013 on performance measures for the 2010 cohort of these grants—these measures focus on the percentage of participating schools that experience (i) a decrease/increase in the percentage of students reporting current (30-day) alcohol use, (ii) an improvement/worsening in their school safety score. The school safety score is an index of school safety that may include the presence and use of illegal drugs (including alcohol and marijuana).

FEDERAL JUDICIARY



FEDERAL JUDICIARY

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Corrections	\$499.741	\$501.996	\$515.223
Prosecution	430.528	433.970	446.690
Research and Development	5.259	5.166	5.340
Treatment	191.356	192.213	197.278
Total Drug Resources by Function	\$1,126.884	\$1,133.345	\$1,164.531
Drug Resources by Decision Unit			
Administrative Office of the U.S. Courts	\$0.912	\$0.912	\$0.936
Court Security	23.334	25.000	25.734
Federal Judicial Center	2.183	2.160	2.217
Fees of Jurors and Commissioners	14.032	13.926	14.593
Defender Services	174.368	175.270	180.798
Salaries and Expenses	907.016	911.127	935.133
U.S. Sentencing Commission	5.041	4.950	5.118
Total Drug Resources by Decision Unit	\$1,126.884	\$1,133.345	\$1,164.531

Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$6.681	\$6.729	\$6.917
Drug Resources Percentage	16.9%	16.8%	16.8%

Program Summary

MISSION

The Federal Judiciary provides fair and impartial justice within the jurisdiction as conferred by the Constitution and Congress.

In support of the *National Drug Control Strategy*, the Judiciary's drug-related resources represent an estimate of the Judiciary's resources associated with the adjudication of Federal laws, the representation for indigent individuals accused under these laws, and the supervision of offenders and defendants.

Probation and pretrial services officers have primary responsibility for enforcing conditions of release imposed by the courts and for monitoring the behavior of persons placed under their supervision. With the oversight of the Administrative Office of the United States Courts, officers administer a program of substance abuse testing and treatment for persons on pretrial release, probation, supervised release after incarceration, and parole. The goal is to improve compliance with terms of supervision such as substance use and

address violations before relapse leads to recidivism.

METHODOLOGY

The drug portion of the Judiciary's budget is estimated by applying the percentage of drug-related activity in each appropriation to the current appropriation or requested funding. The percentages are developed by analyzing the workload of each component of the Judiciary's budget, estimating the amount that is attributed to drug-related crime, prosecution, treatment, or corrections, and then rounded to the nearest five percent before application. The percentages are updated each September to reflect the most recent drug workload information available.

The Federal Judiciary is organized geographically into twelve Judicial Circuits and ninety-four Districts, each with supporting offices, such as the Office of the Clerk of the Court, Probation and Pretrial Services Offices and Bankruptcy Courts. The courts receive administrative support from the Administrative Office of the U. S. Courts and research and training services from the Federal Judicial Center and the United States Sentencing Commission. In addition to personnel and court operating expenses, Judiciary costs include payments to jurors, payments to defense attorneys for indigent defendants, court reporting and interpreting, and court facility security. The resources also support drug cases, trials, defendants, and their associated costs. The Judiciary also provides for court ordered drug testing, drug treatment, and supervision of Federal defendants, probationers, parolees and supervised releasees.

Drug-related workload is identified by the types of cases being heard as well as the offenses of the individuals needing counsel or under supervision. Funding is used by the probation and pretrial services offices for drug testing and treatment of Federal defendants and offenders.

BUDGET SUMMARY

For FY 2013, the drug control budget request totals \$1,164.5 million, an increase of \$31.2 million over the FY 2012 enacted level.

Salaries and Expenses

Total FY 2013 Request: \$935.1 million
(Reflects \$24.0 million increase over FY 2012 enacted level)

The Salaries and Expenses request includes salaries, benefits, and other operating expenses of judges and support personnel for the United States courts of appeals, district courts, bankruptcy courts, and probation and pretrial services officers and staff.

FY 2013 Changes (+\$24.0 million): The FY 2013 increase reflects pay and inflationary adjustments that will allow the courts to maintain current services.

Defender Services

Total FY 2013 Request: \$180.8 million
(Reflects \$5.5 million increase over FY 2012 enacted level)

The Defender Services program provides effective representation for any person financially unable to obtain adequate representation in Federal criminal and certain related proceedings.

FY 2013 Changes (+\$5.5 million): The FY 2013 budget reflects pay and inflationary adjustments that will allow

the Judiciary to meet its constitutional obligation to provide defense counsel to all eligible persons.

Fees of Jurors and Commissioners

Total FY 2013 Request: \$14.6 million
(Reflects \$0.7 million increase over FY 2012 enacted level)

The FY 2013 request includes funding for jurors sitting on drug cases.

FY 2013 Changes (+\$0.7 million): The increase reflects inflationary adjustments to base.

Court Security

Total FY 2013 Request: \$25.7 million
(Reflects \$0.7 million increase over FY 2012 enacted level)

This program provides security for judicial areas at courthouses and in Federal facilities housing court operations. The U.S. Marshals Service acts as the Judiciary's agent in contracting for security and guard services and the purchase, installation, and maintenance of security systems and equipment for all court locations.

FY 2013 Changes (+\$0.7 million): The increase reflects inflationary adjustments to base.

Administrative Office of the United States Courts

Total FY 2013 Request: \$0.9 million
(Reflects no change from FY 2012 enacted level)

The Administrative Office of the U.S. Courts provides professional support, analysis, program management, and oversight for the Federal Judiciary.

Federal Judicial Center

Total FY 2013 Request: \$2.2 million
(Reflects \$0.1 million increase over FY 2012 enacted level)

The Federal Judicial Center provides education and training for judges, probation and pretrial services officers, and other Federal court personnel, and performs independent research to improve the administration of justice in the Federal courts.

FY 2013 Changes (+\$0.1 million): The increase reflects inflationary adjustments to base.

United States Sentencing Commission

Total FY 2013 Request: \$5.1 million
(Reflects \$0.2 million increase from FY 2012 enacted level)

The U.S. Sentencing Commission covers costs related to the establishment, review, and revision of sentencing guidelines, policies, and Federal sentencing practices for the criminal justice system.

FY 2013 Changes (+\$0.2 million): The increase reflects inflationary adjustments to base.

PERFORMANCE

Information regarding the activities of the Federal Judiciary is drawn from data collected by the Administrative Office of the United States Courts. The information presented here is based on data for the fiscal year ending September 30, 2010. Of note, while data are available regarding drug related defendants, cases, filings, and other court activities, performance measures, targets, and actual are not included. The work of the Federal Judiciary is guided by a Strategic Plan developed by

the Judicial Conference; however, this branch of the Federal government is not covered by the requirements of the Government Performance and Results Modernization Act of 2010.

Cases involving drug offenses decreased 5 percent to 15,785, and defendants in those cases declined 2 percent to 29,410. Marijuana cases dropped 10 percent to 4,891, and defendants in those cases fell 3 percent to 7,368, with the biggest reductions reported for import/export offenses (cases decreased 51 percent to 793, and defendants dropped 47 percent to 970). Filings related to possession of marijuana increased, however, with cases climbing 26 percent to 1,248 and defendants rising 28 percent to 1,305. Cases involving non-marijuana offenses declined 3 percent to 10,817, and defendants in those cases fell 2 percent to 21,918. Twenty percent of all criminal cases filed this year were related to drug offenses, compared to 22 percent in 2009. Of the persons under post-conviction supervision at the end of the fiscal year, more than 47 percent had been convicted of drug offenses, 1 percent more than in 2009 and 3 percent more than in 2006. The proportion of pretrial services cases opened in which the major offense charged involved drugs fell 2 percentage points to 27 percent.

DEPARTMENT OF HEALTH AND HUMAN SERVICES



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
State, Local, and Tribal Assistance	\$20.000	\$20.000	\$20.000
Total Drug Resources by Function	\$20.000	\$20.000	\$20.000
Drug Resources by Decision Unit			
Promoting Safe and Stable Families – Regional Partnership Grants	\$20.000	\$20.000	\$20.000
Total Drug Resources by Decision Unit	\$20.000	\$20.000	\$20.000

Drug Resources Personnel Summary			
Total FTEs (direct only)	0	2	2
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$50.9	\$50.1	\$50.3
Drug Resources Percentage	0.04%	0.04 %	0.04 %

Program Summary

MISSION

The Administration for Children and Families (ACF), within the Department of Health and Human Services (HHS), is responsible for Federal programs that promote the economic and social well-being of families, children, individuals, and communities. ACF programs aim to achieve families and individuals empowered to increase their own economic independence and productivity; strong, healthy, supportive communities that have a positive impact on the quality of life and the development of children; partnerships with front-line service providers, states, localities, and tribal communities to identify and implement solutions that transcend traditional program boundaries; services

planned, reformed, and integrated to improve needed access; and a strong commitment to working with vulnerable populations including people with developmental disabilities, refugees, and migrants to address their needs, strengths, and abilities.

METHODOLOGY

The Targeted Grants To Increase the Well-Being of, and To Improve the Permanency Outcomes for, Children Affected by Methamphetamine or Other Substance Abuse within the Promoting Safe and Stable Families was established in The Child and Family Services Improvement and Innovation Act of 2011 (P.L. 112-34). In

2012, these grants were renamed *Targeted Grants To Increase the Well-Being of, and To Improve the Permanency Outcomes for, Children Affected by Substance Abuse* and reauthorized them through FY 2016.

Grants funded under this program support regional partnerships in establishing or enhancing a collaborative infrastructure to build the region's capacity to meet a broad range of needs for families involved with substance abuse and the child welfare system. 100 percent of these grants are scored as drug-control.

BUDGET SUMMARY

In FY 2013, ACF requests \$20.0 million, which reflects no change from the FY 2012 enacted level.

Regional Partnership Grants

FY 2013: \$20.0 million

(Reflects no change from FY 2012)

In FY 2013, this program will continue to provide services and activities that are designed to increase the well-being of, improve permanency outcomes for, and enhance the safety of children who are in an out-of-home placement or are at risk of being placed in an out-of-home placement as a result of a parent's or caretaker's substance abuse.

PERFORMANCE

ONDPCP will be working with HHS and ACF to develop appropriate performance measurements that reflect the agency's contribution to the *National Drug Control Strategy*.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

RESOURCE SUMMARY

	Budget Authority (in Millions)		
	FY 2011 Estimate	FY 2012 Estimate	FY 2013 Estimate
Drug Resources by Function			
Treatment	\$4,643.800	\$4,467.400	\$4,751.100
Total Drug Resources by Function	\$4,643.800	\$4,467.400	\$4,751.100
Drug Resources by Decision Unit			
Grants to States for Medicaid	\$3,753.800	\$3,557.400	\$3,791.100
Medicare	\$890.000	910.000	960.000
Total Drug Resources by Decision Unit	\$4,643.800	\$4,467.400	\$4,751.100

Drug Resources Personnel Summary			
Total FTEs (direct only)	-	-	-
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$875.3	\$842.8	\$898.8
Drug Resources Percentage	0.5%	0.5%	0.5%

Source: Medicaid estimates developed by ONDCP based on the report: *SAMHSA Spending Estimates: MHSAs Spending Projections for 2004–2014*, a SAMHSA-funded report. Medicare estimates developed by CMS' Office of the Actuary.

Program Summary

MISSION

The Department of Health and Human Services' (HHS) Centers for Medicare & Medicaid Services' (CMS) envisions itself as a major force and trustworthy partner for the continual improvement of health and healthcare for all Americans. Through its coverage of drug treatment services included within Medicare and Medicaid benefit payments, CMS helps support the goals of the President's *National Drug Control Strategy* by continuing to meet the challenges of providing drug abuse

treatment care benefit payments to eligible beneficiaries.

Medicaid is a means-tested health care insurance program run by States with costs shared by both States and the Federal government. States have considerable flexibility in structuring their Medicaid programs. Medicare is a federally run health insurance program for elderly and disabled persons. Both Medicaid and Medicare provide coverage (payment) for substance abuse (alcohol and drug) treatment. Each has been designated as a

National Drug Control Agency program for the Federal share of these treatment costs.

METHODOLOGY

CMS designation as a *National Drug Control Program Agency* was revised in 2012 for the Federal share of all substance abuse treatment payments under the Medicaid and Medicare programs. The Department of Health and Human Services' (HHS) Centers for Medicare and Medicaid Services (CMS) outlay estimates include substance abuse treatment expenditures for both Medicare and Medicaid.

Medicaid

While CMS's Office of the Actuary (OACT) developed the Medicare estimates, Medicaid estimates were developed as a placeholder by ONDCP, based on data in the 2008 Report from HHS entitled '*SAMHSA spending estimates: MHSAs spending projections for 2004-2014*'. The report is the fifth edition in a continuing series that presents the Federal, State, and Local expenditures for treating substance abuse. The report was prepared for SAMHSA under the SAMHSA Spending Estimates (SSE) project. The SSE has been active since 1996 providing estimates of national spending for mental health services and substance abuse treatment. The estimates in the report are designed to parallel "all-health spending estimates" released by the CMS. The reported projections are intended to provide a picture of future Medicaid spending for substance abuse treatment.

The *Children's Health Insurance Program* (CHIP) program is included in Medicaid when the state chooses to run CHIP through Medicaid. This amount is not disaggregated from the Medicaid amount.

The *American Reinvestment and Recovery Act of 2009* (H.R. 1) provided additional Federal Medicaid funding for states for expenditures between October 1, 2008, and December 31, 2010. The increased Federal matching rate (FMAP) provided in the Recovery Act was extended by the Education, Jobs and Medicaid Assistance Act (P.L. 111-226) through June 30, 2011. The FY 2011 estimates use the average Federal share of Medicaid spending, which includes the impact of the temporarily increased match rates. Actual state FMAP rates may vary. OACT did not develop nor approve the Medicaid estimates. OACT indicates Medicaid estimates are not consistent with the FY 2013 President's Budget Medicaid baseline projections, and do not incorporate all of the actual and expected impact of recent legislation, or recent economic and policy changes to the programs. These estimates are for use while HHS develops a more precise estimate. To refine these estimates, ONDCP and HHS are co-sponsoring research to further better the methodology for determining the Federal share of Medicaid.

Medicare

The Medicare projections reflect estimated Part A and Part B spending and are based on an analysis of historical fee-for-service claims through 2010, using the primary diagnosis code included on the claims. An adjustment was made to reflect spending for beneficiaries who are enrolled in Medicare Advantage plans, since their actual claims are not available. It was assumed that the proportion of costs related to substance abuse treatment was similar for beneficiaries enrolled in Medicare Advantage plans as for those enrolled in fee-for-service Medicare.

These estimates do not include spending under Part D of Medicare because there is no diagnosis code associated with prescription drug claims, and drugs used to treat substance abuse are also used to treat other conditions.

BUDGET SUMMARY

The FY 2013 total drug control request for CMS is \$4,751.1 million, an increase of \$283.7 million over the FY 2012 enacted level.

Grants to States for Medicaid

**Total FY 2013 Estimate: \$3,791.1 million
(Reflects \$233.7 million increase from FY 2012)**

The Nation's substance abuse treatment providers treat 3.9 million clients annually. Substance abuse treatment most often is paid for by two or more public and private sources (including private health insurance, Medicaid, Medicare, state and local funds, and other Federal support). The Federal government makes its largest contribution to the payment for treatment through the Medicaid and Medicare programs. These programs are increasing in size and scope, with the expansion of populations and services covered.

FY 2013 Changes (+\$233.7 million): This change from the prior year is largely the result of estimated increased utilization of Medicaid to treat substance abuse disorders. The entirety of the Medicaid estimate is based on Federal reimbursement to states based on use of Medicaid reimbursable services in state Medicaid plans. The amounts reported are estimates of used services based on historical reimbursements and expenditure growth assumptions.

Medicare

**Total FY 2013 Estimate: \$960.0 million
(Reflects \$50.0 million increase from FY 2012)**

Medicare provides health insurance coverage to eligible aged and disabled persons. Medicare-funded substance abuse treatment is an entitlement for eligible participants. Coverage and costs are increasing with the growing demand for treatment. It is noted that spending on substance abuse treatment services under the Part D prescription drug benefit is not included in the estimates of Medicare spending; however there is a cost for medications and drug therapy used in treating substance abuse. The costs will be considered for possible inclusion in future Medicare estimates.

FY 2013 Changes (+\$50.0 million): This change from the prior year is largely the result of estimated increased utilization of Medicare to treat substance abuse disorders.

PERFORMANCE

The Office of the Assistant Secretary for Planning and Evaluation (ASPE) within HHS and ONDCP have undertaken a project to develop a methodology to produce estimates of Medicaid expenditures for substance abuse treatment services and apply the methodology to produce recent historical and projected Medicaid expenditure estimates. This work will also advance the development appropriate performance measures or indicators to address resources (inputs), the direct products or services delivered by the program (outputs), and the results of those products and services (outcomes) that reflect the agency's contribution to the *National Drug Control Strategy*

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Treatment	\$16.900	\$18.100	\$18.300
Total Drug Resources by Function	\$16.900	\$18.100	\$18.300
Drug Resources by Decision Unit			
Bureau of Primary Health Care	\$16.900	\$18.100	\$18.300
Total Drug Resources by Decision Unit	\$16.900	\$18.100	\$18.300

Drug Resources Personnel Summary			
Total FTEs (direct only)	191	191	211
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$9.7	\$8.2	\$8.4
Drug Resources Percentage	0.2%	0.2%	0.2%

Source: Estimates based on 2010 HRSA Health Centers information reported in the Uniform Data System (UDS) on their patient services, revenues and expenditures.

Program Summary

MISSION

The Health Resources and Services Administration (HRSA) is the principal Federal agency charged with increasing access to basic health care for those who are underserved. For more than 40 years, HRSA-funded health centers have delivered comprehensive, high-quality, cost-effective primary health care to patients regardless of their ability to pay. Access to substance abuse services is critical to ensuring overall health and well-being of health center populations.

Federally Qualified Health Centers (FQHCs) must provide primary care services including referrals to substance abuse

treatment for all age groups. Health Centers that receive grant funding specifically targeted to the provision of primary health care to homeless populations are required to provide substance abuse services on site or by arrangement with another provider. Health care services provided by a FQHC may include dental services, mental health and substance abuse services.

Many FQHCs receive grant funding, special reimbursement rates for their Medicaid patients, and are eligible for medical malpractice coverage under the Federal Tort Claims Act (FTCA).

METHODOLOGY

The HRSA Uniform Data System (UDS) tracks a variety of information, including patient demographics, services provided, staffing, clinical indicators, utilization rates, costs, and revenues for the Federally Qualified Health Centers that receive Bureau of Primary Health Care grant awards. UDS data are collected from grantees and reported at the grantee, state, and national levels. The UDS reporting provides a reasonable basis for estimating the share of the Primary Health Care Grants used for substance abuse treatment. The cost of health centers on substance abuse in 2010 divided by the total cost of all services provided is 0.75 percent. To calculate the total drug control estimates, this ratio is multiplied by the Health Center Program grant dollars awarded to health centers in FY 2011, and the projected amount of Health Center Program grant dollars to be awarded to health centers in FY 2012 and FY 2013.

BUDGET SUMMARY

The total drug control budget for the Health Resources and Services Administration for FY 2013 is \$18.3 million, an increase of \$0.2 million over the FY 2012 enacted level.

Bureau of Primary Health Care

Total FY 2012: \$18.3 million

(Reflects \$0.2 million increase from FY 2012)

In FY 2013, The Health Center program plans to support more than 1,100 grantees and provide comprehensive primary health care services to nearly 21 million patients, including access to substance abuse treatment.

FY2013 Changes (+\$0.2 million): The increase reflects the addition of funding from the Affordable Care Act.

PERFORMANCE

Information in this section on the FY 2010 performance of the drug control activities of HRSA's Health Center Program is based on the UDS. The FY 2010 performance information for this program is shown below.

Health Resources and Services Administration		
Selected Measures of Performance	FY 2010 Target	FY 2010 Achieved
» Percent of Health Center Program grantees providing SBIRT services	10%	11%
» Percent of Health Center Program grantees providing substance abuse counseling and treatment services*	22%	22%

*Figures revised to reflect update in data source.

Discussion

HRSA is taking several approaches to improve access to high quality substance abuse services for medically underserved communities through the Health Center Program. General approaches include

developing the infrastructure for high quality care through the adoption of health information technology (HIT) and the transformation of health centers to patient-centered medical homes (PCMH). PCMH

and the meaningful use of HIT will enable enhanced access to care, better care coordination, and improved patient engagement. Transformed health centers are better positioned to partner with other addiction-related services in the community including inpatient and outpatient substance abuse services.

To further improve access and raise the quality of substance abuse services, the availability of services on-site is essential. This is to be achieved by training health center clinicians to provide high quality and expanded services for those with addiction disorders. Screening, Brief Intervention, and Referral to Treatment (SBIRT) is an evidence-based process used by primary care providers in health centers to effectively detect and treat addiction. Because many communities served by health centers have a high burden of addiction disorders, many health centers have chosen to co-locate and integrate substance abuse specialty services reflecting efficient and effective approaches in meeting patient needs. The integration of substance abuse services may include the provision of enhanced services, such as medication-assisted treatments, by primary care clinicians. In addition, HRSA plans to provide guidance to health centers on collaboration with state agencies to ensure that appropriate standards of care are implemented and that referrals are coordinated.

In FY 2010, 22 percent of health centers provided substance abuse counseling and treatment services, meeting the program FY 2010 target. In FY 2010 11 percent of health center grantees provided SBIRT services, exceeding the program target.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Indian Health Service

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prevention	\$18.755	\$18.736	\$18.799
Treatment	77.277	79.380	77.963
Total Drug Resources by Function	\$96.032	\$98.116	\$96.762
Drug Resources by Decision Unit			
Alcohol and Substance Abuse	\$91.629	\$93.543	\$92.012
Urban Indian Health Program	4.403	4.573	4.750
Total Drug Resources by Function	\$96.032	\$98.116	\$96.762
Drug Resources Personnel Summary			
Total FTEs (direct only)	171	171	171
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$5.1	\$5.4	\$5.5
Drug Resources Percentage	1.9%	1.8%	1.8%

Program Summary

MISSION

The Indian Health Service (IHS), an agency within the Department of Health and Human Services, is responsible for providing Federal health services to American Indians and Alaska Natives (AI/AN). IHS supports substance abuse treatment and prevention services as part of this mission.

METHODOLOGY

IHS includes the appropriation for Alcohol and Substance Abuse (excluding the amount designated as Adult Alcohol Treatment) and the portion of Urban Indian Health Program (UIHP) funds from the National Institute on Alcohol Abuse and

Alcoholism programs transferred to the IHS under the UIHP budget.

BUDGET SUMMARY

In FY 2013, IHS requests \$96.8 million for its drug control activities, which represents a \$1.4 million decrease from the FY 2012 enacted level.

In FY 2013, IHS will continue to serve AI/ANs impacted by substance abuse and dependence through its Youth Regional Treatment Centers (YRTCs) and other Federally- and Tribally-operated substance abuse treatment and prevention programs. In addition to those direct services, the IHS Methamphetamine and Suicide Prevention

Initiative (MSPI) is a nationally-coordinated demonstration pilot program, focusing on providing targeted methamphetamine and suicide prevention and intervention resources to communities in Indian Country with the greatest need for these programs. There is mutual development and implementation of the MSPI project with Tribes, Tribal programs, and other Federal agencies which now provides support to 127 IHS, Tribal, and Urban Indian health programs nationally. The strategic goal is to support Tribal programs in their prevention, treatment, and infrastructure development as they increasingly are delivering their own services. These programs represent an innovative partnership with IHS to deliver services by and for the communities themselves, with a national support network for ongoing program development and evaluation.

Substance abuse and dependence in all of its forms continue to rank high on the concern list of the Tribal partners. IHS believes that a shift in emphasis to earlier intervention is required to be successful in reducing the consequences of substance abuse and dependence. IHS proposes focusing on intervention earlier with younger high risk and hazardous users and preventing further progression by recognizing and responding to the abuse. IHS promotes expanded health care services such as mental and behavioral health treatment and prevention by providing training on substance use disorders to IHS, Tribal, and Urban Indian health programs at annual conferences, meetings, and webinars. Continuing Medical Education (CMEs) and Continuing Education Credits (CEUs) are offered in these training opportunities provided to primary care

providers with a special focus on emergency clinics and on women and families.

Data from the 2010 National Survey on Drug Use and Health show that the AI/AN population leads all other ethnic groups in past 30-day misuse of prescription-type drugs. In response, IHS has developed and established a number of initiatives to curb substance abuse and dependence. For example, ONDCP has been working with IHS in selected states to share prescription drug information with state prescription drug monitoring programs (PDMPs). IHS has partnered with the North Dakota PDMP and secured \$100,000 for the programming required to transmit data to states utilizing the American Society for Automation in Pharmacy versions 4.0 and 4.1 export formats. The resulting agreement included the initialization, testing, troubleshooting, and institution of routine reporting to state PDMPs for all Federal sites within the states of North Dakota, South Dakota, and Minnesota. Because South Dakota does not have a functioning PDMP, IHS facilities in South Dakota are reporting to the North Dakota PDMP. IHS has partnered with the Bureau of Justice Assistance and secured an additional \$35,000 to program the three remaining programming solutions: ASAP 1995; ASAP 2005; and version 3.0. These partnerships will bring all IHS facilities operating in states with functioning PDMPs into reporting compliance along with those Tribal and Urban Indian health programs likely to utilize IHS reporting systems by June 1, 2013.

Alcohol and Substance Abuse

Total FY 2012 Request: \$92.0million

(Reflects a \$1.5 million decrease from FY 2012)

The FY 2013 request includes an increase in current services to continue to support the

Alcohol and Substance Abuse Program. The program will continue to support methamphetamine and suicide prevention and substance abuse treatment initiatives. In FY 2013, IHS will continue to serve American Indian and Alaska Natives impacted by methamphetamine abuse through its Youth Regional Treatment Centers and other Federal and Tribally-operated substance abuse treatment and prevention programs. In addition to those direct services, IHS, through the Methamphetamine and Suicide Prevention Initiative (MSPI), also provides Area allocation funding for pilot projects and Federal grant awards to 111 Area Tribal awardees, 12 Urban grantees, 3 Tribal Youth grantees, and one federally-operated Youth Regional Treatment Center (YRTC). The awards are to establish evidence based or practice based methamphetamine and suicide prevention and intervention pilot projects. These programs represent an innovative partnership with IHS to deliver services by and for the communities themselves, with a national support network for ongoing program development and evaluation.

FY 2013 Changes (-\$1.5 million): In FY 2013, the decrease reflects the elimination of the cost of construction (\$2.0 million) of treatment facilities and modest cost growth in other prevention and treatment programs (\$0.5 million)

Urban Indian Health Program- Alcohol and Substance Abuse Title V Grants

**Total FY 2012 Request: \$4.8 million
(Includes \$0.2 million increase over FY2012)**

A portion of the Urban Indian Health Program is provided in the form of Federal grants to 34 urban Indian 501(c)(3) non-profit organizations to carry out alcohol and

substance abuse prevention and treatment activities in the communities served. All urban programs have active partnerships with their local Veterans Health Administration programs and several have identified joint program alcohol and substance abuse initiatives.

The FY 2013 Budget includes funding for the Urban Indian Health Program, which will be used to continue serving urban American Indians and Alaskan Natives impacted by alcohol and substance abuse through the Title V grant program, Alcohol and Substance Abuse Prevention and Treatment. Substance abuse prevention and education programs services address alcohol/drugs, suicide, self-esteem, injury control, domestic violence, and sexual abuse.

FY 2013 Changes (+\$0.2 million): The increase reflects the modest cost growth in Urban Indian Health Program treatment programs.

PERFORMANCE

This section on the FY 2011 performance of the drug control portion of the IHS Alcohol and Substance Abuse Program is based on agency GPRA documents and other information.

Indian Health Service		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Alcohol-use screening (to prevent fetal alcohol syndrome) among appropriate female patients	56.1%	57.8%
» Accreditation rate for Youth Regional Treatment Centers in operation 18 months or more	100%	91%

Discussion

The measures reported in the table indicate results from both Tribally-Operated Health Programs and Federally-Administered Health Programs. Currently, Tribally-Operated Health Programs have 17 measures, including alcohol- and health-related performance indicators.

The percent of appropriate female patients screened for alcohol-use (Fetal Alcohol Syndrome prevention) at Federally-Administered and Tribally-Operated facilities increased from 55 percent in FY 2010 to 57.8 percent in FY 2011, exceeding the target for this measure.

The accreditation measure – “Accreditation rate for Youth Regional Treatment Centers” – increased from 81 percent in FY 2010 to 91 percent in FY 2011, but did not meet the target of 100 percent. One remaining Tribally-Operated Youth Regional Treatment Center continues to experience challenges with completing the Commission on Accreditation of Rehabilitation Facilities (CARF) but has taken corrective action and is projected to schedule a CARF site visit in the summer of 2012.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Research and Development: Prevention	\$436.149	\$437.536	\$438.052
Research and Development: Treatment	669.493	671.625	672.768
Total Drug Resources by Function	\$1,105.642	\$1,109.161	\$1,110.820
Drug Resources by Decision Unit			
National Institute on Drug Abuse	\$1,048.776	\$1,052.114	\$1,054.001
National Institute on Alcohol Abuse and Alcoholism	56.866	57.047	56.819
Total Drug Resources by Decision Unit	\$1,105.642	\$1,109.161	\$1,110.820

Drug Resources Personnel Summary			
Total FTEs (direct only)	386	386	382
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$30.4	\$30.6	\$30.6
Drug Resources Percentage	3.6%	3.6%	3.6%

These estimates include NIDA FTEs only, and exclude FTEs within NIAAA that are dedicated to substance abuse research.

Program Summary

MISSION

National Institute on Drug Abuse (NIDA)

Drug abuse and addiction present tenacious public health challenges, although preventable, and are also persistent—bringing devastating consequences to individuals, families, and all of society. The good news is that the powerful tools and the detailed knowledge produced by modern neuroscience provide extraordinary opportunities to help solve these problems. NIDA will continue to leverage its scientific leadership in this country and globally to achieve a better understanding of substance abuse and addiction risk and the consequences of substance use disorders

(SUDs), and develop increasingly effective ways to prevent and treat both.

National Institute on Alcohol Abuse and Alcoholism (NIAAA)

Since its creation, NIAAA has led efforts to define alcohol issues as medical in nature and address them using evidence-based findings. The work supported by the Institute has transformed the understanding of alcohol abuse and dependence and its treatment. NIAAA provides leadership in the national effort to reduce alcohol-related problems, including underage drinking by: conducting and supporting research in a wide range of scientific areas including genetics,

neuroscience, epidemiology, health risks and benefits of alcohol consumption, prevention, and treatment; coordinating and collaborating with other research institutes and Federal programs on alcohol-related issues; collaborating with international, national, state, and local institutions, organizations, agencies, and programs engaged in alcohol-related work; and translating and disseminating research findings to health care providers, researchers, policymakers, and the public.

METHODOLOGY

NIDA's entire budget is drug-related and therefore scored as a part of the National Drug Control Budget.

The NIAAA prevention and treatment components of its underage drinking research are scored as a part of the National Drug Control Budget. Underage drinking research is defined as research that focuses on alcohol use, abuse and dependence in minors (children under the legal drinking age of 21). It includes all alcohol related research in minors, including behavioral research, screening and intervention studies and longitudinal studies. Beginning with the reporting of the FY 2012 budget, NIAAA's methodology for developing budget estimates for the *Budget and Performance Summary* uses the NIH research categorization and disease coding (RCDC) fingerprint for underage drinking that allows for an automated categorization process based on electronic text mining to make this determination. Once all underage drinking projects and associated amounts are determined using this methodology, NIAAA conducts a manual review and identifies just those projects and amounts relating to prevention and

treatment. This subset makes up the NIAAA drug control budget estimate.

BUDGET SUMMARY

The FY 2013 drug budget requests \$1,110.8 million for NIH's drug budget related activities, which is an increase of \$1.7 million over the FY 2012 enacted budget. NIH supported research has and will continue to provide the scientific basis for budget policy. For example, research reveals that universal prevention programs not only reduce drug abuse, underage drinking, and other risky behaviors that can lead to HIV and other adverse outcomes, but can also promote other positive outcomes, such as strengthening young people's sense of community, or "connection" to school—key to reducing drug use, violence, and mental health problems.

National Institute on Drug Abuse

**Total FY 2013 Request: \$1,054.0 million
(Reflects \$1.9 million increase over FY 2012 enacted level)**

The FY 2013 budget requests \$1,054 million for NIDA, which is an increase of \$1.9 million from the FY 2012 enacted budget level. NIDA's efforts consist of Basic and Clinical Neuroscience Research, Epidemiology, Services and Prevention Research, Pharmacotherapies and Medical Consequences, Clinical Trials Network, the Intramural Research Program (IRP), and Research Management and Support (RM&S). Each is discussed below.

Basic and Clinical Neuroscience Research (\$478.9 million)

The Basic and Clinical neuroscience programs work together to expand our understanding of the neurobiological, genetic/epigenetic, and behavioral factors

that underlie drug abuse and addiction. Specifically, these examine which variables influence risk of drug abuse, addiction, and drug-related disorders; how drug exposure and addiction alter the brain, including the effects of drugs on the expression or silencing of genes; and how resultant changes affect brain function and consequent behaviors.

Epidemiology, Services and Prevention Research (\$246 million)

This program area supports integrated approaches to understand and address the interactions between individuals and environments that contribute to drug abuse and related problems. Large surveys and surveillance networks that monitor drug-related issues exemplify programs supported by this NIDA Division. Program efforts help identify substance abuse trends locally, nationally, and internationally; guide development of responsive interventions for a variety of populations; and determine optimal service delivery in real-world settings.

Pharmacotherapies and Medical Consequences (\$130.2 million)

This program area is responsible for medications development aimed at helping people recover from drug abuse and addiction and sustain abstinence, and includes development of non-addictive pain medications. It capitalizes on research showing the involvement of different brain systems in drug abuse and addiction, beyond the reward circuit, to develop medications in response to a variety of newly defined targets. This program area also seeks means to address the medical consequences of drug abuse and addiction, including infectious diseases such as HIV.

Clinical Trials Network (\$47.7 million)

NIDA's National Drug Abuse Treatment Clinical Trials Network (CTN) comprises 13 research nodes and more than 240 individual community treatment programs in 38 states, plus the District of Columbia and Puerto Rico. The CTN develops and tests treatment protocols for drug abuse and addiction and related conditions, such as comorbid mental health disorders and HIV, testing the real-world effectiveness of promising medication and behavioral approaches with diverse patient populations and community treatment providers. It also serves as a research training platform and helps NIDA respond to emerging public health threats.

Intramural Research Program (IRP) (\$88.6 million)

The Intramural program performs cutting edge research within a coordinated multidisciplinary framework. The IRP attempts to elucidate the nature of the addictive process, determine the potential use of emerging new therapies for substance abuse (both pharmacological and psychosocial), and establish the long-term consequences of drugs of abuse on systems and organs, with particular emphasis on the brain and its development, maturation, function, and structure. In addition, the IRP supports an HIV/AIDS Pathophysiology and Addiction Medications Discovery Program.

Research Management and Support (RMS) (\$62.7 million)

RMS activities provide administrative, budgetary, logistical, and scientific support in the review, award, and monitoring of research grants, training awards, and research and development contracts. Additionally, the functions of RMS encompass strategic planning, coordination,

and evaluation of NIDA's programs, regulatory compliance, international coordination, and liaison with other Federal agencies, Congress, and the public. NIDA currently oversees more than 1,800 research grants and more than 170 research and development contracts.

FY 2013 Changes (+\$1.9 million): The FY 2013 request provides additional resources to examine emerging threats and to better translate research into practice.

National Institute of Alcohol Abuse and Alcoholism

The FY 2013 budget requests \$56.8 million for NIAAA Underage Drinking activities, which is a decrease of \$0.228 million from the FY 2012 enacted budget level.

Underage Drinking

Total FY 2013 Request: \$56.8 million

(Reflects \$0.2 million decrease from FY 2012)

NIAAA has a strong focus on preventing and reducing underage drinking, recognizing the pervasive use of alcohol among young people and the association between early initiation of alcohol use and future alcohol problems. In 2011, NIAAA released an alcohol screening guide for health care providers to identify alcohol use, and alcohol use disorders in children and adolescents, and to identify risk for alcohol use, especially for younger children. In FY 2013, NIAAA will support studies to evaluate the guide in clinical settings. The brief, 2-question screener will be assessed in youth ages 9 to 18 both: as a predictor of alcohol risk, alcohol use, and alcohol problems including alcohol use disorders; and as an initial screen for other behavioral health problems, for example other drug use, smoking, or conduct

disorder. NIAAA also has a significant investment in underage drinking research.

FY 2012 Changes (-\$0.2 million): This reduced funding will be realized through operational efficiencies and will not impact programming.

PERFORMANCE

These two sections on the FY 2011 performance of NIDA and NIAAA are based on agency GPRA performance reports and other information. NIH's GPRA measures are "representative" of Institute contributions to NIH's priorities regarding specific scientific opportunities, identified public health needs, and Presidential priorities. Such measures reflecting NIH's broad and balanced research portfolio, are not Institute-specific. Each measure is trans-NIH, encompassing lead and contributory Institutes and Center (ICs). Each section will describe the specific contributions of NIDA and NIAA to NIH priorities.

Both NIDA and NIAA continue to contribute to a number of trans-NIH scientific research outcomes (SRO). One of these is indicative of its contribution to the prevention of substance abuse and addiction: SRO-3.5 "By 2013, identify and characterize at least 2 human candidate genes that have been shown to influence risk for substance use disorders and risk for psychiatric disorders using high-risk family, twin, and special population studies." By identifying genetic factors involved in the various stages of the addiction process, this outcome aids in the development of improved primary (stop drug use before it starts) and secondary (prevent relapse) prevention programs.

NIDA and NIAA also contribute to SRO-8.7: “By 2015, identify three key factors influencing the scaling up of research-tested interventions across large networks of service systems such as primary care, specialty care, and community practice.” By studying treatment implementation, this outcome improves the translation of research into practice.

National Institute on Drug Abuse

National Institute on Drug Abuse		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» SRO-3.5, by 2013, identify and characterize at least 2 human candidate genes that have been shown to influence risk for substance use disorders and risk for psychiatric disorders using high-risk family, twin, and special population studies.	Replicate/validate genetic markers that identify differences in treatment response and/or vulnerability to drug dependence in a minority population	Research identified genetic markers associated with response to the smoking cessation medications varenicline and bupropion. Research also identified genetic markers of smoking initiation, smoking quantity, and smoking cessation among Korean smokers.
» SRO-8.7, by 2015, identify three key factors influencing the scaling up of research-tested interventions across large networks of service systems such as primary care, specialty care and community practice.	Field 2 studies to test 3 implementation strategies for incorporating research-supported treatment interventions in the criminal justice system.	Two studies (MATICCE and HIV-STIC) have been fielded to test 4 implementation strategies for incorporating research-supported treatment interventions for either drug abuse or HIV in the criminal justice system.

Discussion

Prevention—SRO-3.5

NIDA contributes to NIH’s scientific research goal of identifying and characterizing human candidate genes that influence risk for substance use disorders and risk of psychiatric disorders, by funding research on disease vulnerability and on optimizing treatment response as a means for preventing relapse.

Vulnerability: Multiple genome-wide and targeted association studies have revealed significant associations between variants in the CHRNA5-CHRNA3-CHRN4 (CHRNA5/A3/B4) nicotinic receptor

subunits gene cluster with tobacco dependence in subjects of European origin. However, few studies have replicated these findings in populations of other ethnicities. A recent NIDA-funded study demonstrated in FY 2011, associations of variants in the CHRNA5/A3/B4 cluster with smoking initiation, smoking quantity, and smoking cessation in Korean smokers providing strong evidence for their contribution to the underlying causes of these behaviors in this Asian population.

Relapse Prevention: NIDA-funded investigators identified in FY 2011, genetic markers associated with treatment

response to two smoking cessation medications, varenicline and bupropion. Specifically, the studies demonstrated that continuous abstinence during weeks 9-12 of treatment with varenicline was associated with a variant in the nicotinic receptor subunit genes *CHRNA2*, *CHRNA5*, and *CHRNA4* while continuous abstinence under bupropion treatment was associated with a variant of the genes for the *CYP2B6* metabolizing enzyme and the nicotinic receptor delta subunit *CHRNA4*. The researchers found that the time to relapse after successfully quitting with either treatment was linked to a variant in the *5HT3* receptor gene and identified variants in several nicotinic receptor subunit genes that were associated with nausea, a common side effect of varenicline treatment. These results suggest that specific genetic loci may provide clinically useful markers to guide treatment decisions in the future thereby preventing relapse among certain populations.

Treatment—SRO-8.7

NIDA also contributes to NIH's scientific research goal of identifying effective implementation strategies that enhance the uptake of research-tested interventions in service systems such as primary care, specialty care, and community practice. NIDA recognizes that despite major strides in treatment research, only limited improvements have occurred in non-research settings. For example, the rates of drug abuse among people involved with the criminal justice system are very high (e.g., 70-85 percent of state inmates) yet few receive treatment while incarcerated (approximately 13 percent), jeopardizing both public health and public safety. To improve drug treatment within the criminal justice system, NIDA continues to support a

national multisite research program, the Criminal Justice-Drug Abuse Treatment Studies (CJ-DATS), which tests strategies for how best to implement effective treatment within the criminal justice system. In the past year, CJ-DATS research protocols began data collection.

The **MATICCE (Medication-Assisted Treatment Implementation in Community Correctional Environments)** protocol, developed in FY 2010, focused in FY 2011 on testing implementation approaches aimed at improving service coordination between community correctional agencies and local treatment agencies, to increase the number of persons in corrections who are provided medication-assisted treatment (MAT); and improving community corrections agents' knowledge and perceptions about MAT and intent to refer appropriate individuals to community-based MAT services.

The interventions to be tested are the Knowledge, Perception, and Information (KPI) intervention and the KPI + organizational linkage (OL) intervention. The KPI intervention consists of professional training for correctional staff on use of medications in addiction treatment. The KPI + OL intervention is intended to improve correctional staff knowledge, perceptions, and capacity for interorganizational relationships to improve referral to, utilization of, and support for medication-assisted treatment appropriate for individuals with substance use disorders. All of the 9 participating research centers have completed preliminary work (e.g., training, strategic planning) to set the stage for the centers to begin data collection in the upcoming year.

The HIV Services and Treatment Implementation in Corrections (HIV-STIC) protocol will test an organizational intervention strategy for more effectively implementing improvements in HIV services for preventing, detecting, and treating HIV in offenders under correctional supervision. The interventions to be tested are an HIV Training for corrections intervention and Local Change Team (LCT) Process Improvement intervention. The HIV training includes basic training on the fundamentals of HIV infection, prevention, testing, and treatment, as well as information about the HIV services continuum and its implications. The process improvement using LCT, guides the team through a structured series of quality improvement techniques intended to identify key change targets and to make incremental organizational changes that will improve the quality and coordination of HIV services across correctional and community agencies. As of September 2011, all of the participating centers have selected sites for the study and have completed preliminary work (e.g., training, site randomization) to set the stage for data collection in the upcoming year.

Research Highlights

Buprenorphine vs. methadone treatment in pregnancy causes less distress in babies
Opioid dependence during pregnancy can lead to multiple adverse maternal and neonatal consequences, so treatment is crucial—a NIDA-supported study showed in FY 2011 that buprenorphine is the better option for improving public health and reducing associated medical costs. The NIDA-supported study comparing treatment with buprenorphine versus methadone found that buprenorphine resulted in 43 percent less time in the hospital, 60 percent

shorter treatment duration, and 89 percent less morphine administered for withdrawal symptoms in neonatal abstinence syndrome. More than 100,000 opioid-exposed babies are born each year, with about 23,000 born to mothers receiving methadone. If buprenorphine were adopted as the standard of care for women of childbearing age, not only would that dramatically improve outcomes for those children but it could result in a savings of nearly \$260M per year.

Opioid prescription practices raise concerns

Prescription opioid pain relievers, though important in treating pain, have high rates of abuse in the U.S. One contributor to continuing high rates of abuse may be prescription practices related to controlled medications. A recent study, analyzing prescribing practices in this country found in FY 2011 that most of the projected 202 million opioid prescriptions dispensed in the U.S. in 2009 were for products containing hydrocodone (e.g., Vicodin) and Oxycodone (e.g., OxyContin) for short treatment courses, and most (45.7%) were written for people between 40 and 59 years old. However, 9.3 million (11.7%) were prescribed for patients between 1- and 29 years old. For 10-19 year-olds, dentists were the main prescribers. Notably, across all the physician specialties analyzed, 56 percent of opioid prescriptions were dispensed to patients who had filled another opioid prescription within the previous month.

This unique analysis identifies important questions for further investigation, particularly given the severity of potential consequences, including addiction and even death: the rates of unintentional overdose deaths from opioid pain relievers have

quadrupled since 1999, now outnumbering those from heroin and cocaine.

Poor childhood self-control predictive of adult addiction, and other health and social problems

The development of successful drug abuse prevention interventions requires understanding modifiable drug abuse risk and protective factors. A recent study that followed a cohort of 1,000 children from birth found in FY 2011 that those who showed poor self-control in childhood—as early as age 3—were more likely to have problems with physical health, substance dependence, and personal finances, and to be convicted of a criminal offense by 32 years of age, regardless of intelligence and socioeconomic status. Interestingly, while some of these outcomes were the result of problem behaviors that began in adolescence (e.g., smoking, dropping out of high school, becoming parents), poor self-control in childhood was still predictive of problems in adulthood, even in adolescents who did not experience these early setbacks. Therefore, early childhood interventions that enhance self-control have the potential to have a great impact, likely more so than addressing problem behaviors in adolescence alone.

Is nicotine a gateway drug? Animal research shows that nicotine primes the brain to enhance cocaine's effects

Tobacco and alcohol are the most commonly used drugs in the U.S. and other Western societies. Use of these drugs also generally precedes the use of marijuana, cocaine, and other illicit substances among drug users and therefore have been dubbed “gateway drugs.” NIDA-supported researchers have identified in FY 2011 a molecular mechanism that may explain how

nicotine use could predispose a person to the rewarding effects of cocaine. Mice that were exposed to nicotine for a week showed an increased response to cocaine. This priming effect depended on a previously unrecognized effect of nicotine on gene expression: nicotine changes the structure of the tightly packaged DNA molecule, reprograms the expression pattern of specific genes, including delta FosB—a gene linked to addiction—and ultimately alters the behavioral response to cocaine. If nicotine is found to have similar effects in humans, these findings suggest that effective smoking prevention efforts would not only prevent the negative health consequences associated with smoking but could also decrease the risk of progression and addiction to cocaine and possibly other illicit drug use.

Communities That Care prevention program a smart public health investment

A cost-benefit analysis in FY 2011 of the Communities That Care (CTC) prevention system found long-term reductions in drug use and other risky behaviors, as well as monetary benefits relative to the cost of conducting the intervention. CTC trains coalitions of community stakeholders to use local epidemiological data to identify elevated risk factors and depressed protective factors in their communities, and then choose and implement appropriate evidence-based prevention programs to address their specific profiles. The present analysis was based on outcomes from a panel of students followed from Grades 5 through 8 in a randomized controlled trial involving 24 communities in 7 states. It showed that CTC prevention programs result in savings of between \$5 and \$10 for every \$1 invested, returns that increase over time. Benefits stem from anticipated

reductions in smoking-related mortality, improved health, lower medical expenses, and, mainly, from lower criminal justice system and crime victimization costs over the life course of program participants. This study shows CTC to be a cost-effective preventive intervention and a good public health investment, even with conservative assumptions.

National Institute of Alcohol Abuse and Alcoholism

National Institute on Alcohol Abuse and Alcoholism		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» SRO-3.5, by 2013, identify and characterize at least 2 human candidate genes that have been shown to influence risk for substance use disorders and risk for psychiatric disorders using high-risk family, twin, and special population studies.	Conduct functional studies of candidate genes in different populations.	NIAAA-supported researchers conducted functional studies of gene variants that are associated with increased risk for alcohol dependence through population-based research in European-Americans and African Americans.
» SRO-8.7, by 2015, identify three key factors influencing the scaling up of research-tested interventions across large networks of service systems, such as primary care, specialty care and community practice.	Continue to support research on the implementation and adoption of interventions for alcohol use disorders in primary care and general mental health care and continue to disseminate multimedia products that promote the use of such interventions in various health care settings for underage and adult populations.	NIAAA developed multimedia products that promote implementation of screening and brief intervention in pediatric primary care, and continued to support research on the implementation of screening and brief intervention in primary care, including pediatric care.
» SRO-4.5, by 2011, identify genetic and environmental factors which predispose to three complex diseases.	Support research on biological, behavioral and environmental factors that influence risk for problem drinking, including alcohol use disorders.	NIAAA supported research on the interplay of genetic and environmental factors and found two alleles (DRD4 and 5-HTTLPR) that affect alcohol use or responsiveness to interventions in adolescents and adults.

Discussion

In addition to SRO 3.5 on understanding human genes influencing the risk of substance abuse disorders and SRO-8.7 indicating NIAAA’s efforts to more broadly bring evidence-based treatments for substance addiction to the people who need services, NIAAA also contributes to

SRO-4.5: “By 2011, identify genetic and environmental factors which predispose to three complex diseases.” Identification of genetic variants that confer risk for alcohol use and psychiatric disorders will help to identify individuals at higher risk for a more severe and complicated disease course, many of whom initiate alcohol use early and

ultimately become dependent on more than one substance. In addition, genetic variants that influence the effectiveness of behavioral or pharmacological interventions, including prevention and treatment programs, are under investigation, both for underage and adult drinkers.

Prevention—SRO-3.5

NIAAA contributes to NIH's scientific research goal of identifying and characterizing human candidate genes that influence risk for substance use disorders and risk of psychiatric disorders.

Numerous genes and gene variants have been associated with increased risk for alcohol dependence in various racial and ethnic populations. Some of these findings need to be replicated by independent studies and/or the variants studied for function at the levels of transcription and/or protein synthesis. In one FY 2011 study, NIAAA-supported investigators combined and reanalyzed two alcohol-relevant datasets to identify new genetic risk variants for alcohol dependence using genome wide association studies. The investigators also sought to replicate the associations between alcohol dependence and previously identified variants, and to conduct functional studies of variants previously shown to have significant associations with alcohol dependence. The study identified in FY 2011, three genes with genome wide significance in European Americans, two of which replicated prior studies. Variants in one of the three genes, *KIAA0040*, were replicated in African Americans. Functional analysis of *KIAA0040* variants indicated that these genes were involved in regulating expression of the gene itself.

Genes encoding two classes of alcohol metabolizing enzymes—the alcohol dehydrogenases (ADH) and aldehyde dehydrogenases (ALDH)—have been extensively studied and previously associated with risk for alcohol dependence in various populations. For example, previous research has shown that the inactive ALDH2-2 variant is exclusive to populations of East Asian descent, and protective against heavy alcohol consumption and therefore alcohol dependence. The reduced risk that is conferred by ALDH2-2 is enhanced by the presence of the ADH1B-2 variant. A recent case control study investigated whether polymorphisms in the ADH class of genes and two ALDHs were associated with risk for alcohol dependence in four non-East Asian populations, i.e. Finnish Caucasians, African Americans, Plains American Indians and Southwestern American Indians. The study revealed in FY 2011, modest associations between alcohol dependence and certain types of variants in the ALDH1A1 gene in Finnish Caucasians and Southwest American Indians as well as an association with an ADH4 variant in Plains American Indians.

Treatment—SRO-8.7

The integration of alcohol screening, brief intervention and referral to treatment (SBIRT) as a routine procedure in primary care has the potential to reach a large number of individuals who are either experiencing, or are at risk for alcohol-related problems, who may not be identified elsewhere. Alcohol SBIRT has been recognized as a top preventive measure in primary care and standard alcohol screening guidelines are now available for both youth and adults; however, integrating routine alcohol SBIRT

into primary care still poses challenges for many practices. Research to inform the implementation of SBIRT in primary care and other clinical settings for underage and adult populations continues to be a priority of NIAAA. A NIAAA-supported randomized controlled trial is comparing two different modes of SBIRT delivery, both based on NIAAA guidelines, in one of the Nation's largest private health care organizations. In the first mode, SBIRT will be conducted by primary care physicians. In the second mode, screening will be conducted by medical assistants with brief intervention and referral delivered by non-physician providers, e.g. behavioral medicine specialists, clinical nurses and health educators. Both the control and experimental conditions involve the use of the electronic medical record which includes the alcohol screening questions. In addition to various implementation outcomes, the study will examine implementation and intervention costs, characteristics that predict SBIRT implementation as well as barriers, and facilitators and feasibility of the implementation process. Now in its second year, the study recruited, randomized and trained the primary care practices in FY 2011, and will soon begin providing quarterly performance feedback to the clinics.

A similar study is being conducted to examine the implementation, effectiveness and cost-effectiveness of SBIRT in reducing adolescent alcohol and other drug use in pediatric care. In this study pediatric practices in the same health care system mentioned in the study above are randomized to three conditions, i.e. usual care, SBIRT delivered by primary care physicians and SBIRT delivered by

behavioral medicine specialists. SBIRT in this study is based on the CRAFFT screening tool plus referral to treatment. In the usual care condition, screening and intervention is optional. Also, physicians in this mode of the study do not receive training on SBIRT and do not have access to a behavioral medicine specialist.

Prevention—SRO-4.5

Previous research has shown that genotypic variability in the promoter region of the serotonin transporter gene (5-HTTLPR) influences response in rural African American adolescents to a preventive intervention aimed at parenting behavior. Building on that finding, a recent study examined variability at the dopamine D4 receptor gene (DRD4) for effects on escalation of substance use in African American rural adolescents who participated in the intervention. The study found in FY 2011 that youth carrying the 7-repeat allele in the DRD4 gene not only were more responsive to the intervention than youth with the 4-repeat DRD4 allele, but also that they reduced past month alcohol or marijuana use over a 29 month period. This was in comparison to youth with the 7-repeat allele and no intervention. Furthermore, parents with the 7-repeat allele who were randomized to a control group with no intervention exhibited less change in the parenting behavior that was targeted by the intervention. Taken together with the previous finding that the long allele of 5-HTTLPR influences initiation of adolescent substance use, the results suggest different genes may influence different phases of substance use and highlights potential opportunities to match individuals to prevention programs based on genotype.

Treatment–SRO-4.5

Analyses of data from the National Epidemiologic Survey of Alcohol and Related Conditions (NESARC) have shown that early alcohol use is associated with future alcohol dependence as well as dependence at an earlier age. A recent clinical trial examined the interaction of age of onset of alcohol dependence and variation in 5-HTTLPR with response to the medication sertraline, a selective serotonin reuptake inhibitor (SSRI) that is commonly prescribed for depression. The preliminary results showed that the long allele of 5-HTTLPR influenced response to sertraline while the short allele had no significant effects. Among individuals who carried the long allele, those who had late-onset of alcohol dependence (defined as older than age 25) experienced fewer drinking and heavy drinking days in response to sertraline than those with early onset alcohol dependence.

Research Highlights

New Youth Alcohol Screening Guidelines for Health Practitioners

National surveys have shown that 71 percent of high school seniors have used alcohol in their lifetime and that past month alcohol use increased from 14 percent to 41 percent between 8th and 12th grades. By 12th grade, 27 percent of those surveyed report having been drunk in the past month and 23 percent report having an episode of binge drinking in the past 2 weeks.

Although alcohol use in youth continues to be of great concern, it often goes undetected. To encourage alcohol screening of youth, NIAAA in FY 2011 *Alcohol Screening and Brief Intervention for Youth: A Practitioner’s Guide*. Targeted to

youth aged 9-18, the Youth Guide is a developmentally appropriate, empirically-based 2-question alcohol screener and risk estimator that provides a quick, user-friendly way for clinicians to screen for alcohol use, assess risk for current and future alcohol problems, and provide brief advice or interventions based on level of risk. By helping clinicians overcome common barriers to alcohol screening, the guide can facilitate earlier intervention to prevent both short and long term problems associated with underage alcohol use. In FY 2012, NIAAA will begin the next step in this research, which is to evaluate the effectiveness of the two-question screener as a predictor of alcohol risk/use/problems including alcohol use disorders and as an initial screen for other behavioral health problems such as other drug use, smoking, or conduct disorder. Continuing Medical Education (CME) training will also be developed to further encourage use of the guide.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prevention	\$562.349	\$561.041	\$507.923
Treatment	2,014.495	2,004.787	1,962.948
Total Drug Resources by Function	\$2,576.844	\$2,565.828	\$2,470.871
Drug Resources by Decision Unit			
Health Surveillance and Program Support	\$176.430	\$154.297	\$187.724
<i>Behavioral Health Tribal Prevention Grant (non-add)¹</i>	-	-	40.000
Programs of Regional and National Significance - Prevention	75.956	76.149	65.877
<i>Center for Application of Prevention Technologies (non-add)</i>	8.074	8.059	7.511
<i>Mandatory Drug Testing</i>	4.906	5.196	4.906
<i>Minority Aids Initiative (non-add)</i>	41.385	41.307	41.307
<i>Science and Service Program Coordination (non-add)</i>	4.789	4.780	4.082
<i>STOP Act (non-add)¹</i>	7.000	6.987	7.000
Programs of Regional and National Significance – Treatment	431.389	425.243	364.139
<i>Access to Recovery (non-add)</i>	98.954	98.268	93.776
<i>Children and Family Programs (non-add)</i>	30.670	30.620	29.678
<i>Criminal Justice Activities (non-add)</i>	65.188	66.903	65.135
<i>Minority Aids Initiative (non-add)</i>	65.988	65.863	52.359
<i>Pregnant & Postpartum Women (non-add)</i>	15.878	15.970	15.970
<i>Recovery Community Services Program (non-add)</i>	5.236	2.445	2.445
<i>Screening/Brief Intervention/Referral to Treatment (non-add)¹</i>	51.662	51.187	30.000
<i>Treatment Systems for the Homeless (non-add)</i>	41.650	41.571	41.571
State Substance Abuse Prevention Grants	451.107	454.033	404.501
Substance Abuse Treatment Block Grant	1,441.962	1,456.106	1,448.630
Total Drug Resources by Decision Unit	\$2,576.844	\$2,565.828	\$2,470.871
Drug Resources Personnel Summary			
Total FTEs (direct only)	547	574	574
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$3.6	\$3.6	\$3.6
Drug Resources Percentage	71.4%	71.2%	70.7%

¹Funded from the Public Health Prevention Fund of the Patient Protection and Affordable Care Act

Program Summary

MISSION

The Substance Abuse and Mental Health Services Administration's (SAMHSA) mission is to reduce the impact of substance abuse and mental illness on America's communities. SAMHSA supports the President's *National Drug Control Strategy* through a broad range of programs focusing on prevention, treatment, and recovery from substance abuse. Programs for FY 2013 will include the Substance Abuse Block Grant, the Substance Abuse – State Prevention Grant program, competitive grant programs reflecting Programs of Regional and National Significance (PRNS) and Health Surveillance and Program Support. These programs are administered through SAMHSA's Centers for Substance Abuse Prevention (CSAP) and Substance Abuse Treatment (CSAT) as well as through SAMHSA's Center for Behavioral Health Statistics and Quality (CBHSQ) and the Office of Communications.

METHODOLOGY

SAMHSA distributes drug control funding into two functions: prevention and treatment. Included in prevention are SAMHSA/CSAP funds supporting the new Substance Abuse – State Prevention Grant program, competitive grant programs, programs funded through the Prevention and Public Health Fund of the ACA (including the new Behavioral Health – Tribal Prevention Grant program), and 20 percent of SAMHSA Program Management funds. Included in treatment are SAMHSA/CSAT funds supporting Programs of Regional and National Significance (PRNS), 100 percent of the Substance Abuse Prevention and Substance Abuse Treatment

Block Grants, and 80 percent of SAMHSA Program Management funds.

BUDGET SUMMARY

In FY 2013, SAMHSA requests a total of \$2,470.9 million for drug control activities, which is a decrease of \$95.0 million from the FY 2012 enacted level. The budget directs resources to activities that have demonstrated improved health outcomes and that increase service capacity.

Substance Abuse Prevention

Substance Abuse Prevention Programs of Regional and National Significance

**Total FY 2013 Request: \$65.9 million
(Reflects \$10.2 million decrease from FY 2012)**

The Substance Abuse Prevention Programs of Regional and National Significance (PRNS) support states and communities in carrying out an array of activities to improve the quality and availability of services in priority areas.

Minority AIDS Initiative

**Total FY 2013 Request: \$41.3 million
(Reflects same level as FY 2012)**

SAMHSA/CSAP's Minority AIDS Initiative (MAI) Program, implemented in FY 1999, supports efforts to reduce health disparities in minority communities by delivering and sustaining high quality and accessible substance abuse and HIV prevention services. The program strategies include implementing evidence-based prevention practices targeting subpopulations, conducting HIV testing and referral for treatment, and preventing/reducing the risk of substance use disorders and/or HIV. Grantees are required to target one or

more high-risk populations such as African American women, adolescents, or individuals who have been released from prisons and jails within the past 2 years.

In addition to the existing MAI cohorts, SAMHSA awarded grants for the FY 2011 Minority AIDS Initiative Targeted Capacity Expansion Integrated Behavioral Health/Primary Care Network Cooperative Agreements. This grant program will facilitate the development and expansion of culturally competent and effective integrated behavioral health and primary care networks, which include HIV services and medical treatment, within racial and ethnic minority communities in the 12 Metropolitan Statistical Areas and Metropolitan Divisions most impacted by HIV/AIDS. Expected outcomes include reducing the impact of behavioral health problems, HIV risk and incidence, and HIV-related health disparities in these areas.

FY13 Changes (no change): The request supports 67 continuations and 16 new grants.

Fetal Alcohol Center of Excellence

Total FY 2013 Request: \$1.0 million

(Reflects \$8.8 million decrease from FY 2012)

SAMHSA's Fetal Alcohol Spectrum Disorder (FASD) programming has focused on identifying and disseminating information about innovative techniques and effective evidence-based strategies for preventing FASD and increasing functioning and quality of life for individuals and their families impacted by these disorders. In FY 2012, SAMSHA's will emphasize and expand prevention strategies to prevent alcohol use among women of childbearing age and will provide funding to support a new contract.

FY13 Changes (-\$8.8 million): The request will provide \$1.0 million in continuation funding for the FASD contract.

Center for the Application of Prevention Technologies

Total FY 2013 Request: \$7.5 million

(Reflects a \$0.5 million decrease from FY 2012)

The Center for the Application of Prevention Technologies (CAPT) promotes state-of-the-art prevention technologies through three core strategies: the establishment of technical assistance networks using local experts from each of the five regions; the development of training activities; and the innovative use of communication media such as teleconference and video conferencing, online events, and Web-based support. These training and technical assistance activities are designed to build the capacity of SAMHSA grantees and develop the skills, knowledge, and expertise of the prevention workforce. These activities will help support the delivery of effective prevention programs and practices and the development of accountability systems for performance measurement and management.

During FY 2012, the CAPT expects to deliver approximately 1,400 capacity-building technical assistance services to more than 7,000 people and orchestrated 400 events for 10,000 people. Topics include the use of evidence-based environmental strategies to reduce underage drinking, the application of behavioral health indicators for substance abuse prevention planning, the use of traditional and cultural practices as prevention strategies within indigenous populations, and the diffusion of state-of-the-art methods to guide intra-State

training and technical assistance (T/TA) prevention systems. In addition, the CAPT will develop workforce development products, including skills training, fact sheets, and a web-based toolkit; and will provide evaluation capacity-building technical assistance to 53 community-based prevention programs and to 24 Science-to-Service programs. CAPT will plan and facilitate a program for special populations including Pacific Islanders and Tribal grantees. Finally, the CAPT will develop training and materials for SAMHSA special issues, including webinars on best practices, epidemiological data, evidence- programs, and evaluation techniques.

FY13 Changes (-\$0.5 million): The FY 2013 request provides funding for a new CAPT contract to continue to promote prevention technologies.

Other PRNS Activities

Total FY 2013 Request: \$4.1 million

(Reflects \$0.7 million decrease from FY 2012)

In FY 2012, \$4.8 million in funding will support contracts that provide technical assistance and training to states, tribes, communities, and grantees around substance abuse prevention.

FY13 Changes (-\$0.7 million): The request includes \$0.1 million funding will be provided for continuation of the Minority Fellowship Grants, as well as resources for other PRNS activities such as Science and Service Program Coordination, and Minority Fellowship Program.

Substance Abuse –State Prevention Grant

Total FY 2013 Request: \$404.5 million

(Reflects \$49.5 million decrease from FY 2012)

The Substance Abuse –State Prevention Grant (SA-SPG) proposes to consolidate SAMHSA’s prevention grants to provide more coordinated funding for prevention at the state level. The new SA-SPG combines the 20 percent prevention set-aside of the current formula-based Substance Abuse Prevention and Treatment Block Grant (SABG) program and the Strategic Prevention Framework grants into this new program to encourage data-driven, needs-based, evidence-proven methods for facilitating substance abuse.

The SA-SPG will provide formula-based prevention funding. The SA-SPG will encourage states and territories to address substance abuse prevention at three levels: universal prevention, which addresses populations at large; selected prevention, which targets subgroups of the population that share common risks of developing substance use disorders (such as children with a family history of substance abuse or schools in high poverty areas); and indicated prevention, which addresses individuals with multiple risk factors, early symptoms, or behaviors that are precursors for substance abuse, but who do not require treatment for substance abuse. States/territories and communities will be able to utilize environmental and individual prevention approaches to achieve measurable results.

FY13 Changes (-\$49.5 million): The FY 2013 Budget request is \$404.5 million, a \$49.5 million decrease from the comparable FY 2012 enacted level. The amount includes funding from the 20 percent prevention set-aside

requirement of the SABG, and reducing funding for the SPF-SIG only funding \$60.3 million of FY 2013 continuation grants under the current Strategic Prevention Framework program.

Substance Abuse Treatment

Substance Abuse Treatment Programs of Regional and National Significance

Total FY 2013 Request: \$364.1 million (Reflects \$61.1 million decrease from FY 2012)
The Substance Abuse Treatment Programs of Regional and National Significance (PRNS) support states and communities in carrying out an array of activities to improve the quality and availability of services in priority areas.

Access to Recovery (ATR)

FY 2013 Request: \$93.8 million (Reflects \$4.5 million decrease from FY 2012)
FY 2013 resources for ATR reflect \$93.8 million to support continuations for the third cohort (30 grants). ATR is designed to allow recovery to be pursued through personal choice and many pathways; require grantees to manage performance based outcomes that demonstrate client successes; and, expand capacity by increasing the number and types of providers who deliver clinical treatment and/or recovery support services. The program is administered through recognized Tribal Organizations or through the Single State Authority overseeing substance abuse activities. ATR uses vouchers, coupled with state flexibility and executive discretion, to offer an opportunity to create positive change in substance use disorder treatment and recovery service delivery across the Nation.

ATR was launched in 2004 when 15 3-year grants were awarded, which provided services to almost 200,000 clients. A second cohort of 24 3-year ATR grants was awarded in September 2007. The second ATR cohort was projected to serve a target number of 30,000 clients in its first year (FY 2008); however, the actual number served was more than 50,000. The number served in FY 2009 was approximately 89,600 which exceeded the target of 65,000 clients. The third cohort of ATR, which began in FY 2010, was expanded to a 4-year program. FY 2010 program outcome data show that 82.9 percent of the clients had success achieving and maintaining no past month substance use. In addition, by 6-month follow-up, 47 percent reported being housed; 96 percent had no involvement in the criminal justice system; and 91 percent reported being socially connected. The recommended target is 225,000 clients for this third cohort, with approximately 33,500 to be served in the first year, 70,750 clients to be served in the 2 subsequent years, and 50,000 to be served in the final year. In its first year of operation, this cohort of ATR has exceeded its target of 33,500 having served over 47,000 clients.

FY13 Changes (-\$4.5 million): The FY 2013 request supports 30 grant continuations.

Treatment Drug Courts

FY 2013 Request: \$42.9 million (Reflects \$1.8 million decrease from FY 2012)
Drug courts are problem-solving courts which help reduce recidivism and substance abuse among offenders and increase an offender's likelihood of successful rehabilitation through early, continuous, and intense judicially supervised treatment, mandatory periodic drug testing,

community supervision, and appropriate sanctions and other habilitation services. In FY 2010, SAMHSA funded 17 new adult and 8 new juvenile Problem Solving Court 3-year grants at an average cost of \$325,000 per year. There were also three new juvenile Problem Solving Court 4-year grants that were funded in collaboration with the Office of Juvenile Justice and Delinquency Prevention (OJJDP) within the Department of Justice at an average cost of \$200,000 per year. Also in FY 2010, SAMHSA and the Office of Justice Programs/Bureau of Justice Affairs (BJA) developed a joint program to enhance court services, coordination, and substance abuse treatment capacity of adult drug courts enabling applicants to submit one application outlining a comprehensive strategy for enhancing drug court capacity. Under this initiative, SAMHSA and BJA funded 28 new adult Problem Solving Court grants. Each grantee was awarded one separate grant from each agency, representing an innovative braided funding opportunity. This collaboration was modeled after a successful collaborative grant program initiated in FY 2009 between SAMHSA and the Office of Juvenile Justice and Delinquency Prevention (OJJDP) to support juvenile drug courts.

In FY 2013, SAMHSA will continue to provide technical assistance and support states and communities in implementing flexible solutions to address the burdensome problems of substance abuse, mental illnesses, and co-occurring disorders in the criminal justice system through collaboration between CSAT and CMHS. This approach helps local courts find the model that best meets the needs and capacities. It also encourages partnership with the behavioral health system to

allocate treatment and recovery support services effectively and efficiently.

FY13 Changes (-\$1.8 million): The request supports 93 continuation and 22 new grants.

Ex-Offender Re-Entry Program

FY 2013 Request: 16.4 million

(Reflects same level as FY 2012)

SAMHSA recognizes the need to continue efforts to return and reintegrate offenders back into the community by providing substance abuse treatment and other related re-entry services while also ensuring public safety for the community and family. The ex-offender re-entry grants provide screening, assessment and comprehensive treatment and recovery support services to offenders reentering the community, as well as offenders who are currently on or being released from probation or parole. SAMHSA and DOJ/Bureau of Justice Assistance share a mutual interest in supporting and shaping offender re-entry-treatment services, as both agencies fund “offender re-entry” programs. These two Agencies have a longstanding partnership regarding criminal justice-substance abuse treatment issues and have developed formal agreements to further encourage and engage in mutual interests and activities on these issues. Offender Re-entry Program grantees are expected to seek out and coordinate with local Federally-funded offender re-entry initiatives, including DOJ/Bureau of Justice Assistance’s Prisoner Re-entry Initiative or “Second Chance Act” offender re-entry programs, as appropriate. In FY 2012, SAMHSA funded the continuation of 29 grants and 3 contracts as well as 9 new grants.

FY13 Changes (no change): The FY 2013 Request supports 20 continuation and 18 new grants.

Treatment Systems for Homeless Programs

FY 2013 Request: \$41.6 million
(Reflects same level as FY 2012)

SAMHSA/CSAT manages two grant portfolios under its Grants for the Benefit of Homeless Individuals (GBHI) program, both of which provide focused services to individuals with a substance use disorder or who have co-occurring disorders. Through a recovery and public health oriented system of care, grantees are encouraged to address gender, age, race, ethnicity, sexual orientation, disability status, veteran's status, and criminal justice status as these issues relate to both substance use disorder services and co-occurring disorder services for homeless individuals. .

The FY 2013 Budget request for this program is aligned with "Opening Doors: the Federal Strategic Plan to Prevent and End Homelessness" which was released in June 2010 by the U.S. Interagency Council on Homelessness. It is aligned with Objective 4: Provide permanent supportive housing to prevent and end chronic homelessness and Objective 7: Integrate primary and behavioral health care services with homeless assistance programs and housing to reduce people's vulnerability to and the impacts of homelessness. The GBHI program is an essential piece to accomplishing the goals of the Plan.

FY13 Changes (no change): The FY 2013 Request supports the continuation of 72 grants and 2 contracts as well as 23 new grants.

Other PRNS Treatment Programs

FY 2013 Request: \$163.7 million
(Reflects \$54.3 million decrease from 2012)

The FY 2013 Budget includes resources of \$163.7 million for several other Treatment Capacity programs including: Opioid Treatment Programs/Regulatory Activities and Screening, Brief Intervention and Referral to Treatment; Strengthening Treatment Access and Retention; the Minority AIDS Initiative; Children and Family Programs; Pregnant and Post-Partum Women (PPW); Recovery Community Services Program (RCSP); Minority Fellowship Program; Special Initiatives/Outreach; Addiction Technology Transfer Centers; and Targeted Capacity Expansion (TCE) General. The FY 2012 Budget includes funds for continuing grants and contracts in the various programs. funding will be used to enhance overall drug treatment quality by incentivizing treatment providers to achieve specific performance targets. Examples of grant awards could include supplements for treatment providers who are able to connect higher proportions of detoxified patients with continuing recovery-oriented treatment; or for outpatient providers who are able to successfully retain greater proportions of patients in active treatment participation for longer time periods. In FY 2012, SAMHSA will fund the continuation of 210 grants and 37 contracts as well as 103 new grants.

FY13 Changes (-\$54.3 million): The request supports the continuation of 194 grants and 21 contracts as well as 79 new grants and 7 new contracts.

Substance Abuse Block Grant

FY 2013 Request: \$1.449 billion

(Reflects \$7.5 million decrease from 2012)

The overall goal of the SABG is to support and expand substance abuse treatment services, while providing maximum flexibility to states. States and territories may expend funds only for the purpose of planning, carrying out, and evaluating activities related to these services. Under SAMHSA's proposal states may provide SABG funds to community and faith-based organizations to provide services. Of the amounts appropriated for the SABG, 95 percent are distributed to states through a formula prescribed by the authorizing legislation. Factors used to calculate the allotments include total personal income; state population data by age groups (total population data for territories); total taxable resources; and a cost of services index factor. Remaining funds are used for data collection, technical assistance, and program evaluation, which are retained by SAMHSA for these purposes. The set-aside is distributed among CSAP, CSAT, and CBHSQ for purposes of carrying out the functions prescribed by the SABG legislation.

FY13 Changes (-\$7.5 million): The request of \$1.5 billion will provide support to 60 jurisdictions: states, territories, the District of Columbia, and the Red Lake Band of Chippewa Indians in Minnesota. These resources will support approximately 2 million treatment episodes.

Health Surveillance and Program Support

The FY 2013 Request of \$187.7 million, supports staffing and activities to administer SAMHSA programs.

Health Surveillance and Program Support

FY 2013 Request: \$121.2 million

(Reflects \$3. 2 million decrease from 2012)

Health Surveillance and Program Support provides funding for personnel costs, building and facilities, equipment, supplies, administrative costs and associated overhead to support SAMHSA programmatic activities as well as providing funding for SAMHSA national data collection and survey systems, funding to support the CDC National Health Information Survey (NHIS), and the data archive. This represents 100 percent of the total funding available for these activities which is which is split 80/20 between Treatment and Prevention.

Public Awareness and Support

FY 2013 Request: \$13.6 million

(Reflects \$0.1 million increase from 2012)

Public Awareness and Support provides funding to support the unified communications approach to increase awareness of behavioral health, mental disorders and substance abuse issues. This represents 100 percent of the total funding available for these activities which is split 80/20 between Treatment and Prevention.

Performance and Quality Information Systems

FY 2013 Request: \$13.0 million

(Reflects \$0.1 million increase from 2012)

Performance and Quality Information Systems provides funding to support the Consolidated Data Platform as well as the transition from legacy systems. This

represents 100 percent of the total funding available for these activities which is split 80/20 between Treatment and Prevention.

Behavioral Health – Tribal Prevention Grant

FY 2013 Request: \$40.0million

(Reflects \$40.0 million increase from FY 2012)

The Behavioral Health – Tribal Prevention Grant, requested from ACA Prevention Fund, will provide a formula-based grant program to deliver behavioral health services specifically to Tribal populations. This represents 100 percent of the total available for this activity, consistent with our Drug Budget methodology and of which 100 percent is allocated to Prevention of drug use.

PERFORMANCE

This section on the FY 2011 performance of SAMHSA programs is based on agency

GPRMA documents and other agency information. The tables include performance measures, targets, and achievements where the data are available for FY 2011. The narrative discusses achievements associated with the most recent data available.

In collaboration with state agencies, SAMHSA defined a core set of standardized National Outcome Measures (NOMs) that are monitored across SAMHSA programs. NOMs have been identified for both treatment and prevention programs.

NOMs share common methodologies for data collection and analysis. SAMHSA continues to implement online data collection and reporting systems and has assisted states in developing their own data infrastructures.

Substance Abuse Prevention and Treatment Block Grant (SAPT BG)

Treatment

SAPT Block Grant - Treatment Activities		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Percentage of clients reporting no drug use in the past month at discharge	70.3%	70%
» Number of admissions to substance abuse treatment programs receiving public funding	1,881,515	1,937,960

Discussion

SAMHSA administers the SABG program as a means of supporting substance abuse prevention and treatment efforts at the state and local levels. Specifically, SAPT BG resources facilitate state efforts to address local substance abuse issues.

NOMs reporting has been mandatory since the FY 2008 SAPT BG Application. Pursuant to Public Law 111-352, SAPT BG/NOMs activities are coordinated with the

Government Performance and Results Modernization Act (GPRMA) data and other data sources.

SAMHSA’s block grant funding mechanism is designed to be data-driven and responsive. SAMHSA monitors and tracks NOMs data, while facilitating other data collection, analysis, utilization, and feedback efforts. For example, data for treatment NOMs are drawn from a

combination of sources, including the Web Block Grant Application System (WebBGAS).

During FY 20011, SAPT BG served 1,937,960 clients, exceeding the target of 1,881,515. Also, FY 2011 data show that 75 percent of

clients abstained from alcohol at discharge, 70 percent abstained from drug use, and 92 percent reported no involvement with the criminal justice system.

20% Prevention Set-Aside

SAPT Block Grant—20% Prevention Set-Aside		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Percent of states showing an increase in state-level estimates of survey respondents who rate the risk of substance abuse as moderate or great (age 12 - 17)	47.1%	TBR
» Percent of states showing a decrease in state-level estimates of survey respondents who report 30-day use of alcohol (age 12-20)	52.9%	TBR
» Percent of states showing a decrease in state-level estimates of survey respondents who report 30-day use of other illicit drugs (age 12-17)	64.7	TBR
» Number of participants served in prevention programs	70,647,674	TBR

TBR – To Be Reported December 2012.

Discussion

As required by law, states awarded SABG funds must spend at least 20% of their total award on substance abuse prevention services. This is referred to as “the Prevention Set-Aside.”

Substance abuse prevention services funded using resources from the 20% Prevention Set-Aside, vary. The Prevention-Set-Aside funds sometimes target a broad population (*universal prevention*). In other instances, these funds are designed to benefit groups of people with risk factors related to substance abuse (*selective prevention*) and/or individuals who do not meet the diagnosis for dependence but have signs of substance abuse and related consequences (*indicated prevention*)².

FY 2011 performance data for the 20%

Prevention Set-Aside reveal many significant accomplishments. For example, states reported serving more than 4.8 million individuals through indicated and selective prevention services while reaching more than 92.1 million Americans through universal prevention³.

² Institute of Medicine. (1994). *Reducing Risks for Mental Disorders: Frontiers for Preventive Intervention Research*.

³ Based on data reported by States into WebBGAS.

Programs of Regional and National Significance (PRNS)

Treatment PRNS

Treatment PRNS		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Percentage of adults receiving services who were currently employed or engaged in productive activities	47%	44%
» Percentage of adults receiving services who had a permanent place to live in the community	49%	48%
» Percentage of adults receiving services who had no involvement with the criminal justice system	95%	96%
» Percentage of adults receiving services who had no past-month substance use	62%	70.2%
» Number of clients served	34,784*	40,381*

Note: Measures reflect clients served through grants in FY 2010. Data are collected at a 6-month follow-up point. Since client length of stay varies by case, some may have been discharged by this point while others were still in treatment.

* Total for SAMHSA's CSAT Capacity programs excluding Access to Recovery and the Screening, Brief Intervention, and Referral to Treatment Program.

Discussion

In FY 2011, the Treatment PRNS programs served a total of 40,381 people, which exceeded the target. The collective programs achieved high performance in some areas and are still striving in other areas. For example, targets were exceeded for abstinence (70%) and for clients having no involvement with the criminal justice system at 6-month follow-up (96%). However, possibly due to the economic recession and related housing issues, neither the reported employment level of 44 percent nor the housing level of 48 percent met the respective targets.

Treatment PRNS includes Screening, Brief Intervention and Referral to Treatment Program (SBIRT), which began in 2003. In FY 2011, SBIRT provided over 213,000 substance abuse screenings in primary care settings which is above the FY 2011 target of 139,650 screenings.

Screening, Brief Intervention, and Referral to Treatment		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Percentage of adult clients receiving services who had no past month substance use	50%	36%
» Number of clients served	139,650	213,250

An example of SBIRT grantee accomplishments are demonstrated by an SBIRT grant in Colorado. The grant is being used to integrate screening for alcohol and substance abuse issues into routine health care provision. Eight hospitals, six primary care settings, and eight HIV clinics across the State are already using the SBIRT approach (the HIV clinics are funded by the Ryan White CARE Act). A project partner, the Colorado Clinical Guidelines Collaborative, helps by condensing evidence-based practices summary guides that are easily implemented by busy providers within practice-based networks. To promote sustainability of measurable improvements, the project also targets health care payers.

The Access to Recovery (ATR) program, also a key PRNS program, was established in 2005.

Access to Recovery		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Percentage of adults receiving services who had no past month substance use	82%	82.1%
» Percentage of adults receiving services who had no/reduced involvement with the criminal justice system	96%	96.7%
» Percentage of adults receiving services who had improved social support	91%	90%
» Number of clients gaining access to treatment	33,500	47,036

The ATR program provides grant funding to states, tribes, and tribal organizations as a way to finance voucher programs that expand substance abuse treatment capacity and promote choice among clinical

treatment and recovery support providers. In 2011, the ATR program substantially exceeded its target for the number of clients served: 47,036 clients were served as compared to the target of 33,500. Moreover, programmatic achievements include positive developments measured at 6-month follow-up points, including an abstinence level of 82.1 percent, an improved social support level of 90 percent, and 96.7 percent of clients having no involvement with the criminal justice system.

The Drug Court program addresses the treatment needs of substance-using individuals involved in Drug Courts. The program is designed to provide holistic treatment and wrap-around services to criminally-involved substance-using individuals. This program helps high risk populations pursue abstinence and a higher quality of life.

Substance Abuse Drug Courts		
Selected Measures of Performance	FY 2011	FY 2011
	Target	Achieved
» Percentage of adult clients receiving services who had a permanent place to live in the community	42%	42.3%
» Percentage of adult clients receiving services who had no involvement with the criminal justice system	93%	93%
» Percentage of juvenile clients receiving services who had no involvement with the criminal justice system	95%	90.1%
» Percentage of juvenile clients receiving services who had no past month substance abuse	73%	68%

Prevention PRNS

Prevention PRNS		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Percent SPF SIG States showing a decrease in state-level estimates of survey respondents (age 12-17) who report 30-day use of other illicit drugs	67.6	TBR
» Percent SPF SIG States showing an increase in state-level estimates of survey respondents (age 12-17) who rate the risk of substance abuse as moderate or great	50%	TBR
» MAI: Percent of program participants that rate the risk of harm from substance abuse as great (all ages)	88%	TBR
» MAI: Percent of participants who report no illicit drug use at pre-test who remain non-users at post-test (all ages)	92.6%	TBR

SPF SIG: Strategic Prevention Framework State Incentive Grant

MAI: Minority AIDS Initiative

SA-SPG: Substance Abuse State Prevention Grant

TBR – To Be Reported December 2012.

Discussion

SAMHSA’s Prevention PRNS includes a number of major discretionary programs, such as the Strategic Prevention Framework State Incentive Grants (SPF SIG), and the Minority AIDS Initiative (MAI).

Information on Prevention PRNS performance will be reported when the data become available.

DEPARTMENT OF HOMELAND SECURITY



DEPARTMENT OF HOMELAND SECURITY

Customs and Border Protection

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$341.502	\$363.867	\$380.672
Interdiction	1,896.816	1,916.476	1,895.750
Total Drug Resources by Function	\$2,238.318	\$2,280.343	\$2,276.422
Drug Resources by Decision Unit			
Air and Marine Operations	\$463.765	\$454.477	\$392.192
Border Security Fencing, Infrastructure & Technology	85.954	60.000	49.065
Salaries and Expenses	1,688.599	1,765.866	1,835.165
<i>Air & Marine Operations - Salaries (non-add)</i>	<i>[252.622]</i>	<i>[257.364]</i>	<i>[252.737]</i>
<i>Border Security and Control between POEs (non-add)</i>	<i>[481.517]</i>	<i>[547.752]</i>	<i>[547.141]</i>
<i>Border Security and Trade Facilitation at POEs (non-add)</i>	<i>[883.540]</i>	<i>[893.497]</i>	<i>[946.672]</i>
<i>HQ Management and Administration (non-add)</i>	<i>[70.920]</i>	<i>[67.253]</i>	<i>[88.615]</i>
Total Drug Resources by Decision Unit	\$2,238.318	\$2,280.343	\$2,276.422
Drug Resources Personnel Summary			
Total FTEs (direct only)	10,823	11,715	11,814
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$9.9	\$10.2	\$10.4
Drug Resources Percentage	20.9%	21.8%	23.0%

Program Summary

MISSION

Titles 18 U.S.C. and 19 U.S.C. authorize U.S. Customs and Border Protection (CBP) to regulate the movement of carriers, persons, and commodities between the U.S. and other nations. It is through this statutory authority that CBP plays a key role in the overall anti-drug effort along the border. CBP's jurisdiction is triggered by the illegal movement of criminal funds, services, or merchandise across our national borders and is applied pursuant to the authority of

the Bank Secrecy Act (P.L. 99-570), "USA PATRIOT Act" (P.L. 107-56), Money Laundering Control Act (P.L. 99-570), and other laws.

METHODOLOGY

CBP is a multi-mission bureau and calculates obligations, by budget decision unit and function, pursuant to an approved drug methodology. On the basis of past practice, six offices within CBP: Border Patrol (OBP), Field Operations (OFO),

Information Technology (OIT), Technology Innovation and Acquisition (OITA), Training and Development (OTD), and Air and Marine (OAM) were provided with guidance on preparing estimates for the reporting of drug control funds. All six organizations identified resources in financial plans that support the drug enforcement mission of the agency. OIT, OFO, OBP, and OAM attribute resources to both intelligence and interdiction functions; while OTD and OTIA attribute resources solely to interdiction.

Office of Field Operations

OFO and Security/Non-Intrusive Inspection Division of the Office of Field Operations estimates that for Fiscal Year (FY) 2013 there will be 5,108 CBP officer (CBPO) positions related to drug enforcement on Anti-Terrorism Contraband Enforcement Teams (A-TCET). CBP established these teams in 2003, uniting the former Contraband Enforcement Teams (CET), Manifest Review Units (MRU), and Non-Intrusive Inspection, Canine, and Outbound teams to form a single A-TCET enforcement team. The A-TCET also works closely with the Passenger Enforcement Rover Team (PERT) and Passenger Analytical Unit (PAU) teams to coordinate all enforcement activities. Although the primary mission of A-TCET teams is anti-terrorism, it also focuses on all types of contraband, including narcotics. CBP estimates that 69 percent of the A-TCET is devoted to drug enforcement. The smuggling methodologies and its indicators are similar for both narcotics and anti-terrorism activities.

Also for FY 2013, OFO estimates there will be a total of 631 Canine Enforcement officers with assigned dogs. Among the dogs paired with an officer, 138 will be

Narcotics Detection Teams, 48 Currency Firearms Detection Teams and 320 Narcotics/Human Smuggling Detection Teams that will be nearly 100 percent devoted to smuggling interdiction. Additionally, the FY 2012 enacted budget provides for 11 additional canine units along the Southwest border region.

Finally, in FY 2013, OFO has 14,846 other CBPOs, who in addition to the interdiction of contraband and illegal drugs, enforce hundreds of laws and regulations of many other Federal government agencies. CBP subject matter experts estimate that roughly 30 percent of these officers' time is devoted to drug-related activities.

Office of Border Patrol

OBP is responsible for controlling almost 6,000 miles of land borders between ports of entry with Canada and Mexico and nearly 2,700 miles of coastal waters surrounding the Florida Peninsula and Puerto Rico. There were 21,417 Border Patrol agents as of October 22, 2011, assigned to the mission of detecting and apprehending illegal entrants between the ports-of-entry. These illegal entries include aliens and drug smugglers, potential terrorists, wanted criminals, and persons seeking to avoid inspection at the designated ports of entry due to undocumented status, thus preventing illegal entry. It has been determined that 15 percent of the total agent time nationwide is related to drug control activities. Of the 15 percent related to drug control activities, 3.5 percent of these efforts are related to counter drug intelligence activities and 96.5 percent is related to drug interdiction. These activities include staffing 35 permanent border traffic checkpoints nationwide and the utilization of 950 canine units trained in the detection

of humans and certain illegal drugs that are concealed within cargo containers, truck trailers, passenger vehicles and boats. In addition, agents perform line watch functions in targeted border areas that are frequent entry points for the smuggling of drugs and people into the United States.

Office of Information Technology

OIT supports the drug enforcement mission through the acquisition, support, and maintenance of technology, such as non-intrusive inspection systems and mission critical targeting software systems. Of OIT's spending, 30 percent of base of the Enforcement Technology Center; 25 percent of Automated Targeting Systems (Passenger, Narcotics, and Anti-Terrorism) systems software costs, 50 percent of the TECS; and 10 percent of data center operations costs are estimated in support of the drug mission.

Office of Training Development

OTD calculates the portion of its budget attributable to drug control funding by issuing an annual data call for all projected National Training Plan (NTP) funded training courses to assess if courses contain any items related to drug enforcement material and activities. The curriculum of each course is reviewed and subject matter experts determine course hours delivered related to drug enforcement for this tasking. If specific courses offered through the NTP contain drug enforcement related material, a specific percentage for that course is defined (hours related to drug enforcement training divided by the total number of course hours). Specific training programs identified include the canine training programs and basic, specialized, and advanced training for CBP officers and agents. OTD's day-to-day operational

resources are attributed to drug enforcement activities at a rate of 20 percent. OTD evaluated each office's mission statement and training development/delivery functions to determine the total weighted percentage of its drug enforcement activities.

Border Security Fencing, Infrastructure and Technology

CBP is the lead agency within Department of Homeland Security for the development and deployment of border technology and tactical infrastructure to secure America's borders. OTIA programs deliver detection and surveillance technology systems to both the Southwest and Northern borders. These technologies increase situational awareness and assist law enforcement personnel in identifying and resolving illegal activity. For this drug control estimate, OTIA is applying the Border Patrol ratio of 15 percent to the entire account.

Office of Air & Marine

OAM's core competencies are air and marine interdiction, air and marine law enforcement, and air domain security. In this capacity, the OAM targets the conveyances that illegally transport narcotics, arms, and aliens across our borders and in the Source, Transit and Arrival Zones. In support of Source and Transit Zone interdiction operations, the Air and Marine P-3 Program has dedicated a minimum of 5,200 hours a year in support of Joint Interagency Task Force – South (JIATF-South).

Using the number of flight hours spent performing drug related activities, OAM has determined that 90 percent of the budget resources that support CBP Air and Marine are considered to be drug-related. Of the 90

percent drug-related resources, 25.6 percent of these efforts are related to intelligence and 74.4 percent are related to drug interdiction.

BUDGET SUMMARY

The FY 2013 request of \$2,276.4 million for drug-related resources is a decrease of \$3.9 million from the FY 2012 enacted level. These resources support CBP as America's frontline border agency. CBP employs over 60,000 personnel to not only prevent terrorists and terrorist weapons from entering the United States, but also to perform its missions, which include stemming the flow of illegal drugs and other contraband. CBP is determined to improve security at and between our ports of entry (POEs) along the entire length of land and maritime borders, and extend the zone of security beyond the physical borders.

Salaries and Expenses

Total FY 2013 Request: \$1,835.2 million
(Reflects \$69.3 million increase over FY 2012 enacted level)

Salaries and Expenses funds CBP's primary field including CBP officers, Border Patrol agents, pilots, marine officers, import and entry specialists, and agricultural specialists. The agency's field organization is comprised of 20 Border Patrol Sectors with 35 permanent border and 140 tactical checkpoints between the ports of entry; 142 stations and substations; and 20 Field Operations Offices, and 331 associated ports of entry, of which 15 are pre-clearance stations. Field personnel use a mix of air and marine assets, non-intrusive technology such as large-scale x-rays and radiation portal monitors, targeting systems, and automation to ensure the identification and apprehension of high-risk travelers and trade.

Border Security and Trade Facilitation at POEs

FY 2013 Request: \$946.7 million
(Reflects \$53.2 million increase over FY 2012 enacted level)

The FY 2013 request is a \$53.2 million dollar increase from the FY 2012 enacted budget for drug-related resources associated with border security and trade facilitation at the POEs. CBP will use its resources to support aggressive border enforcement strategies that are designed to interdict and disrupt the flow of narcotics and ill-gotten gains across our Nation's borders and dismantle the related smuggling organizations. CBP narcotics interdiction strategies are designed to be flexible so that it can successfully counter the constantly shifting narcotics threat at the ports of entry.

CBP is intent on using resources to develop and implement security programs that safeguard legitimate trade from being used to smuggle the implements of terror and other contraband, including narcotics into the U.S. Under Customs-Trade Partnership Against Terrorism (C-TPAT), CBP works closely with importers, carriers, brokers, freight forwarders, and other industry sectors to develop a seamless, security-conscious trade environment resistant to the threat of international terrorism. C-TPAT provides the business community and government a venue to exchange ideas, information, and best practices in an ongoing effort to create a secure supply chain, from the factory floor to U.S. ports of entry. Under C-TPAT, Americas Counter Smuggling Initiative (ACSI), the Carrier Initiative Program (CIP), and the Business Anti-Smuggling Coalition (BASC), partnership programs remain instrumental in expanding CBP's anti-narcotics security programs with trade groups and

governments throughout the Caribbean, Central and South America, and Mexico.

CBP has implemented a Field Operations Intelligence Program, which provides support to CBP inspection and border enforcement personnel in disrupting the flow of drugs through the collection and analysis of all source information and dissemination of intelligence to the appropriate components. In addition, CBP interdicts undeclared bulk currency under 31 USC 5317 and 31 USC 5332, respectively, cutting off funds that fuel terrorism, narcotics trafficking, and criminal activities worldwide. CBP officers perform enforcement operations which involve screening outbound travelers and their personal effects. CBP also supports operations that focus on interdicting bulk currency exported in cargo shipments. CBP uses mobile X-ray vans and specially trained currency canine teams to target individuals, personal effects, conveyances, and cargo acting as vehicles for the illicit export of undeclared currency.

OFO continues to run coordinated inbound and outbound enforcement operations along the Southwest border. These operations include participation by the Office of Border Patrol, Immigration and Customs Enforcement, and state/local law enforcement agencies. To expand enforcement operations along the Southwest border, a Unified Command structure has been established for Alliance to Combat Transnational Threats (ACTT) in El Paso. ACTT planning and operations cells have coordinated a variety of operations to enhance intelligence collection and further a number of investigations targeting transnational criminal organizations. These operations have proven to be successful in

interdicting narcotics and outbound currency.

The Northern border counter smuggling approach focuses on bi-national, Federal, state, local, and tribal law enforcement partnerships, information sharing agreements, joint integrated operations, and community outreach in order to maximize efforts and resources. This approach has proven successful along the Northern border.

FY 2013 Changes (+\$53.2 million): The increase in drug-related resources over the FY 2012 enacted level reflects an increase in the average CBPO salary and an increase in the average benefit rate for CBPOs based upon higher costs for health care, life insurance and Federal Employees Retirement System.

Border Security and Control between the POEs

FY 2013 Request: \$547.1 million
(Reflects \$0.6 million decrease from FY 2012 enacted level)

The FY 2013 President's request of \$547.1 million in drug-related resources provides funding for border security and control between the POEs. The Border Patrol has primary responsibility for drug interdiction between the land ports-of-entry. In pursuit of drugs, Border Patrol agents engage in surveillance activities supported by computer-monitored electronic ground sensors. Traffic check operations are also conducted along major routes of travel to restrict access to the interior by drug and alien smugglers. Transportation centers are placed under surveillance for the same reason.

In addition, the Border Patrol canine program was implemented in 1986 in response to escalating alien and drug smuggling activities along the Mexican and Canadian Borders. The canines are trained at the Canine Center El Paso in El Paso, Texas, to locate concealed humans and detect several narcotic odors and their derivatives. The canines are used in nearly every enforcement activity of the Border Patrol including line watch, traffic check operations, and train and bus checks. The canine program is responsible each year for the detection of record numbers of smuggled aliens and large narcotic loads, including the arrest of the criminals involved in smuggling activities.

The Border Patrol also participates in numerous interagency drug task force operations with other Federal, state, and local law enforcement agencies through Operation Alliance along the Southwest border. The Border Patrol is also an active participant in the Southwest border High Intensity Drug Trafficking Areas (HIDTA) in Texas, New Mexico, Arizona, and California. To further assist the Border Patrol in this endeavor, all Border Patrol agents receive Drug Enforcement Administration Title 21 cross-designated authority as part of their basic training.

FY 2013 Changes (-\$0.6 million): In FY2013, CBP will continue efforts to interdict drugs between the land ports-of-entry.

Headquarters Management and Administration

FY 2013 Request: \$88.6 million
(Reflects \$21.4 million increase over FY 2012 enacted level)

The FY 2013 President's request of \$88.6 million in drug-related resources provides critical policy and operational direction, mission support, and technical expertise to CBP mission operations. Headquarters and Management includes drug control budget dollars from the Office of Training and Development and the Office of Information Technology. These programs are essential in carrying out CBP's dual mission of protecting our homeland while facilitating legitimate trade and travel.

FY 2013 Changes (+\$21.4 million): The increase reflects OIT's funding increase for the operations and maintenance of Advanced Targeting System, which will increase the reliability of this critical targeting software system.

Air and Marine Operations – Salaries

FY 2013 Request: \$252.7 million
(Reflects \$4.6 million decrease from FY 2012 enacted level)

CBP Air and Marine secures the borders against terrorists, acts of terrorism, drug smuggling and other illegal activity by operating air and marine branches at strategic locations along the borders. Multi-mission aircraft, with advanced sensors and communications equipment, provide powerful interdiction and mobility capabilities directly in support of detecting, identifying, and interdicting suspect conveyances, and apprehending suspect terrorists and smugglers. CBP Air and Marine partners with numerous stakeholders in performing its missions throughout the continental United States and the Western Hemisphere. This includes

domestic operations at the borders, Source, Transit and Arrival Zone operations, interior law enforcement support, and support to other agencies. In fulfilling the priority mission of CBP to protect the borders, CBP Air and Marine's geographical Areas of Responsibility (AORs) are the Southwest, Northern and Southeast/coastal borders of the United States also to include the Caribbean regions.

FY 2013 Changes (-\$4.6 million): The programmatic decrease to Air and Marine Salaries is the result of a reduction of 42 OAM positions which will be achieved through workforce reshaping efforts. Despite the smaller workforce, OAM will maximize the capabilities of air and marine assets through a cohesive joint air operations model for centralized command and control, and a responsive and integrated control system for decentralized execution.

Air and Marine

Total FY 2013 Request: \$392.2 million
(Reflects \$62.3 million decrease from FY 2012 enacted level)

CBP Air and Marine's interdiction assets are deployed throughout the Western Hemisphere. The Air and Marine Operations Center in Riverside, California, provides command, control, communications, and intelligence for those assets by assimilating information from a wide array of sensors.

The P-3 Airborne Early Warning (AEW) and slick aircraft provide vital radar coverage in regions where mountainous terrain, expansive jungles and large bodies of water limit the effectiveness of ground-based radar. Because the P-3 AEW is the only

Detection and Monitoring (D&M) asset solely dedicated to the counter-drug mission, it is a critical component of the *National Drug Control Strategy*.

In the Transit Zone, CBP Air and Marine crews work in conjunction with the law enforcement agencies and military forces of other nations in support of their counter-narcotic programs. In the Transit Zone, CBP Air and Marine crews work in conjunction with other law enforcement agencies and military forces of other nations in support of their counter-narcotic programs. CBP is prepared to support counter-drug missions in the Source Zone. Counter-drug missions include detection and monitoring, interceptor support, and coordinated training with military and other law enforcement personnel.

CBP Air and Marine aviation assets include sensor-equipped, detection and monitoring jet interceptors, long-range trackers, maritime patrol aircraft, high performance helicopters, single/multi-engine support aircraft, and unmanned aerial vehicles. CBP Air and Marine's range of maritime assets includes interceptor, utility and blue water-type vessels.

The FY 2013 budget request includes \$28.1 million for P-3 SLEP. These funds will continue the procurement of the new wing/tail assembly, the wing/tail refurbishment kits for aircraft that do not need new wings/tails, continue the special structural inspections (SSI) and extended special structural inspections (ESSI), and induct an additional P-3 platform into the SLEP program. OAM will continue the acquisition of four AS-350s (Light Enforcement Helicopters) with prior year resources. By the end of FY 2013, OAM will

have acquired 48 of the 50 AS-350's under contract. Requested FY 2013 resources will also allow CBP to convert one UH-60 Medium Lift Helicopter from an alpha to lima model and procure one KA-350CER Multi-Role Enforcement Aircraft. Funding is also provided for various marine vessels.

FY 2013 Changes (-\$62.3 million): The President's Budget request includes a decrease of \$62.3 million in OAM's marine recapitalization and modernization, due to a one-time increase in FY 2012 for the acquisition of Coastal Interceptor Vessels.

Border Security Fencing, Infrastructure and Technology

Total FY 2013 Request: \$49.1 million (Reflects \$10.9 million decrease from FY 2012 enacted level)

The FY 2013 President's request will fund acquisition, delivery, and sustainment of

prioritized border security capabilities and services for the operational users.

FY 2013 Total Changes (-\$10.9 million): The FY 2013 net decrease is comprised of program enhancements for Northern border technology, integrated fix towers and tactical communications and a reduction for a non-recurring FY 2012 Development and Deployment enhancement.

PERFORMANCE

This section on the CBP's drug control program is based on agency Government Performance and Results Act documents, and other agency information. The table includes performance measures, targets, and achievements for the latest year for which data is available.

Customs and Border Protection		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Amount of currency seized on exit from the United States	40.0M	47.3M
» Percentage of Joint Interagency Task Force-South (JIATF-S) annual mission hour objective	100.0%	100.0%

Discussion

CBP is the largest uniformed Federal law enforcement agency in the country, with over 21,000 Border Patrol agents between the ports of entry and over 20,000 CBP officers stationed at air, land, and seaports nationwide. These law enforcement officers are supplemented with over 1,200 Air and Marine agents and officers, and over 2,300 agricultural specialists and other professionals.

The performance measure "Amount of currency seized on exit from the United States" provides the total dollar amount of all currency in millions, seized during outbound inspection of exiting passengers and vehicles, both privately-owned and commercial. The scope of this measure covers both the Southwest and Northern borders and includes all modes of transportation, (land, air, and sea). OFO conducts outbound operations at land border ports of entry enabling CBP to

enforce U.S. laws and regulations applying to the outbound arena, including immigration and drug laws. A number of presidential strategies including the President's National Export Initiative, the President's Export Control Reform Initiative, the *National Drug Control Strategy*, and the *National Southwest Border Counternarcotics Strategy* designate the Outbound program as a crucial effort. The total currency seized upon exit from the United States, which was in excess of \$47.3 million, is an indicator of CBP's success in disrupting domestic drug trafficking at the land borders. These seizures of currency were potentially destined for criminal or transnational groups.

OAM conducts extended border operations to support a defense-in-depth layered approach to homeland security. OAM applies assets in the source and transit zones through coordinated liaison with other U.S. agencies and international partners. OAM coordinates with the larger law enforcement and interdiction community through its partnership with JIATF-S. OAM typically supports JIATF-S requests with P-3 AEW and P-3 Long-Range Tracker (LRT) aircraft. OAM also supports JIATF-S with other aircraft and air assets including the Dash 8, Chet, C12 fixed-wing, Blackhawk rotor-wing aircraft, and unmanned aircraft systems. The FY2011 DHS Statement of Intent included CBP's objective to provide 7,200 flight hours for detection and monitoring activities with P-3 AEW and P-3 LRT aircraft in support of JIATF-S operations. OAM exceeded the goal of 7,200 hours for FY2011 with the P-3 aircraft, flying a total of 7,206.8 hours.

The Office of Border Patrol is the principal operational component that works to mitigate all threats – terrorists and weapons of terrorism, smuggling of narcotics, other contraband and people, and the illegal entry of people across the border. One of the principal areas of concern in FY2011 was Tucson Sector, Arizona, where both apprehensions and marijuana seizures were higher than in any other Border Patrol sector. Stronger enforcement resources and better detection capabilities as provided for in 2010, created an even stronger enforcement environment in 2011. The resources came in the form of the Emergency Supplemental for Border Security (Public Law 111-230) signed into law in August 2010 by President Obama.

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Enacted	FY 2012 Request	FY 2013 Request
Drug Resources by Function			
State and Local Assistance	\$8.300	\$7.500	\$0.000
Total Drug Resources by Function	\$8.300	\$7.500	\$0.000
Drug Resources by Decision Unit			
Operation Stonegarden	\$8.300	\$7.500	\$0.000
Total Drug Resources by Function	\$8.300	\$7.500	\$0.000

Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$7.2	\$6.8	\$0.0
Drug Resources Percentage	0.1%	0.1%	0.0%

Program Summary

MISSION

The Federal Emergency Management Agency’s (FEMA) mission is to reduce the loss of life and property and protect communities nationwide from all hazards, including natural disasters, acts of terrorism, and other man-made disasters. FEMA leads a risk-based, comprehensive emergency management system of preparedness, protection, response, recovery, and mitigation.

METHODOLOGY

Operation Stonegarden (OPSG) contributes to efforts to secure the United States borders along routes of ingress from international borders. Currently, FEMA awards OPSG funds in coordination with

Customs and Border Protection. OPSG supports a broadest spectrum of border security activities and, OPSG is not specifically a drug enforcement grant program, but is a part of “State and Local Preparedness Programs” with a programmatic nexus, to support state, local and Tribal law enforcement agencies through its grant to increase material and manpower readiness and increase the number of “boots on the ground” in an effort to better secure our Nation’s borders. The funds awarded are used in intelligence informed operations, which may assist with counterdrug efforts.

BUDGET SUMMARY

No new funding is requested for OPSG in FY 2013. FEMA consolidated its grant

structure and created the National Preparedness Grant Program.

PERFORMANCE

FEMA is currently developing a set of performance measures for the entire portfolio of non-disaster (ND) grant programs, including OPSG. These measures will focus on the administrative and management functions applicable to all ND grants.

In FY 2011, OPSG funding supported state, local, and tribal law enforcement efforts to increase U.S. border security along the international borders. This included countering threats and hazards, deterring violence, enforcing immigration laws, and combating illegal drug trafficking. FY 2011 OPSG accomplishments included the following:

- Increased capability to prevent, protect against, and respond to border security issues;
- Supported local operational objectives and strengthened capabilities to enhance National and State Homeland Security Strategies (such as the Federal Secure Borders Initiative and CBP/Border Patrol (BP) strategies); Supported intelligence-based operations, through CBP/BP Sector Level experts, to ensure safety and operational oversight of Federal, State, local, tribal, and territorial law enforcement agencies participating in OPSG operational activities;
- Supported requests to Governors to activate, deploy, or redeploy specialized National Guard Units/Packages and/or elements of State law enforcement to increase or augment specialized/technical law enforcement

elements and operational activities;
and;

- Continued to increase operational, materiel, and technological readiness of State, local, tribal, and territorial law enforcement agencies.

DEPARTMENT OF HOMELAND SECURITY

Federal Law Enforcement Training Center

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
International	\$0.478	\$0.485	\$0.463
Investigations	45.853	46.542	44.400
State and Local Assistance	1.433	1.454	1.387
Total Drug Resources by Function	\$47.764	\$48.481	\$46.250
Drug Resources by Decision Unit			
Salaries and Expenses	\$47.764	\$48.481	\$46.250
Total Drug Resources by Decision Unit	\$47.764	48.481	\$46.250

Drug Resources Personnel Summary			
Total FTEs (direct only)	224	224	224
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$0.270	\$0.275	\$0.257
Drug Resources Percentage	17.7%	17.6%	18.0%

Program Summary

MISSION

The Federal Law Enforcement Training Center (FLETC) is an interagency law enforcement training facility that serves a leadership role as the Federal Government's principal provider of world-class, interagency law enforcement training to more than 90 Federal agencies, as well as training and technical assistance to state, local, tribal, territorial, and international law enforcement entities. FLETC provides premium training programs in support of drug enforcement activities, primarily in advanced programs that teach and reinforce law enforcement skills of investigation.

METHODOLOGY

The portion of FLETC's total budget considered to be drug resources is identified by historical trends of drug-related training relative to total student-weeks of training and the associated budget authority required to conduct that training. Advanced training programs with a drug nexus, as well as state and local training programs with a drug nexus, are considered to provide 100 percent support to drug enforcement activities. All international training has a drug nexus and is also considered to provide 100 percent support.

The percentage of the Salaries and Expenses appropriation that supports drug

enforcement activities remains constant at 20.4 percent; however, the percentage of FLETC's total budget authority in support of drug enforcement activities fluctuates.

BUDGET SUMMARY

The FY 2013 drug control request for FLETC is \$46.3 million, which is a decrease of \$2.2 million from the FY 2012 enacted level. The Salaries and Expenses appropriation enables FLETC to accomplish its mission of training those who protect our homeland. Salaries and Expenses resources are used to conduct training and to fund the support activities critical to the conduct of training.

Investigations

Total FY 2013 Request: \$44.4 million
(Reflects \$2.1 million decrease from FY 2012 enacted level)

FLETC training programs with a drug nexus equip law enforcement officers and agents with the basic skills to support drug investigations. Topics focus on the recognition and identification of the most commonly abused illicit drugs and pharmaceuticals. To enhance the realism of training, FLETC maintains a limited, accountable repository of illicit drugs for use in identification and testing exercises using various drug testing methods. Heightened realism is also achieved in various training programs that feature aspects of marijuana cultivation, controlled burns, or simulated clandestine laboratories that prepare students to respond properly when faced with situations involving hazardous chemicals.

FY 2013 Changes (-\$2.1 million): While overall funding is slightly lower than the FY 2012 enacted amount, the request continues to support the cost of

providing training, including personnel, supplies, equipment and facilities.

State and Local Assistance

Total FY 2013 Request: \$1.4 million
(Reflects \$0.1 million decrease from FY 2012 enacted level)

FLETC offers advanced training programs at sites around the country to benefit state, local, tribal, and territorial officers who are unable to travel to a FLETC residential site. Skills that can be employed in drug investigations may be incorporated into these off-site training programs.

FY 2013 Changes (-\$0.1 million): In FY2013, FLETC will continue to support training, including personnel, supplies, and equipment at non-FLETC facilities.

International

Total FY 2013 Request: \$0.5 million
(Reflects no change from FY 2012 enacted level)

International law enforcement students may receive training on-site at Glynco, GA or abroad (for example, at an International Law Enforcement Academy). All advanced training provided for international students has a nexus to drug enforcement activities.

FY 2013 Changes (no change): The request supports the cost of providing training, including personnel, supplies, equipment, and facilities at FLETC and non-FLETC sites.

PERFORMANCE

This section on the FY 2011 performance of FLETC's drug support mission is based on agency Government Performance and Results Act documents and other agency information. The FY 2011 performance information for FLETC's drug related training is shown below.

Federal Law Enforcement Training Center		
Selected Performance Metric	FY 2011 Target	FY 2011 Achieved
Percent of Partner Organizations satisfied with the training provided by the FLETC	91%	97%

Discussion

FLETC’s mission, which is to train those who protect our homeland, also supports the *National Drug Control Strategy* by providing drug investigations training for law enforcement agents and officers.

mechanism to better assess the performance of its counterdrug resources.

The officers and agents that receive FLETC training in drug investigation activities are employed primarily by Federal agencies with a law enforcement role. These Federal agencies, which have formalized their relationship with FLETC as their trainer of choice through Memoranda of Understanding, are substantively involved in the strategic direction of FLETC and are referred to as Partner Organizations. FLETC measures its success by assessing the satisfaction of its Partner Organizations with the requested training that FLETC provided.

In FY 2011, FLETC trained 70,542 students, equating to 128,023 student-weeks of training. The curriculum for about 16 percent of these students included training in drug investigation activities.

In late FY 2012, FLETC will baseline a new metric, which will be used as its selected drug related performance metric starting in FY 2013. This new metric will more accurately reflect the satisfaction of Partner Organizations with the counterdrug-related training FLETC provides to their officers and agents, thereby providing FLETC with a

DEPARTMENT OF HOMELAND SECURITY
Immigration and Customs Enforcement

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$13.776	\$16.967	\$16.253
International	7.112	7.275	6.882
Investigations	483.652	499.283	479.995
Total Drug Resources by Function	\$504.540	\$523.525	\$503.130
Drug Resources by Decision Unit			
Salaries and Expenses - Immigration Enforcement	\$504.540	\$523.525	\$503.130
Total Drug Resources by Decision Unit	\$504.540	\$523.525	\$503.130

Drug Resources Personnel Summary			
Total FTEs (direct only)	2,524	2,627	2,525
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$5.8	\$5.9	\$5.6
Drug Resources Percentage	8.7%	8.9%	8.9%

Program Summary

MISSION

U.S. Immigration and Customs Enforcement (ICE), a multi-mission law enforcement agency, uses aggressive border enforcement strategies to investigate and disrupt the flow of narcotics and ill-gotten gains across the Nation's borders, and dismantle related smuggling organizations. ICE achieves these objectives by maintaining a cadre of Title 21 cross-designated Special Agents and a multi-disciplined money laundering control program to investigate financial crimes and interdict bulk currency shipments exported out of the United States.

METHODOLOGY

ICE is a multi-mission bureau, and budget authority is reported pursuant to an approved drug methodology. ICE's methodology is based on investigative case hours recorded in the agency's automated Case Management System (formerly known as Treasury Enforcement Communication System - TECS). ICE agents record the type of work performed in this system. Following the close of the fiscal year, a report is run showing investigative case hours that are coded as general drug cases and money laundering drug cases. A second report is run showing all investigative case hours logged.

Separate calculations exist for ICE's three drug-related components within Homeland Security Investigations (HSI): Office of Investigations (OI), Office of International Affairs (OIA), and Office of Intelligence (Intelligence). OI, OIA and Intelligence derive a percentage by dividing the number of investigative case hours linked to drug control activities by the total number of investigative case hours. In FY 2011, 28.9 percent of case hours were drug-related for OI, 6.3 percent for OIA, and 24.3 percent for Intelligence; these were used to compute FY 2012 and FY 2013 estimates.

BUDGET SUMMARY

The total drug control request for ICE for FY 2013 is \$503.1 million, a decrease of \$20.4 million from the FY 2012 enacted level.

Salaries and Expenses

Total FY 2013 Request: \$503.1 million
(Reflects \$20.4 million decrease from FY 2012 enacted level)

The Salaries and Expenses account contributes to the ICE mission of bringing a unified and coordinated focus to the enforcement of Federal immigration and customs laws. Salaries and Expenses resources are used to combat terrorism and illegal immigration through the investigation, detention, and prosecution of criminal and non-criminal aliens, and domestic gangs. These activities protect the infrastructure and persons within the United States.

Investigative Activities

FY 2013 Request: \$480.0 million
(Reflects \$19.3 million decrease from FY 2012 enacted level)

The requested resources will support investigative efforts; coordination with other Federal, State, local, and foreign law enforcement agencies; and participation in

task forces, such as the Organized Crime Drug Enforcement Task Force (OCDETF), the High Intensity Drug Trafficking Areas (HIDTAs), Drug Enforcement Administration's (DEA) Special Operations Division (SOD) and the Border Enforcement Security Task Force (BEST) initiative.

As a member of OCDETF, ICE has access to interagency information available through the OCDETF Fusion Center. This collaboration with other Fusion Center agencies, including the Federal Bureau of Investigation (FBI), the DEA and the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF), enhances ICE's ability to develop target profiles and actionable investigative leads to disrupt and dismantle significant drug traffickers.

In further support of interagency collaboration, ICE will remain an active participant in the DEA-led SOD, an interagency coordination unit consisting of representatives from several Federal agencies that include DEA, FBI, and the Internal Revenue Service. During ICE field investigations, ICE targets the command and control communication devices employed by criminal organizations operating across jurisdictional boundaries on a regional, national, and international level and coordinates this information among law enforcement agencies, foreign and domestic, to maximize efforts to disrupt and dismantle targeted organizations.

Implemented in FY 2006, the BEST initiative developed a comprehensive approach that identifies, disrupts, and dismantles criminal organizations posing significant threats to border security. The BEST teams incorporate personnel from ICE; U.S.

Customs and Border Protection (CBP); DEA; ATF; FBI; the U.S. Coast Guard; and the U.S. Attorney's Office along with other key Federal, State, local and foreign law enforcement agencies.

As part of its investigative authorities, ICE will utilize the requested resources to fund operations that target the systems used by international criminal organizations to launder the proceeds of their criminal activities, such as the Cornerstone Initiative. Other examples of ICE's financial investigations are the Trade Transparency Unit (TTU) and Money Laundering Coordination Center, which provide the analytical infrastructure to support financial and trade investigations. The TTU provides the capability to identify and analyze complex trade-based money laundering systems and has the unique ability to analyze domestic trade and financial data in addition to the trade and financial data of foreign cooperating partners. ICE will also continue its investigative activities in support of the National Parcel Post Initiative, which targets individuals and organizations that smuggle contraband via the U.S. Postal Service and express carrier hubs.

FY 2013 Changes (-\$19.3 million): The decrease reflects cost-savings made possible through efficiencies identified by OI in the FY 2013 President's Budget.

International Affairs Activities

FY 2013 Request: \$6.9 million
(Reflects \$0.4 million decrease from FY 2012 enacted level)

As the primary component of DHS international law enforcement operations, OIA is responsible for enhancing national security by conducting and coordinating

international investigations involving transnational criminal organizations and serving as ICE's liaison to foreign counterparts in local government and law enforcement. Based on a memorandum of understanding, all ICE foreign narcotics investigations are coordinated with DEA.

A part of ICE's strategy is to attack the vulnerabilities of drug trafficking organizations and disrupt key business sectors and weaken the economic basis of the drug trade. The illegal drug market in the U.S. is based on illegal narcotics grown or manufactured in foreign countries and smuggled across our Nation's borders. ICE agents enforce a wide range of criminal statutes including Title 18 and Title 19 of the U.S. Code. These statutes address general smuggling issues as well as customs violations. ICE also enforces Title 21, which covers the importation, distribution, manufacture and possession of illegal narcotics.

FY 2013 Changes (-\$0.4 million): The small decrease in funding reflects cost-savings made possible through efficiencies identified by OIA in the FY 2013 President's Budget.

Intelligence Activities

FY 2013 Request: \$16.3 million
(Reflects \$0.7 million decrease from FY 2012 enacted level)

Intelligence collects, analyzes, and shares strategic and tactical data with Federal, state, local and tribal law enforcement partners in an effort to disrupt the flow of drugs by collecting and analyzing all-source information and disseminating strategic intelligence to the appropriate partner.

FY 2013 Changes (-\$0.7 million): While less than the FY 2012 enacted level the request will maintain analysis and support of DHS components' requests for strategic intelligence information and reports.

PERFORMANCE

This section on the FY 2011 performance of the drug control mission of ICE is based on agency GPRA documents and other agency information.

The ICE mandate to detect, disrupt and dismantle smuggling organizations supports ONDCP initiatives and U.S. national drug control policy. Within their respective spheres of operation, the Investigations, International Affairs, and Intelligence Divisions contribute to the Strategy's counter-drug efforts. Specifically, ICE efforts contribute to disrupting the market for illicit drugs and creating secure borders.

ICE is in the process of establishing a new performance metric in FY 2012 to better indicate the success of counter-narcotics enforcement. The new performance metric will be "the percentage of high impact or high risk drug investigations that result in a disruption or dismantlement of domestic and transnational criminal organizations." Cases are deemed high impact or high risk based on a pre-defined set of criteria, and are reviewed by a significant case panel monthly. A disruption is defined as actions taken in furtherance of the investigation that impede the normal and effective operation of the target organization or targeted criminal activity. Dismantlement is defined as destroying the target organization's leadership, network, and financial base to the point that the organization is incapable of reconstituting itself.

Immigration and Customs Enforcement		
Selected Performance Metrics	FY 2011 Target	FY 2011 Actual
» Percentage of closed drug investigations which have an enforcement consequence (arrest, indictment, conviction, seizure, fine or penalty)	78.0%	72.0%
» Percentage of cocaine seizures considered high impact	N/A*	54%
» Percentage of marijuana seizures considered high impact	N/A*	48%
» Percentage of methamphetamine seizures considered high impact	N/A*	65%
» Percentage of heroin seizures considered high impact	N/A*	68%
» Dollar value of seized currency and monetary instruments from drug operations	N/A*	\$232.4M
» Dollar value of real or other property seized from drug operations	N/A*	\$53.7M
» Percentage of overseas hours spent on drug related cases	4.5%	6.3%
» Total counter narcotics intelligence requests satisfied	796	2721

*ICE keeps track of additional year-end statistics to monitor drug enforcement efforts but does not set targets for seizures.

Discussion

As the primary investigative agency within DHS, ICE's enforcement efforts directly impact DHS's ability to secure our borders, enforce immigration law, and stem illegal

trafficking and related transnational crime. ICE targets its investigative resources on the illicit drug trade networks that exploit our nation's borders. Dismantling criminal organizations that take advantage of

vulnerabilities at our borders is a critical step to preventing organizations from leveraging criminal networks to weaken America's national security.

techniques to support domestic cases and interagency cross-border initiatives.

ICE's money laundering control program investigates financial crimes and interdicts bulk currency shipments exported out of the United States. ICE tracks such financial crimes, related to drug operations, through two performance measures: (1) the dollar value of seized currency and monetary instruments from drug operations, and (2) the dollar value of real or other property seized from drug operations. The dollar value of real or other property seized from drug operations was \$53.7 million in FY 2011. In addition, ICE seized \$232.4 million of currency and monetary instruments from drug operations. The seizure of currency and monetary instruments reduces the financial incentives for criminals.

In FY 2011, the percentage of closed drug smuggling investigations that resulted in an enforcement consequence was 72.0 percent. An enforcement consequence includes arrests, indictments, convictions, seizures, fines and/or penalties.

Investigations that result in an enforcement consequence increase deterrence and contribute to the elimination of vulnerabilities in various aspects of trade and immigration.

In FY 2011, 6.3 percent of all overseas investigative hours performed by the Office of International Affairs (OIA) were spent on drug related cases. OIA partners with domestic ICE components and with U.S. law enforcement agencies overseas to leverage overseas resources, mitigating global narcotics threats to the U.S. This includes utilizing investigative and intelligence

DEPARTMENT OF HOMELAND SECURITY
Office of Counternarcotics Enforcement

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$0.251	\$0.157	\$0.000
Interdiction	2.218	1.383	0.000
International	0.003	0.002	0.000
Investigations	0.367	0.229	0.000
State and Local Assistance	0.044	0.028	0.000
Research and Development	0.002	0.001	0.000
Total Drug Resources by Function	\$2.885	\$1.800	\$0.000
Drug Resources by Decision Unit			
Salaries and Expenses	\$2.885	\$1.800	\$0.000
Total Drug Resources by Decision Unit	\$2.885	\$1.800	\$0.000
Drug Resources Personnel Summary			
Total FTEs (direct only)	15	15	15
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$0.003	\$0.002	\$0.0
Drug Resources Percentage	100.0%	100.0%	0.0%

Program Summary

MISSION

In FY 2012, Congress provided a total of \$1.8 million for the Office of Counternarcotics Enforcement (CNE) to continue operations while the Department of Homeland Security (DHS) conducts an orderly termination of the Office. This funding will be transferred to the Office of Policy after March 30, 2012, which is expected to assume policy development and coordination responsibilities currently assigned to CNE. The termination of CNE reflects the need to streamline Executive Branch efforts to carry out the

counternarcotics enforcement mission. DHS will integrate the existing CNE policy planning and coordination activities within the broader DHS enforcement and security missions and make optimum use of the existing planning and operations elements of its key law enforcement agencies. It will also enable DHS, through the Office of Policy, to coordinate DHS policy and programs that are carried out with the Office of National Drug Control Policy and other Federal, state, local, and international government partners.

METHODOLOGY

All CNE resources are scored as a part of the National Drug Control Budget.

BUDGET SUMMARY

While there is no specific FY 2013 request to support counternarcotics oversight activities, DHS is working to ensure that the transition of counternarcotics responsibilities is seamless and that departmental level counternarcotics policy coordination and oversight capabilities are sustained.

DEPARTMENT OF HOMELAND SECURITY

United States Coast Guard

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Interdiction	\$1,405.661	\$973.239	\$1,122.339
Research and Development	2.395	4.050	2.559
Total Drug Resources by Function	\$1,408.056	\$977.289	\$1,124.898
Drug Resources by Decision Unit			
Acquisition, Construction and Improvements	\$651.814	\$254.564	\$401.920
Operating Expenses	739.622	703.897	705.361
Research and Development	2.395	4.050	2.559
Reserve Training	14.225	14.778	15.058
Total Drug Resources by Function	\$1,408.056	\$977.289	\$1,124.898
Drug Resources Personnel Summary			
Total FTEs (direct only)	5,841	5,434	5,822
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$11.2	\$10.6	\$10.0
Drug Resources Percentage	12.6%	9.3%	11.3%

Program Summary

MISSION

The United States Coast Guard is America's lead maritime safety, security, and stewardship agency, enforcing all applicable Federal laws and international conventions on, under, and over the high seas and waters subject to the jurisdiction of the United States, including U.S. territorial seas, the contiguous zone, and the Exclusive Economic Zone. As part of its maritime security strategic goal, the Coast Guard's drug interdiction objective is to reduce the flow of illegal drugs entering the United States by denying smugglers access to maritime routes.

The Coast Guard has a comprehensive approach to maritime counterdrug law enforcement in the source, transit, and arrival zones. The cornerstones of the USCG strategy are to maintain an interdiction presence based on the availability of assets in order to deny smugglers access to maritime routes and deter trafficking activity; strengthen ties with source and transit zone nations to increase their willingness and ability to reduce the production and trafficking of illicit drugs within their sovereign boundaries, including territorial seas; and support interagency and international efforts to combat drug smuggling through increased cooperation and coordination.

METHODOLOGY

The Coast Guard does not have a specific appropriation for drug interdiction activities. All Coast Guard operations, capital improvements and acquisitions, reserve training, and research and development activities targeted toward drug interdiction are funded out of the associated appropriations specified herein.

Reflecting the multi-mission nature of Coast Guard units, the accounting system is keyed to operating and support facilities, rather than to specific missions. Consistent with that approach, personnel and other costs are administered and tracked along operational and support capability lines requiring detailed cost accounting techniques.

The Coast Guard uses a Mission Cost Model (MCM) methodology to compute its drug attribution. The MCM allocates funding across Coast Guard missions in the Performance-Based Budget (PBB) presentation. The MCM allocates all direct and support costs to mission-performing units. Established baselines of operational activity are used to further allocate those costs to the various missions.

Operating Expenses (OE)

OE funds are used to operate assets, facilities, maintain capital equipment, improve management effectiveness, and recruit, train, and sustain all active duty military and civilian personnel. Budget presentations for current and future years use the most recent OE asset cost data. The MCM systematically allocates all OE costs in the following way:

- **Direct Costs:** Applied directly to the operating assets that perform missions;

- **Support Costs:** Applied to assets for which cost variability can be specifically linked to operating assets (based on carefully-developed allocation criteria); and,
- **Overhead Costs:** Applied to assets based on proportion of labor dollars spent where cost variability cannot be specifically linked to operating assets. This is a standard industry approach to overhead allocation.

Once all OE costs are fully loaded on mission-performing assets, those costs are further allocated to Coast Guard missions (Drug Enforcement, Search and Rescue, etc.) using actual or baseline projections for operational employment hours.

Acquisition, Construction & Improvements (AC&I)

The MCM is used to develop an allocation of costs by mission areas for proposed AC&I projects based on the typical employment of assets germane to the project. For example, if a new asset is being proposed for commissioning through an AC&I project, costs would be applied to missions using the operational profile of a comparable existing asset. The Coast Guard uses a zero-based budget approach in developing its request for AC&I funding. Program changes in the AC&I account may vary significantly from year-to-year depending on the specific platforms or construction projects supported. AC&I funding finances the acquisition of new capital assets, construction of new facilities, and physical improvements to existing facilities and assets. The funds cover Coast Guard-owned and operated vessels, shore facilities, and other equipment such as computer systems.

Research, Development, Test, & Evaluation (RDT&E)

The MCM is used to develop an allocation of costs by mission areas for proposed Research, Development, Test, and Evaluation projects. Allocation of drug interdiction funding is accomplished within the zero-based RDT&E appropriation by evaluating each project's anticipated contribution to drug interdiction efforts based on subject matter expert professional judgment.

Reserve Training (RT)

RT funds are used to support Selected Reserve personnel who in turn operate facilities, maintain capital equipment, improve management effectiveness, and assist in sustaining all operations. Allocation of RT funding to the Coast Guard's drug interdiction mission is done using the same methodology used for the OE appropriation.

BUDGET SUMMARY

The Coast Guard's FY 2013 budget requests \$1,124.9 million to fund drug control operations, which is a \$147.6 million increase over the FY 2012 enacted level.

The FY 2013 budget emphasizes rebuilding the Coast Guard through the replacement of aging assets and infrastructure while sustaining front line operations within fiscal guidance levels. The FY 2013 budget leverages targeted reductions in operational capacity and efficiencies to support continued recapitalization of aging assets and infrastructure.

Acquisition, Construction and Improvements

Total FY 2013 Request: \$401.9 million (Reflects \$147.4 million increase from FY 2012 enacted level)

The FY 2013 budget provides funding for continued replacement or refurbishment of increasingly outdated and unreliable assets. The most important new assets under production are the National Security Cutter (NSC), Fast Response Cutter (FRC), and Maritime Patrol Aircraft (MPA). The timely replacement of aging 378-foot High Endurance Cutters (HECs) with the 418-foot NSC is the Coast Guard's top recapitalization priority. Other recapitalization projects include the 154-foot FRC for the 110-foot Island Class Patrol Boat and the MPA for the 26-year-old HU-25 Falcon aircraft. All of the assets being replaced have reached or exceeded the end of their service lives.

In general, replacement assets such as the NSC, FRC, and MPA will provide improved capability over in-service legacy assets. Additionally, replacing assets with new, more reliable ships and aircraft reduces unplanned maintenance liabilities currently experienced with the HECs and Falcons. In the long-term, continued timely replacement of aging assets will significantly increase the Coast Guard's overall performance to the Nation.

FY 2013 Changes (+\$147.4 million): The FY 2013 budget provides funding for newly acquired assets and also funds the critical logistics and Command, Control, Computers, Communications, Intelligence, Surveillance, and Reconnaissance (C4ISR) investments needed to support them. Preservation of the Coast Guard's maritime capability

through the recapitalization of surface and air assets, particularly segment 2 of the NSC #6's long lead time materials, the production contract and post-production.

Operating Expenses

**Total FY 2013 Request: \$705.4 million
(Reflects \$1.5 million increase from FY 2012 enacted level)**

The FY 2013 budget supports the operation and maintenance of Coast Guard capability, including personnel pay and allowances, training and recruiting, operating funds for newly acquired assets delivered through Coast Guard recapitalization programs, and unit and depot level maintenance.

Operational reductions in the FY 2013 budget that could impact the Coast Guard's drug interdiction mission include the decommissioning of two HECs and three 110-foot patrol boats, retirement of three HU-25 aircraft, disestablishment of the High Tempo High Maintenance (HTHM) operations program for the 110-foot patrol boats, and a reduction to the Coast Guard's Mobile Training Branch.

The Coast Guard will decommission the fourth and fifth HEC of the original 12 HEC fleet in FY 2013. With the average cutter age at 43 years, the HEC fleet has become increasingly difficult to maintain and sustain operationally. Major cutter operational availability for the drug interdiction mission is sustained by the more capable NSCs as they come online. The fourth NSC is under production and scheduled for delivery in fourth quarter of FY 2014, and the fifth NSC is under contract and scheduled for delivery in FY 2016.

New FRCs in the Seventh Coast Guard District in FY 2013 will mitigate impacts to the drug interdiction mission resulting from decommissioning of the three 110-foot patrol boats. With eight FRCs scheduled for delivery through 2013, these decommissioning actions will begin the transition of the in-service patrol boat fleet to the new FRC fleet.

The HTHM operations program was implemented as a stop-gap measure when eight 110-foot patrol boats had to be pulled from service in 2007. Termination of this program coincides with commissioning of the FRC, which will replace this lost capacity. This action will cease all patrol boat multi-crewing operations at the beginning of FY 2013 and returns six 110-foot patrol boats to their pre-HTHM operational tempo levels.

Three HU-25 aircraft assigned to Coast Guard Air Station (CGAS) Cape Cod will be retired in FY 2013. In their place, three more capable HC-144A aircraft will be placed into full-operational status at CGAS Cape Cod. The three HC-144A aircraft will provide more flight hours than the four retired HU-25s.

The Coast Guard's Mobile Training Branch provides training to foreign countries in support of national defense, homeland security, and maritime prevention priorities, including law enforcement training that enhances partner nation capacity to combat illicit drug trafficking. In 2013, the Coast Guard's decrease the number of core personnel in the Branch but will augment the Mobile Training Team with Coast Guard personnel attached to other units on a temporary-duty basis to deploy and assist with training missions.

FY 2013 Changes (+\$1.5 million): The \$1.5 million increase in Operating Expenses is attributable to increases in military and civilian pay and benefits, annualization of FY 2012 increases, operating funds for newly acquired assets delivered through Coast Guard recapitalization programs, and increased funding for unit and depot level maintenance projects.

Research and Development

Total FY 2013 Request: \$2.6 million
(Reflects \$1.5 million decrease from FY 2012 enacted level)

RDT&E funding generally supports all eleven statutorily mandated Coast Guard missions. These mission-programs in turn directly support the Coast Guard's role as the principal Federal agency for ensuring maritime safety, security, and environmental stewardship.

FY 2013 Changes (-\$1.5 million): FY 2013 resources will continue to support the development of technologies to improve detection of hidden contraband; improve tactical communications systems to improve interagency coordination, command and control; and develop technologies that give operational commanders a wider range of options to stop fleeing vessels.

Reserve Training

Total FY 2013 Request: \$15.1 million
(Reflects \$0.3 million increase over FY 2012 enacted level)

RT funding generally supports all eleven Coast Guard missions. RT provides trained units and qualified personnel for service in times of war or national emergency. In addition, Coast Guard Reserves are

frequently called upon to provide units and personnel to augment active Coast Guard forces during critical events. RT funds are used to support Selected Reserve personnel who in turn support and operate facilities, maintain capital equipment, improve management effectiveness, and assist in sustaining all operations.

FY 2013 Changes (+\$0.3 million): The FY 2013 budget includes an increase of \$0.3 million for drug-related RT. RT funds are used to support Selected Reserve personnel, who in turn support and operate facilities, maintain capital equipment, improve management effectiveness, and assist in sustaining all operations. In the RT budget, allocating a share of budget authority using the same methodology used for OE derives the amount allocated to the drug control mission area.

PERFORMANCE

This section on the FY 2011 performance of the USCG program is based on agency GPRA documents and USCG data. The USCG did not complete any independent program evaluations or assessments of its drug interdiction in FY 2011. The last independent program evaluation was completed by the Center of Naval Analyses (CNA). The USCG changed the methodology for measuring drug interdiction performance, its primary outcome, in FY 2009, thus successfully implementing one of the recommendations from the CNA report.

Selected Measures of Performance	FY 2011	FY 2011
	Target	Actual
» Removal Rate for Cocaine from Non-commercial Vessels in Maritime Transit Zone	15.5%	11.6%
» Metric tons of cocaine removed	≥ 159.7	75.5

Discussion

The USCG continues to use the Consolidated Counter Drug Database (CCDB) as its source for tracking cocaine movement estimates. The CCDB quarterly event-based estimates are the best available authoritative source for estimating illicit drug flow through the transit zone. These estimates permit the USCG to objectively evaluate its performance on a quarterly basis.

In FY 2011 the USCG removed over 166,000 pounds of cocaine and 39,000 pounds of marijuana, detained 191 suspected smugglers and seized 40 vessels in FY 2011. The Coast Guard successfully enacted bilateral agreements and operational procedures to interdict a majority of these foreign flagged vessels (37 out of the 40) and detainees (185 out of the 191 suspected smugglers).

Moreover, the deployment of Coast Guard Law Enforcement Detachments (LEDETs) aboard Allied and U.S. Naval warships accounted for over 16 percent of total fiscal year cocaine removals. In FY 2011, LEDETs removed over 25,000 pounds of cocaine, detained 31 suspected smugglers, and seized seven vessels.

In FY 2011, there was an observed reduction in cocaine flow being smuggled through the transit zone via non-commercial means (652 MT in FY 2011 compared to 682 MT in FY 2010). Of the FY

2011 non-commercial maritime flow, the Coast Guard removed 75.5 Metric Tons (MT) of cocaine, down from its FY 2010 total of 91.8 MT. Relative to the total estimated movement of non-commercial cocaine destined to the United States in FY 2011 captured in the CCDB, the Coast Guard removed 11.6 percent of this estimated flow, falling short of its target of 15.5 percent. Comparatively, the Coast Guard's cocaine removal rate was 13.5 percent in FY 2010.

Although the total number of USGC interdiction and disruption events (for all drugs) increased slightly in FY 2011 (122 in FY 2010 to 129 in FY 2011), the number of USCG cocaine removal events dropped in FY 2011 (97 in FY 2010 to 90 in FY 2011). In the DHS Fiscal Year 2011 Statement of Intent, the USCG planned to provide 2,190 cutter days and 4,700 Maritime Patrol Aircraft (MPA) hours to JIATF-S, but provided only 83 percent of intended cutter days (1,823) and 94 percent of intended MPA hours (4,416) in FY 2011.

The following contributed to the Coast Guard falling short of its FY 2011 Cocaine Removal Rate target:

- Smaller average load size per USCG cocaine removal event (839 kg in FY 2011 compared to 946 kg in FY 2010); Increasingly sophisticated and evolving Transnational Criminal Organization

tactics (e.g. greater use of self-propelled semi- and fully-submersibles); and,

- Reduced availability of surface and air (detection and interdiction) assets.

The national cocaine interdiction goal, first established in 2007, calls for removing 40 percent of documented cocaine moving through the transit zone by 2015. Annual national interim targets, increasing by 2 percentage points per year, were established to incrementally bridge the gap between the historical 24 percent average removal rate and the 40 percent goal. U.S. law enforcement, working in conjunction with Joint Interagency Task Force South (JIATF-South) and partner nation forces, continue to pursue the goal of 40 percent removal by 2015. The USCG's target for FY 2012 is to remove 16.5 percent of the national interim FY 2012 target of 34 percent of the cocaine moving via non-commercial maritime means towards the United States. The USCG works cooperatively with other Federal agencies to carry out the *National Drug Control Strategy*, including support for the JIATF-S counter drug detection and monitoring mission. To sustain interdiction capability and capacity, two National Security Cutters (Coast Guard Cutters BERTHOLF and WAESCHE) will be available for deployment to the JIATF-S Area of Responsibility (AOR). The Coast Guard will continue to pursue expansion of Airborne Use of Force capability. The Coast Guard's Research and Development Center is creating a visible marking device to assist in the recovery of jettisoned contraband, facilitating an increase in actionable intelligence to create additional prosecutions as well as more accurate load size estimates within the CCDB. The Coast Guard will continue its

Counter Drug hidden compartment detection course at the Maritime Law Enforcement Academy in FY 2012, to improve boarding teams' ability to investigate, search, locate, and access hidden compartments on suspect vessels.

With go-fast type vessels remaining the primary means of conveyance by Drug Trafficking Organizations (DTOs) operating in and around the littorals, the USCG will continue to expand its use of bilateral agreements, as well as provide training programs and engage in professional exchanges to enhance partner nation capability. Such engagement strengthens ties with source and transit zone partner nations and increases their maritime law enforcement competency and capability throughout the transit zone.

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT



DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

Office of Community Planning and Development

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Treatment	\$464.200	\$446.000	\$542.400
Total Drug Resources by Function	\$464.200	\$446.000	\$542.400
Drug Resources by Decision Unit			
Continuum of Care: Homeless Assistance Grants	\$464.200	\$446.000	\$542.400
Total Drug Resources by Decision Unit	\$464.200	\$446.000	\$542.400

Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$45.3	\$43.3	\$44.8
Drug Resources Percentage	1.1%	1.0%	1.4%

Program Summary

MISSION

The President's *National Drug Control Strategy (Strategy)* calls for Federal support to reducing barriers to recovery from substance abuse addiction. Lack of housing creates a sense of hopelessness for those abusing substances and presents a barrier to maintaining recovery. The *Strategy* specifically calls for programs to prevent homelessness as a step toward recovery from addiction. It identifies stable and affordable housing is often identified as the most difficult barrier for individuals to overcome when released from prison or jail and calls for support for housing this special population. Also it identifies supportive

environments and a drug-free home as necessary elements to substance abuse recovery. For persons in recovery, structured and supportive housing promotes healthy recovery outcomes.

METHODOLOGY

The Office of Special Needs Assistance Programs in the Department of Housing and Urban Development (HUD) does not have a specific appropriation for drug-related activities. Many of their programs target the most vulnerable citizens in our communities- individuals with chronic mental health and/or substance abuse issues, persons living with HIV/AIDS, and

formerly incarcerated individuals. The percentage of clients with a substance abuse problem is reported by HUD annually, with the most recent data taken from HUD's *2010 Annual Homeless Assessment Report to Congress*; it showed that 28 percent of those using HUD supported temporary housing have a demonstrated substance abuse disability. The Special Needs Assistance Program accounting system is tied to operating and supportive services costs rather than to specific characteristics of the population served (i.e., substance use disorders).

BUDGET SUMMARY

The FY 2013 total drug control estimate for *Continuum of Care* is \$542.4 million, an increase of \$96.4 million over the FY 2012 enacted level.

Continuum of Care – Homeless Assistance Grants

Total FY 2013 estimate: \$542.4 million (Reflects \$96.4 million increase from FY 2012)

HUD's Homeless Assistance Grants are funded through the *Continuum of Care*. States, cities, and counties apply for funding through the *Continuum of Care* competitive process to provide services through three specific programs:

- Supportive Housing Program (SHP)
- Shelter Plus Care (SPC) Program
- Section 8 Moderate Rehabilitation for Single Room Occupancy (SRO) Program.

The *Continuum of Care* funded programs are designed to provide housing and supportive services on a long-term basis for homeless persons with disabilities, (primarily those with serious mental illness,

chronic problems with alcohol and/or drugs, and HIV/AIDS or related diseases) and their dependent families who are living in places not intended for human habitation (e.g., streets) or in emergency shelters.

FY 2013 Changes (+\$96.4 million): The overall *Continuum of Care* budget proposes an increase to support additional housing and assistance through the implementation of various programs funded across the county.

PERFORMANCE

This performance section of the drug control mission of HUD's Office of Special Needs Assistance Programs is based on FY 2010 data collected from programs receiving funding through the annual *Continuum of Care* competition.

Supportive Housing Program (SHP), Shelter Plus Care (S+C), and Single Room Occupancy Program (SRO)		
Selected Measures of Performance	FY 2010 Target	FY 2010 Achieved
» Increase the percentage of participants exiting CoC-funded transitional housing that move into permanent housing to 65 percent or more.	65%	71%
» Increase the number of participants remaining in CoC-funded permanent housing projects for at least 6 months to 77 percent or more.	77%	81.3%
» Projected number of participants who report substance abuse as a barrier to housing to be served in CoC-funded projects.	N/A	60,072 28% of total served

Discussion

The goal of the CoC Homeless Assistance Programs is to reduce the incidence of homelessness in CoC communities, by assisting homeless individuals and families in quickly transitioning to self-sufficiency and permanent housing, as authorized under Title IV of the McKinney-Vento Homeless Assistance Act. The CoC Homeless Assistance Programs include the Supportive Housing (SHP) Program, Shelter Plus Care (S+C) Program, and the Section 8 Moderate Rehabilitation for Single Room Occupancy (SRO) Program.

In FY2010, HUD CoC-funded grantees made substantial progress in meeting performance measures around moving households from transitional housing into permanent housing and increasing the number of households who remain in permanent housing, thus who continue to receive support to maintain stability. In FY2010, grantees projected serving 60,072 individuals with chronic alcohol and/or other substance abuse problems, or 28

percent of the total population served in CoC-funded programs. The percentage of households moving from transitional housing to permanent housing (61.1%) nearly reached the HUD goal of 65 percent and the percentage of households remaining in permanent housing more than 6 months (79.4%) exceeded the HUD goal of 77 percent.

DEPARTMENT OF THE INTERIOR



DEPARTMENT OF THE INTERIOR
Bureau of Indian Affairs

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Investigations	\$10.000	\$10.000	\$10.000
Total Drug Resources by Function	\$10.000	\$10.000	\$10.000
Drug Resources by Decision Unit			
Drug Initiative	\$10.000	\$10.000	\$10.000
Total Drug Resources by Decision Unit	\$10.000	\$10.000	\$10.000

Drug Resources Personnel Summary			
Total FTEs (direct only)	45	45	45
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$2.594	\$2.531	\$2.527
Drug Resources Percentage	0.40%	0.42%	0.40%

Program Summary

MISSION

The mission of the Bureau of Indian Affairs (BIA) is to promote economic opportunity, enhance the quality of life, and protect and improve the trust assets of American Indians, Indian tribes, and Alaska Natives.

The BIA’s Office of Justice Services (OJS) directly operates or funds law enforcement, tribal courts, and detention facilities on Federal Indian lands. The mission of the OJS is to uphold tribal sovereignty and customs and provide for the safety of Indian communities affected by drug abuse.

METHODOLOGY

The Drug Initiative is funded within the Law Enforcement sub-activity which supports initiatives involving drug enforcement. The

special initiative line allows the OJS to specifically track drug-related funding.

BUDGET SUMMARY

In FY 2013, BIA requests \$10.0 million for the Drug Initiative, which represents no change from the FY 2012 enacted level.

Drug Initiative

**Total FY 2013 Request: \$10.0 million
(Reflects no change from FY 2012)**

The drug trafficking and related activity in Indian country is a major contributor to violent crime and poses serious health and economic difficulties on Indian communities. Requested funding will support drug enforcement efforts that allow Drug Enforcement Officers (DEOs) to manage investigations and implement

interdiction programs focused on reducing the effects of drugs and related crime in Indian country. The activities performed by DEOs include eradicating marijuana cultivation, conducting complex criminal investigations, carrying out surveillance of criminals, infiltrating drug trafficking networks, and establishing and maintaining cooperative relationships with other Federal, state, local, and tribal law enforcement organizations in the efforts against substance abuse.

In addition, the School Resource Officer (SRO) program has become an important part of the OJS Drug Initiative with more than 100 schools servicing Indian Country. SRO positions serve as the initial contact with students, educating them on the negative aspects of illegal drug use and gang activity within the students' environment. Eighteen SRO positions are funded throughout Indian country, and the program provides instruction in drug awareness and gang resistance using a structured curriculum. These positions play a key role in providing visual deterrent and identifying potential threats of school violence.

The budget request also supports the Intelligence group tasked with intelligence gathering, reporting, and investigative support needed in all parts of Indian country for assistance in drug investigations. With this component, national, regional, and local threat assessments can be established and presented to law enforcement agencies working on or near Indian country.

The Victim/Witness Services (VWS) program provides needed support to cooperative witnesses and victims of violent and drug

crimes. The protection of witnesses and victims is essential during drug investigations, and VWS can provide this needed attention to victims and witnesses at the local level when other resources are not available. Additionally, VWS staff provides guidance to tribes in developing their own VWS programs. VWS also includes an effort to assess existing victim/witness programs and expand this program to all BIA law enforcement districts.

FY 2013 Changes (no change): The requested funding (Drug Enforcement (\$8.0 million), Victim Witness Coordination (\$1.0 million), and Intelligence Sharing (\$1.0 million)) will continue to address the highly visible drug crisis in Indian country through the expansion of the drug program and training for Bureau and Tribal officers.

PERFORMANCE

This section on the FY 2011 performance of BIA's program is based on agency GPRA documents, and other agency information. The table includes performance measures, targets, and achievements for the latest year for which data are available.

Bureau of Indian Affairs		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
»		
» Number of drug cases worked	699*	1,605*
» Amount of drugs seized: Meth (ICE)	41.68 lb	14.00 lb
» Amount of drugs seized: Meth (powder)	0.74 lb	0.14 lb
» Amount of drugs seized: Cocaine (Crack)	8.44 lb	0.43 lb
» Amount of drugs seized: Cocaine (Powder)	108.66 lb	7.73 lb
» Amount of drugs seized: Prescription drugs	53.19 lb	14.89 lb
» Amount of drugs seized: Heroin	0.08 lb	0.02 lb
» Amount of drugs seized: Marijuana (processed)	4,243 lb	2,895.86 lb
» Amount of drugs seized: Marijuana (plants)	41,197	87,843
» Amount of drugs seized: MDMA (Ecstasy)	0.15 lb	0.22 lb

* Includes cases reported by tribes.

Discussion

In 2011, to keep BIA Division of Drug Enforcement (DDE) Agents in a position to work drug investigations, DDE did not provide drug-related training for patrol officers. To better address this training need, this responsibility was transitioned to the Indian Police Academy to facilitate all drug-related training with the support of DDE Agents. This new focus has been implemented for FY 2012 and will produce a significant increase over previous years of patrol officers who received drug-related training.

BIA continued to see an increase in drug activity on lands under its jurisdiction. The table reflects investigative activity with a focus on complex conspiracy-type investigations, which do not always lead to large seizures of illegal substances at the end of the investigation. BIA DDE also worked with DEA and other Federal, state, and local task forces to target the distribution sources of illegal narcotics located near Indian Reservations. In some instances these suppliers live and sell the

illegal narcotics to Tribal members who travel just off the reservation to purchase the narcotics and then travel back to the reservation, making it difficult at times to conduct undercover buys and seize significant amounts of narcotics on the reservation. BIA's DDE agents continue to investigate highly technical court ordered Title III wire intercepts, Organized Crime Drug Enforcement Task Forces (OCDETF) cases, and Racketeer Influenced and Corrupt Organizations (RICO) cases. Generally these types of investigations result in more case openings and less drug seizures but generate more Indian country arrests, creating a more sustained local impact on the availability of drugs.

As a result of the complex investigations conducted in FY 2011, fewer seizure amounts were reported but reflected historically larger amounts of narcotics being displaced from the local Indian communities on the reservation. In these types of cases, the mid-level and upper-level suppliers of the narcotics were

indicted, disrupting the flow of illicit drugs in many of the areas where law enforcement previously opened drug related cases.

In FY2011, marijuana eradication numbers doubled from 2010. Marijuana gardens involving more than 9,000 plants were found in Yakama Indian Reservation, Washington; Colville Indian Reservation, Washington; and Caddo Indian Trust Land, Oklahoma. Detection and eradication was facilitated by partnerships the DDE established with tribal police departments. A majority of marijuana eradication operations are conducted in rugged, mountainous terrain generally without infrastructure for radio communication.

Although the table shows marijuana plant seizures increased in FY2011, there was a decrease in the seizure of methamphetamine and cocaine in Indian Country. The targets for FY2011 were based on previous year investigative seizures, prior to the increase in opening a larger number of the complex conspiracy type investigations in FY2011. However, drug-related arrests in FY2011 increased 64 percent from the previous year.

BIA continues to build the Indian country Intelligence program to provide a solid intelligence network for tribal, Federal, state, and local law enforcement to work collaboratively on information-sharing related to illegal drug activities or other law violations.

DEPARTMENT OF THE INTERIOR

Bureau of Land Management

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2011 Enacted	FY 2013 Request
Drug Resources by Function			
Interdiction	\$0.408	\$0.408	\$0.408
Investigations	4.080	4.080	4.080
State and Local Assistance	0.612	0.612	0.612
Total Drug Resources by Function	\$5.100	\$5.100	\$5.100
Drug Resources by Decision Unit			
Resources Protection & Law Enforcement	\$5.100	\$5.100	\$5.100
Total Drug Resources by Function	\$5.100	\$5.100	\$5.100

Drug Resources Personnel Summary			
Total FTEs (direct only)	20	20	20
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$1.125	\$1.128	\$1.127
Drug Resources Percentage	0.44%	0.45%	0.45%

Program Summary

MISSION

The overall mission of the Bureau of Land Management (BLM) is to sustain the health, diversity, and productivity of the public lands for the use and enjoyment of present and future generations. The Resource Protection and Law Enforcement Program works to identify, investigate, disrupt, and dismantle marijuana cultivation/smuggling activities on public lands, eradicate marijuana cultivation sites, and increase clean up and restoration capacity on public lands affected by marijuana cultivation.

METHODOLOGY

Since FY 2010, the Bureau of Land Management's annual appropriation in the

Resource Protection and Law Enforcement sub-activity includes \$5.1 million for drug enforcement efforts, which primarily focus on identifying, investigating, and eradicating marijuana cultivation on Public Lands and rehabilitating cultivation sites.

BUDGET SUMMARY

In FY 2013, the total drug control request for the BLM is \$5.1 million, which is unchanged from the FY 2012 enacted level. Due to large scale marijuana cultivation activities, funds are directed primarily to BLM-managed public lands in California and Oregon. Funds are also directed to Idaho, Nevada, and Utah due to increased large scale marijuana cultivation activities linked

to drug trafficking organizations (DTOs) in California and Oregon, and to Arizona and New Mexico in efforts to reduce the impact to public safety and resources resulting from illegal smuggling activity.

BLM Resource Protection and Law Enforcement Program - is based on agency GPRA documents and other agency-maintained data. The FY 2011 performance information for this program is provided below.

Resources Protection and Law Enforcement

**Total FY 2012 Request: \$5.1 million
(Reflects no change from FY 2010)**

The Resource Protection and Law Enforcement Program disrupts marijuana cultivation/smuggling through the application of the following tactical strategies:

- Adjustments to operation plans and investigative strategies as the season develops based on continuing collection, sharing, and analysis of intelligence
- Uniformed patrol to deter and detect cultivation activities
- Delayed eradication in targeted areas to minimize compromising investigations
- Investigative focus on areas more likely to yield arrests of DTO leadership
- Working cooperatively with a variety of Federal, state, and local partners on multi-agency investigations and operations
- Cleaning up and rehabilitating cultivation sites to deter reuse of the area

FY 2013 Total Changes (no change):
BLM will support public land management at the same level as in FY 2012.

PERFORMANCE

This section on the FY 2011 performance related to the drug control mission of the

Bureau of Land Management		
Selected Measure of Performance	FY 2011 Target	FY 2011 Achieved
» Number of marijuana plants seized	No Target Set	436,455

Discussion

Several factors affected the reduction in the number of marijuana plants seized on public lands in FY 2011 (436,455) compared to FY 2010 (900,997). Increased staffing, resulting in greater deterrence, probably contributed to this 60 percent reduction. Also, the unusually cool weather seen during late spring, which is not ideal for marijuana cultivation, could have contributed to reduced activity on the part of growers. Finally, in states with medical marijuana laws, illegal diversion of indoor grows to non-medical uses may have also reduced the demand for marijuana grown on public lands.

includes active participation in Federal, state, and local task forces including HIDTAs in California and Oregon, DEA-led Organized Crime Drug Enforcement Task Forces, National Guard Counter Drug Support, and a number of state and local task forces. BLM is an active participant on county-level interagency teams focused on marijuana investigations, particularly in California and Oregon. In some cases, BLM is the lead agency on operational planning for multi-agency investigations/operations.

BLM Special Agents and Rangers are actively involved in the monitoring and surveillance of public lands to gain intelligence about possible marijuana cultivation activities. Rangers conduct high-profile patrols of known cultivation areas to detect illegal grow operations already underway and in some cases, to deter cultivation activities. Special Agents employ covert techniques including cameras and visual surveillance to detect and assess early-season activities. Through participation in a number of marijuana-focused interagency task forces and working teams varies, intelligence is consistently and actively shared and analyzed between Federal, state, and local partners.

Interagency cooperation to pool scarce resources is widely used by BLM in marijuana investigation activities. This

DEPARTMENT OF THE INTERIOR

National Park Service

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Interdiction	\$0.660	\$0.660	\$0.660
Investigations	2.640	2.640	2.640
Total Drug Resources by Function	\$3.300	\$3.300	\$3.300
Drug Resources by Decision Unit			
National Park Protection subactivity	\$3.300	\$3.300	\$3.300
Total Drug Resources by Function	\$3.300	\$3.300	\$3.300
Drug Resources Personnel Summary			
Total FTEs (direct only)	25	25	25
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$2.611	\$2.580	\$2.579
Drug Resources Percentage	0.12%	0.12%	0.13%

Program Summary

MISSION

The National Park Service (NPS) works to preserve the resources and values of the national park system for the enjoyment, education, and inspiration of this and future generations. The NPS is required to enforce all Federal laws and regulations within all park units, allowing the public the opportunity to enjoy the national park units in a safe manner, providing employees a safe place of employment, and keeping resources unimpaired for future generations.

METHODOLOGY

The National Park Service does not have a specific appropriation for drug control. NPS's cost management system verifies the

location and actual use of this earmarked funding. The NPS utilizes this data, combined with annual financial/spending plans, to account for this funding.

BUDGET SUMMARY

In FY 2013, the total drug control request for the NPS is \$3.3 million, which is unchanged from the FY 2012 enacted level. The National Park Service supports the *National Drug Control Strategy* through its investigative and marijuana eradication efforts to reduce drug production and availability.

National Park Protection Subactivity

Total FY 2013 Request: \$3.3 million
(Reflects no change from FY 2012)

Many national parks are located along international borders that are plagued with problems such as drug trafficking, illegal immigration, and possible terrorist movement that can threaten park lands and visitors. Through the utilization of law enforcement park rangers, special agents and other Federal, state, and local law enforcement authorities and organizations, the NPS works diligently to provide security and protection of park resources and visitor safety on park lands. Ongoing efforts at these parks include:

- Ranger patrols and surveillance of roads, trails, and backcountry areas
- Short and long-term counter-smuggling and drug cultivation investigations and operations
- Barricade construction to prevent illegal vehicle traffic
- Cooperation and coordination with the Department of Homeland Security's Customs and Border Protection and other Federal, state, and local agencies involved with border security

The NPS efforts include the development of the Pacific West Region Marijuana Framework and Goals Plan to combat marijuana cultivation, as well as addressing site rehabilitation and reclamation. The Plan outlines a comprehensive and integrated approach involving long-term investigations, prevention, detection, eradication, interdiction, and other actions to dismantle drug trafficking organizations

(DTOs). The DTOs have demonstrated the capability to adapt their operations, and NPS will thus expand the Plan as cannabis cultivation activities move into regions such as the Rocky Mountains and eastern United States.

FY 2013 Changes (no change): NPS will support the national park system at the same level as in FY 2012.

PERFORMANCE

This section on the FY 2011 performance of the drug control mission of NPS – the Visitor and Resource Program - is based on agency GPRA documents and other agency information. The FY 2011 performance information for this program is provided below.

NPS Visitor and Resource Protection Program		
Selected Measure of Performance	FY 2011 Target	FY 2011 Achieved
» Number of marijuana plants seized	No Target Set	14,228

Discussion

In 2011, NPS saw a shift away from growing marijuana on NPS lands. This is primarily the result of the increased staffing and interdiction pressure applied since 2009. Seizures of marijuana plants within park boundaries are down by over 80 percent from the 2010 level of 87,968 plants. In addition, cool temperatures during the late spring of 2011 may have contributed to a reduction in activity as growers adapted to the unusual conditions.

The NPS concentrated its efforts on parks in the Pacific West Region in 2011, operating under its Pacific West Region Marijuana Framework and Goals Plan for combating marijuana cultivation. All parks in the region show fewer plants being cultivated, reflecting success at early interdiction and detection. For example, Sequoia and Kings Canyon National Park has built an effective marijuana interdiction program, resulting in the lowest number of seizures (1,302 plants) in the past 10 years. Similarly, at Yosemite National Park, for the first time since 2005, park law enforcement personnel detected no grow sites in the park.

In 2011, with fewer cultivation sites within parks, NPS law enforcement personnel were able to perform targeted eradication operations with partners on adjacent lands. In most cases, the only access to these sites was through NPS areas and ecological impacts from the sites extended to park

watersheds and ecological systems. As an example, at Whiskeytown, Santa Monica Mountains and Golden Gate National Recreation Areas and Point Reyes National Seashore, NPS law enforcement personnel have forged successful partnerships with adjoining agencies and now are attacking the problem in large areas around the parks. This enhanced perimeter increases protection of the park lands and visitors within the legislated boundaries.

In addition to deterring cultivation activities, road interdiction activities are also resulting in significant seizures of illegal drugs, firearms, and other contraband and are deterring other illegal activities including wildlife poaching, vandalism, and resource theft.

DEPARTMENT OF JUSTICE



DEPARTMENT OF JUSTICE

Assets Forfeiture Fund

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Investigations	\$159.140	\$155.760	\$163.550
State and Local Assistance	55.522	69.000	72.450
Total Drug Resources by Function	\$214.662	\$224.760	\$236.000
Drug Resources by Decision Unit			
Asset Forfeiture	\$214.662	\$224.760	\$236.000
Total Drug Resources by Function	\$214.662	\$224.760	\$236.000
Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$1.625	\$3.727	\$1.408
Drug Resources Percentage	13.2%	6.0%	16.8%

Program Summary

MISSION

The mission of the Assets Forfeiture Fund (AFF) is to enforce Federal laws, and to prevent and reduce crime by disrupting and dismantling criminal organizations through the use of civil and criminal forfeiture. Public Law 102-393, referred to as the *1993 Treasury Appropriations Act*, amended Title 28 U.S.C. 524(c), enacted new authority for the Fund to pay for "overtime, travel, fuel, training, equipment, and other similar costs of state or local law enforcement officers that are incurred in a joint law enforcement operation with a Federal law enforcement agency participating in the Fund." Such cooperative efforts have significant potential to benefit Federal, state, and local law enforcement efforts.

METHODOLOGY

The AFF's state and local assistance is allocated through the Joint Law Enforcement (JLEO) Program Operations Expense. All AFF drug-related investigative funding for the Drug Enforcement Administration (DEA) and the Interagency Crime and Drug Enforcement (OCDETF) are allocated in the following Program Operations Expenses: Investigative Cost Leading to Seizure, Awards Based on Forfeiture, Contract to Identify Assets, Special Contract Services, and Case Related Expenses.

BUDGET SUMMARY

The FY 2013 budget request for the Asset Forfeiture Funds (AFF) is \$236.0 million, an

increase of \$11.2 million over the FY 2012 enacted level.

continue to support the drug-related investigative activities of the DEA and OCDETF.

Asset Forfeiture

Total FY 2013 Request: \$236.0 million (Reflects \$11.2 million increase over FY 2012 enacted level)

Asset Forfeiture Funds are allocated to DEA and OCDETF to carry out their drug-related activities. The request for DEA and OCDETF investigative activities is \$163.6 million, an increase of \$7.8 million over the FY 2012 enacted level. Additionally, DEA and OCDETF state and local assistance funding is approximately \$72.5 million, an increase of \$3.5 million over the FY 2012 enacted level.

FY 2013 Changes (+\$11.2 million): The Asset Forfeiture Funds request will

PERFORMANCE

This section on the FY 2011 performance of the drug control mission of the AFF within the Department of Justice is based on data from the Attorney General’s Management Initiatives – To improve Department-wide Financial Performance and the President’s Management Agenda Initiative to Improve Financial Performance. A component of the AFF’s mission is to provide support to the Drug Enforcement Administration and the Organized Crime Drug Enforcement Task Force.

Assets Forfeiture Fund		
Selected Measure of Performance	FY 2011 Target	FY 2011 Achieved
» Achieve effective funds control as corroborated by an unqualified opinion on the AFF financial statements	100%	100%

Discussion

The challenges that have an impact on achievement of the AFF goal are complex and dynamic. These challenges are both external and internal and include changes in legislation, technology, and the cooperation of all participating organizations.

Internally, the AFF is working with the participating agencies to enhance financial and property management capabilities. These efforts include coordination with AFF participating agencies on:

- Preemptive identification, mitigation, and resolution of potential audit issues
- Continuation of data integrity and confidence efforts within collection systems

- Enabling portfolio management through advanced ah-hoc reporting capabilities

The AFF is also coordinating, and implementing new systems business rules to accommodate emerging and evolving departmental and Congressional directives, such as proposed new directives to publish public notices on an internet site.

DEPARTMENT OF JUSTICE

Bureau of Prisons

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Corrections	\$3,194.326	\$3,303.408	\$3,407.957
Treatment	93.321	93.508	109.313
Total Drug Resources by Function	\$3,287.647	\$3,396.916	\$3,517.270
Drug Resources by Decision Unit			
Contract Confinement	\$506.360	\$528.428	\$550.906
Inmate Care and Programs	1,211.354	1,276.012	1,340.286
Institution Security and Administration	1,414.101	1,463.187	1,510.325
Management and Administration	105.562	106.429	103.513
Modernization and Repair	37.400	34.018	37.341
New Construction ¹	12.870	(11.158)	(25.101)
Total Drug Resources by Function	\$3,287.647	\$3,396.916	\$3,517.270

Drug Resources Personnel Summary			
Total FTEs (direct only)	18,172	18,594	18,835
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$6.4	\$6.6	\$6.8
Drug Resources Percentage	51.5%	51.5%	51.4%

¹The Bureau of Prisons is proposing a rescission of its new construction funding totaling \$75 million, of which \$25.1 million is scored as drug-related.

Program Summary

MISSION

The mission of the Bureau of Prisons (BOP) is to protect society by confining offenders in the controlled environments of prisons and community-based facilities that are safe, humane, cost-efficient, appropriately secure, and that provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens.

The BOP's mission statement has two parts: the first addresses the obligation to help

protect public safety through the secure and safe confinement of inmates; the second addresses the obligation to help inmates prepare to return to their communities and remain crime free. Preparing inmates for eventual release to the community has been one of BOP's key objectives. The BOP's drug treatment program facilitates the reintegration of inmates into society, consistent with community expectations and standards. Treatment Programs assist inmates in

identifying, confronting, and altering the attitudes, values, and thinking patterns that led to criminal behavior and drug use.

METHODOLOGY

The costs for incarcerating drug-related offenders, and the costs of drug treatment programs are scored as drug-control. Drug Treatment efforts are funded through a distinct program. Corrections costs are based on the percentage of inmates currently incarcerated or projected to be incarcerated for drug convictions.

BUDGET SUMMARY

The FY 2013 drug-related request includes resources of \$3,517.3 million, an increase of \$120.4 million over the FY 2012 enacted level.

Corrections Activities

**Total FY 2013 Request: \$3,407.9 million
(Reflects \$104.5 million increase over FY 2012 enacted level)**

At the end of FY 2011, there were nearly 218,000 inmates for whom BOP provided custodial care. The majority of Federal inmates are in BOP facilities, but others are housed in privately operated facilities, Residential Reentry Centers (halfway houses), and bed space secured through Intergovernmental Agreements with state and local entities.

Salaries and Expenses (S&E) covers the necessary expenditures for the administration, operation, and maintenance of Federal penal and correctional institutions and contract care. The S&E has four decision units:

Inmate Care and Programs

Inmate Care and Programs covers the costs of food, medical supplies, clothing, welfare

services, release clothing, transportation, gratuities, staff salaries, and operational costs of functions directly related to providing inmate care.

Institution Security and Administration
Institution Security and Administration covers costs associated with maintenance of facilities and institution security, which also includes motor pool operations, powerhouse operations, and other administrative functions.

Contract Confinement

Contract Confinement provides for the confinement of sentenced Federal offenders in a government-owned, contractor-operated facility, state, local, and private contract facilities and contract community residential centers.

Management and Administration

Management and Administration covers costs associated with general administration and oversight functions, and provides funding for the central office, six regional offices, and staff training centers.

Buildings and Facilities (B&F) includes new construction as well as modernization and repair costs. The B&F has two decision units:

New Construction

New Construction includes the costs associated with land and building acquisition, new prison construction, and leasing the Oklahoma Airport Trust Facility, which serves as a Bureau-wide transfer and processing center.

Modernization and Repair

Modernization and Repair includes costs associated with rehabilitation,

modernization, and repair of existing Bureau-owned buildings and other structures in order to meet legal requirements and accommodate correctional programs.

FY 2013 Changes (+\$104.5 million):

Program initiatives include enhancements to begin the activation process for two institutions (United States Penitentiary at Yazoo City, Mississippi, and the Federal Correctional Institution at Hazelton, West Virginia) and to acquire 1,000 private contract beds. The budget includes offsets for: a proposed legislative initiative that would allow additional Good Conduct Time for inmates; expanding the compassionate release program; information technology savings; and reorganization of administrative operations. Additionally, BOP is proposing a cancellation of its new construction funding totaling \$75 million, of which \$25.1 million is scored as drug-related.

Treatment Activities

Total FY 2013 Request: \$109.3 million
(Reflects \$15.8 million increase over FY 2012 enacted level)

The Violent Crime Control and Law Enforcement Act of 1994 requires the BOP (subject to the availability of funds) to provide residential substance abuse treatment to all eligible inmates. There is enormous demand for these services in part because of the potential for some non-violent offenders to earn a reduction in sentence following the successful completion of the program. The treatment strategy often begins with drug abuse education and can end with the strong community transition component. The

objective is to reduce the likelihood of inmates relapsing to drug use and criminal activity.

FY 2013 resources will support BOP's drug treatment programs. According to the BOP's Annual Report on Substance Abuse Programs for FY 2010, approximately 40 percent of new inmates entering BOP custody have been diagnosed with a drug use disorder. Accordingly, BOP continues to develop a strong and comprehensive drug abuse treatment strategy consisting of: screening and assessment, drug abuse education, prevention, intervention, non-residential drug abuse treatment services, residential drug abuse treatment programming, and community transitional drug abuse treatment.

Drug Program Screening and Assessment

Upon entering a BOP facility, an inmate's records are assessed to determine whether there is evidence in the pre-sentence investigation that alcohol or other drug use contributed to the commission of the offenses, the inmate received a judicial recommendation to participate in a drug treatment program, or the inmate violated his or her community supervision as a result of alcohol or other drug use. If an inmate's record reveals any of these elements, the inmate must participate in a Drug Abuse Education course available at every BOP institution. In addition, as part of the initial psychological screening, inmates are interviewed about their past drug use to determine their need for BOP drug abuse treatment options.

Drug Abuse Education

Participants in the Drug Abuse Education course receive factual information on the relationship between drug use and crime;

how alcohol and drug usage present consequences that are physical, social, and psychological; how choice is a factor in drug use; and its impact on one's health, family and community. Drug Abuse Education participants are also informed of program options available to them in the Bureau and are encouraged to volunteer for appropriate programs. In FY 2013, the BOP estimates that 30,000 inmates will participate in Drug Abuse Education programming.

Non-residential Drug Abuse Treatment

Non-residential treatment is designed to provide maximum flexibility to meet the needs of the offenders, particularly those individuals who have relatively minor or low-level substance abuse impairment. These offenders do not require the intensive level of treatment needed by individuals with moderate-to-severe addictive behavioral problems. Unlike residential programs, inmates are not housed together in a separate unit, but housed in and with the general inmate population. Non-residential drug abuse treatment participants receive cognitive behavior therapy based treatment protocols that focus on thinking errors that lead to drug use; including both cognitive and criminal thinking errors.

A second purpose of non-residential drug abuse treatment is to provide offenders who have a moderate-to-severe drug abuse problem with supportive program opportunities during the time waiting to enter the residential drug abuse treatment program, to support those who require follow-up treatment after completion of the Residential Drug Abuse Program, or to support those who have little time remaining on their sentence and are

preparing to return to the community. In FY 2013, the BOP estimates that it will provide Non-residential Drug Abuse Treatment to 16,000 inmates.

Residential Drug Abuse Treatment Program (RDAP)

RDAP provides intensive drug abuse treatment to inmates diagnosed with a drug use disorder. At present, 63 sites offer the RDAP – 62 at BOP institutions and one contract facility. The programs are staffed by a licensed psychologist (the Drug Program Coordinator) who supervises the treatment staff. The average ratio of drug abuse treatment staff to inmates is 1 to 24. Inmates in the residential program are housed in a treatment unit that is set apart from the general population. Treatment is provided for a minimum of 500 hours over a 9- to 12-month period.

The BOP's RDAP program adheres to a cognitive behavior therapy treatment model. This treatment model targets the major criminal drug-using risk factors, especially anti-social and pro-criminal attitudes, values, beliefs, and behaviors. Using evidence-based practices, the BOP targets these behaviors by reducing anti-social peer associations; promoting positive relationships; increasing self-control, self-management, and problem solving skills; and ending drug use. In FY 2013, the BOP estimates that 19,000 inmates will participate in the Residential Drug Abuse Treatment Program.

Community Transition Drug Abuse Treatment

Community transitional drug abuse treatment (TDAT) is the final component of the BOP's RDAP. In order to successfully complete all components of RDAP, the

inmate must be transferred to a Residential Reentry Center (RRC), also known as a Halfway House, or to Home Detention (HD). While residing in the RRC or HD, RDAP participants are involved in contract community-based drug treatment. This requirement keeps the inmate fully engaged in treatment while still in the custody of the Bureau. In addition, offenders who did not have an opportunity to participate in RDAP may be referred to TDAT by community corrections staff. In FY 2013, 17,000 inmates are projected to participate in this program.

FY 2013 Changes (+15.8 million): The FY 2013 request provides for expansion of BOP’s drug abuse treatment program capability, providing residential substance abuse treatment to all eligible inmates.

PERFORMANCE

This section on the FY 2011 performance of BOP’s program is based on agency performance documents, and other agency information. The table below includes selected performance measures, targets and achievements.

Bureau of Prisons		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Number of inmates participating in Residential Drug Abuse Treatment	18,500	18,527
» Number of inmates participating in Nonresidential Drug Abuse Treatment	15,000	15,211

Discussion

In response to the rapid growth of Federal inmates with a diagnosis of a drug use disorder (approximately 40 percent of inmates entering the Federal prisons), the BOP continues to develop evidence based treatment practices to manage and treat inmates with drug use disorders. The BOP’s strategy includes early identification, intervention, and treatment through psychology screening, drug education, nonresidential drug abuse treatment, intensive residential drug abuse treatment, and community transition treatment.

Currently, 62 BOP institutions operate a RDAP. In addition, one private facility under contract with the BOP also provides the RDAP program. In FY 2011, the BOP provided RDAP to 18,527 inmates, and

15,211 inmates participated in the Nonresidential Drug Treatment program.

In FY 2011, the BOP provided RDAP to 100 percent of the Federal inmate population that was eligible for treatment.

BOP will continue to coordinate mental health treatment and drug abuse treatment for offenders with co-occurring disorders. In addition, inmates with behavioral disorders, such as sex offenders, who also have co-occurring substance use disorders will continue to receive transitional community treatment, combining supervision with ongoing drug abuse treatment while residing in Residential Re-entry Centers.

BOP continues its policy on all Psychology Treatment Programs to follow “evidence-based” treatment practices. This policy is working to ensure all Bureau psychology programs are effective in positively changing inmate behavior.

The principal goal of treatment is to equip the inmates with the cognitive, emotional, self-regulation and behavioral skills necessary to choose and maintain a drug-free and crime-free lifestyle following release from prison.

The BOP evaluates major correctional programs that are designed to improve inmate reentry and thereby enhance public safety. The BOP conducted a rigorous 3-year outcome study of the residential drug abuse treatment program beginning in 1991. The results indicated that male participants are 16 percent less likely to recidivate and 15 percent less likely to relapse than similarly situated inmates who did not participate in RDAP. Female inmates are found to be 18 percent less likely to recidivate than inmates who did not participate in treatment. FY 2011 statistical analyses validate this earlier study and conclude that rates of recidivism for the inmates who graduated from the residential drug abuse treatment program are significantly lower than would be expected for similarly situated inmates who did not participate.

DEPARTMENT OF JUSTICE

Criminal Division

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prosecution	\$12.310	\$12.310	\$12.570
Total Drug Resources by Function	\$12.310	\$12.310	\$12.570
Drug Resources by Decision Unit			
Narcotic and Dangerous Drug Section	\$12.310	\$12.310	\$12.570
Total Drug Resources by Function	\$12.310	\$12.310	\$12.570
Drug Resources Personnel Summary			
Total FTEs (direct only)	55	55	55
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$0.174	\$0.174	\$0.185
Drug Resources Percentage	7.1%	7.1%	6.7%

Program Summary

MISSION

The Criminal Division (CRM) develops, enforces, and supervises the application of all Federal criminal laws except those specifically assigned to other divisions. The Division, along with the 94 United States Attorney's Offices (USAOs), is responsible for overseeing criminal matters under more than 900 statutes, as well as certain civil litigation. Criminal Division attorneys prosecute many nationally significant cases. In addition to its direct litigation responsibilities, the Division formulates and implements criminal enforcement policy and provides advice and assistance to law enforcement agencies and USAOs. In executing its mission, the Criminal Division dedicates specific resources in support of the *National Drug Control Strategy* that

focus on disrupting domestic drug trafficking and production and strengthening international partnerships.

METHODOLOGY

CRM's drug budget is the funding available for the Division's Narcotic and Dangerous Drug Section (NDDS). NDDS resources are 100 percent dedicated to addressing drug uses and its consequences.

BUDGET SUMMARY

The total drug control request for CRM for FY 2013 is \$12.5 million, which is an increase of \$0.2 million over the FY 2012 enacted level.

Narcotic and Dangerous Drug Section

Total FY 2013 Request: \$12.5 million (Reflects \$0.2 million increase over FY 2012 enacted level)

The CRM's NDDS will support reducing the supply of illegal drugs in the United States by investigating and prosecuting priority national and international drug trafficking and narcoterrorists groups and by providing sound legal, strategic, and policy guidance in support of that goal. NDDS provides expert guidance on counternarcotics matters in the interagency, intelligence and international communities. NDDS develops innovative law enforcement and prosecutorial strategies to counter the fast-paced efforts of organized international trafficking and narcoterrorists groups. In prosecuting the high level command and control elements of

sophisticated international criminal organizations and narcoterrorists (i.e., the kingpins and Consolidated Priority Organization Targets), NDDS uses the best intelligence available to identify those drug trafficking and narcoterrorist groups that pose the greatest threat, and then utilizes resources to investigate them anywhere in the world and to prosecute them.

FY 2013 Changes (+0.2 million): The increase reflects inflationary adjustments to base.

PERFORMANCE

This section on the FY 2011 performance of the drug control mission of the CRM within the Department of Justice is based on agency GPRA documents and other agency information. The FY 2011 performance information for the CRM drug-related activities are provided below.

Criminal Division		
Selected Measure of Performance	FY 2011 Target	FY 2011 Achieved
» Drug-Related Investigative Matters and Cases Closed (NDDS)	50	41

Discussion

In FY 2011, the Department of Justice's CRM had many successes in investigating and prosecuting narcotic cases. Of the 41 total number of drug-related investigative matters and cases closed in fiscal year 2011, the CRM NDDS concluded 13 successful prosecutions, either through trial or negotiated pleas, and brought 6 new indictments.

Included among these prosecutions was the conviction of Christian Fernando Borda and

Alvaro Alvaran-Velez, who shipped large quantities of cocaine from Colombia and Venezuela to Mexico for further distribution into the United States. After an 8-week jury trial, both defendants were found guilty of conspiring to import ton-quantities of cocaine into the United States.

In the first of two other significant cases, Josue Cuesta Leon, a Colombia and Venezuela-based trafficker, along with his subordinate Jose Fernando Romero,

entered guilty pleas to narco-terror charges stemming from their drug trafficking and weapons activity on behalf of the FARC and AUC. In the second case, Wilson Jesus Torres-Torres and Baudilio Vivero-Cardenas each pleaded guilty to conspiring to transport thousands of kilograms of cocaine from various ports along the coast of Colombia to waiting vessels that would transport the cocaine to the United States and other countries.

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$199.115	\$210.364	\$205.213
International	386.563	397.320	393.440
Investigations	1,712.584	1,731.594	1,781.350
Prevention	2.085	2.082	2.133
State and Local Assistance	5.600	5.640	5.731
Total Drug Resources by Function¹	\$2,305.947	\$2,347.000	\$2,387.867
Drug Resources by Decision Unit			
Diversion Control Fee Account	\$290.304	\$322.000	\$352,563
Salaries and Expenses	2,015.643	2,025.000	2,050.904
<i>Domestic Enforcement</i>	<i>[1,603.649]</i>	<i>[1,601.658]</i>	<i>[1,637,179]</i>
<i>International Enforcement</i>	<i>[406.394]</i>	<i>[417.702]</i>	<i>[407,994]</i>
<i>State and Local Assistance</i>	<i>[5.600]</i>	<i>[5.640]</i>	<i>[5.731]</i>
Cancellation of Expired Balances	<i>[0.0]</i>	<i>[0.0]</i>	<i>-15,600</i>
Total Drug Resources by Function¹	\$2,305.947	\$2,347.000	\$2,387.867

Drug Resources Personnel Summary			
Total FTEs (direct only)	9,597	9,651	9,606
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$2.3	\$2.4	\$2.4
Drug Resources Percentage	100.0%	100.0%	100.0%

Program Summary

MISSION

The Drug Enforcement Administration's (DEA) mission is to enforce the controlled substances laws and regulations of the United States and bring to those organizations and principal members of organizations involved in the growing, manufacturing, or distribution of controlled substances appearing in or destined for illicit traffic in the United States,; and to

recommend and support non-enforcement programs aimed at reducing the availability of illicit controlled substances on the domestic and international markets.

METHODOLOGY

All DEA resources are a scored as a part of the National Drug Control Budget.

BUDGET SUMMARY

The FY 2013 budget requests \$2,403.5 million for DEA's Salaries and Expenses (S&E) Account and Diversion Control Fee Account (DCFA), which is an increase of \$46.5 million over the FY 2012 enacted level. The FY 2013 President's Budget includes a cancellation of \$15.6 million in DEA's prior year unobligated expired balances for DEA's S&E Account.

Salaries & Expenses (S&E)

Total FY 2013 Request: \$2,050.9 million (Reflects \$25.9 million increase from FY 2012 enacted level)

DEA's resources are divided into three strategic focus areas to achieve the maximum impact against the full spectrum of drug trafficking activities. These focus areas are: *Domestic Enforcement, International Enforcement, and State and Local Assistance.*

Domestic Enforcement

Total FY 2013 Request: \$1,637.2 million (Reflects \$35.5 million increase over FY 2012 enacted level)

The Domestic Enforcement Decision Unit comprises the majority of DEA's investigative and support resources. These resources, in conjunction with DEA's foreign offices, create a seamless intelligence and investigative web to pursue drug trafficking organizations from multi-national and poly-drug conglomerates to independent specialty one-function cells.

DEA continues an aggressive and balanced domestic enforcement program with a multi-jurisdictional approach designed to focus Federal resources on the disruption or dismantlement of drug trafficking organizations that control the illegal drug trade and the seizure of the proceeds and

assets involved in the illegal drug trade. Similar to legitimate businesses, drug trafficking organizations have corporate leaders, employees, chemical suppliers, transporters, financial service providers, communication needs, infrastructure, and assets. The drug trafficking business is therefore subject to market forces.

DEA's *Drug Flow Attack Strategy* focuses on finding and exploiting strategic vulnerabilities in the drug market. DEA's strategy relies heavily on intelligence and investigative capabilities to identify significant domestic drug trafficking organizations and drug facilitators, collect and maintain in-depth information concerning their leadership and operations, and establish priorities and develop targets. This strategy emphasizes the disruption or complete dismantlement of the organizations targeted by DEA domestic field divisions.

FY 2013 Changes (+\$35.5 million): The FY 2013 request includes a total of \$23.7 million in proposed DOJ transfers and program realignments. Specifically included in these transfers is \$8.0 million and 57 positions that will be transferred from the National Drug Intelligence Center (NDIC) to DEA. As directed by the conference report (H. Report 112-284) accompanying the Consolidated and Further Continuing Appropriations Act, 2012 (P.L. 112-55), the Department of Justice anticipates closing NDIC and reassigning necessary functions to DEA in FY 2012. The funding requested in FY 2013 will allow DEA to continue document and media exploitation functions and the production of high-priority Strategic Intelligence products. The FY 2013

request also includes \$25.9 million in base adjustments for the 2013 pay raise, an additional compensable day, employee benefits, facilities, and the operation and the operation and maintenance of radios. For FY 2013, a total of \$14.1 million and 164 FTE are proposed in offsets, to include general administrative efficiencies and program reductions and eliminations. The 164 FTE reductions are associated with permanently eliminating vacant positions that have never been filled (hollow FTE).

International Enforcement

Total FY 2013 Request: \$408.0 million
(Reflects \$9.7 million decrease from FY 2012 enacted level)

The focus of DEA's International Enforcement program is the disruption or dismantlement of drug trafficking organizations identified as the most significant international drug and precursor chemical trafficking organizations, also known as Priority Targets (PTOs). Specifically, DEA Special Agents and Intelligence Analysts assigned to DEA's foreign country offices focus their investigative efforts on PTOs with a direct connection to DOJ's Consolidated Priority Organization Targets (CPOTs), which include the most significant international command and control organizations threatening the United States as identified the Organized Crime Drug Enforcement Task Force (OCDETF).

As the U.S. government's single point of contact for coordinating drug investigations in foreign countries, DEA provides interagency leadership in the effort to disrupt or dismantle drug trafficking organizations. Currently, DEA has 85 offices

in 65 countries; under the policy guidance of the Department of State and U.S. Ambassadors, DEA coordinates all programs involving drug law enforcement in foreign countries. DEA also provides intelligence to assist the interagency community in determining future trends in drug trafficking and evaluating these trends to determine their long-term impact on drug trafficking. DEA works closely with the United Nations, Interpol, and other organizations on matters relating to international drug and chemical control programs.

FY 2013 Changes (-\$9.7 million): The FY 2013 request includes \$9.7 million in offsets related to base adjustments, general administrative efficiencies and program reductions and eliminations.

State & Local Assistance

Total FY 2013 Request: \$5.7 million
(Reflects \$0.1 million increase over FY 2012 enacted level)

DEA has the responsibility to respond to clandestine laboratory training requirements, hazardous waste cleanup, and cannabis eradication/suppression needs of the U.S. law enforcement community. DEA supports state and local law enforcement with methamphetamine-related assistance and training, which allows state and local agencies to better address the methamphetamine threat in their communities and reduce the impact that methamphetamine has on the quality of life for American citizens. By providing training in the techniques of clandestine laboratory drug enforcement, hazardous waste cleanup, and cannabis eradication/suppression, DEA is able to expand drug enforcement across the United States in a very cost-effective manner.

While these programs are administered by DEA, operational costs for the programs are funded by DOJ's Community Oriented Policing Services (COPS) account and the domestic cannabis eradication/suppression program is funded by DOJ's Asset Forfeiture Fund.

FY 2013 Changes (+\$0.1 million): The FY 2013 request includes base adjustments.

Diversion Control

Total FY 2013 Request: \$352.6 million
(Reflects \$30.6 million increase over FY 2012 enacted level)

The Diversion Control Program (DCP) is responsible for enforcing the Controlled Substances Act (CSA) and its regulations pertaining to pharmaceutical controlled substances and listed chemicals. The DCP actively monitors more than 1.5 million individuals and companies that are registered with DEA to handle controlled

substances or listed chemicals through a system of scheduling, quotas, recordkeeping, reporting, and security requirements.

FY 2013 Changes (+\$30.6 million): The FY 2013 request includes base adjustments and \$8.0 million for additional staff positions and \$6.2 million for more state and local Task Force Officers, and administrative contractors for Officers on Tactical Diversion Squads.

PERFORMANCE

This section on the FY 2011 performance of the DEA program is based on agency GPRA documents and other agency information. The table below includes selected performance measures, targets and achievements for the latest year for which data are available.

Drug Enforcement Administration		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Number of active International, Domestic, and Diversion Priority Targets linked to CPOT targets disrupted* or dismantled	460	540
Number of active International, Domestic, and Diversion Priority Targets not linked to CPOT targets disrupted* or dismantled	2,400	2,490
Monetary Value of Currency, Property and Drugs Seized (Drug Trafficker Revenue Denied)	\$3 Billion	\$2.89 Billion

* Includes disruptions pending dismantlement

Discussion

The DEA is committed to enforcing the controlled substances laws and regulations of the United States and bringing to the criminal and civil justice system of the U.S., or any other competent jurisdiction, those organizations and principal members of organizations involved in the growing, manufacturing, or distribution of controlled

substances appearing in or destined for illicit traffic in the U.S., including organizations that use drug trafficking proceeds to finance terror; and to recommending and supporting enforcement-related programs aimed at reducing the availability of and demand for illicit controlled substances on the domestic

and international markets. To accomplish its mission, the DEA targets PTOs, which represent the major drug supply and money laundering organizations operating at the international, national, regional, and local levels that have a significant impact upon drug availability in the United States. Specifically, the Priority Targeting Program focuses on dismantling entire drug trafficking networks by targeting their leaders for arrest and prosecution, confiscating the profits that fund continuing drug operations, and eliminating international sources of supply.

As of September 30, 2011, the DEA disrupted or dismantled 3,030 PTOs, which is 5.9 percent above the FY 2011 target of 2,860. This also represents a 12.9 percent increase over FY 2010 actual performance of 2,683 PTOs disrupted or dismantled.

DEA also contributes to disrupting or dismantling PTOs linked to the Attorney General's FY 2011 CPOT list – the “Most Wanted” drug trafficking and money laundering organizations believed to be primarily responsible for the Nation's illicit drug supply. During FY 2011, DEA disrupted or dismantled 540 PTOs linked to CPOT targets.

A vital component of DEA's overall strategy is its Financial Attack Strategy. Under this Strategy, DEA attacks the financial infrastructure of major drug trafficking organizations and members of the financial community who facilitate the laundering of their proceeds. During FY 2011, DEA maintained 21 money laundering investigative groups to support this Financial Attack Strategy. The 2010 National Drug Threat Assessment stated that Mexican drug trafficking organizations

smuggled bulk cash drug proceeds totaling tens of billions of dollars from the U.S. through the Southwest border and into Mexico during 2009. To address this problem, DEA has implemented several initiatives focused on targeting the bulk cash derived from drug proceeds. During FY 2011, DEA's total cash seizures were \$772.7 million. Further, DEA denied total revenue of nearly \$2.9 billion from drug trafficking and money laundering organizations through asset and drug seizures in FY 2011.

Another vital component of DEA's overall strategy is its Drug Flow Attack Strategy, which is designed to significantly disrupt the flow of drugs, money, and chemicals between the source zones and the United States by attacking vulnerabilities in the supply, transportation systems, and financial infrastructure of major drug trafficking organizations. This strategy calls for aggressive, well-planned and coordinated enforcement operations in cooperation with host-nation counterparts in global source and transit zones.

Specifically, Operation All-Inclusive, the centerpiece of DEA's Drug Flow Attack Strategy, has caused major disruptions in the flow of drugs, money, and chemicals between source zones and the U.S. by attacking trafficker vulnerabilities in the areas of financial, maritime, land, and air smuggling. From January 2011 through September 2011, DEA conducted the seventh international initiative under Operation All-Inclusive. As of October 13, 2011, this initiative has resulted in the seizure of 91.5 metric tons of cocaine, 503 kilograms of heroin, 530 metric tons of marijuana, 271 metric tons of solid precursors, \$107 million, and 2,771

weapons. Additionally, 1,452 arrests have occurred.

Through a combination of DEA-led operations such as the Drug Flow Attack Strategy, international partnerships with Mexico and Colombia, the Financial Attack Strategy, and foreign and domestic enforcement operations, DEA has significantly weakened a host of major drug trafficking organizations. One indicator of the overall effectiveness of these efforts is the price and purity of drugs. Using DEA's System to Retrieve Information on Drug Evidence (STRIDE) data to analyze all domestic cocaine purchases is useful to show illicit trend information. From January 2007 through March 2011, the price per pure gram of cocaine increased 87.2 percent, from \$101.10 to \$189.24, while the purity decreased 27 percent, from 67 percent to 49 percent. The results for heroin price and purity are also positive. From October 2007 through March 2011, the price per pure gram of heroin increased 61.1 percent, from \$559.33 to \$901.14, while the purity decreased 35 percent, from 41 percent to 26 percent.

The Diversion Control Program (DCP) implements an infrastructure of controls established through the Controlled Substances Act and ancillary regulations. This system balances the protection of public health and safety by preventing the diversion of controlled substances and listed chemicals while ensuring an adequate and uninterrupted supply for legitimate needs. The DCP conducts and facilitates domestic and international investigations; plans and allocates program resources; promulgates regulations; and conducts

liaison with industry as well as Federal, state, and local counterparts. In FY 2011, DEA launched an innovative campaign to address the increased abuse and theft of controlled prescription drugs, through coordinated nationwide prescription drug "Take-Back" days and the expansion of Tactical Diversion Squads.

DEPARTMENT OF JUSTICE

National Drug Intelligence Center

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$33.955	\$20.000	\$0.000
Total Drug Resources by Function	\$33.955	\$20.000	\$0.000
Drug Resources by Decision Unit			
Salaries and Expenses	\$33.955	\$20.000	\$0.000
Total Drug Resources by Function	\$33.955	\$20.000	\$0.000
Drug Resources Personnel Summary			
Total FTEs (direct only)	171	154	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$0.03	\$0.02	\$0.00
Drug Resources Percentage	100.0%	100.0%	0%

Program Summary

MISSION

The National Drug Intelligence Center's (NDIC) mission was to provide strategic, domestic drug-related intelligence support to the drug control, public health, law enforcement, and intelligence communities of the United States.

PERFORMANCE

This section on the FY 2011 performance of NDIC is based on agency GPRA documents and other agency data. The table below includes performance measures, targets, and achievements for the latest year for which data are available.

METHODOLOGY

All NDIC resources were scored as a part of the National Drug Control Budget.

BUDGET SUMMARY

The Administration proposes to eliminate funding for the lower-priority NDIC. The Administration intends to realign some of those NDIC activities within the Department of Justice's (DOJ's) Drug Enforcement Administration (DEA).

National Drug Intelligence Center		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
Expand NDIC's production of strategic intelligence products on topics such as the Southwest Border, gangs and violence, and other emerging drug related issues, along with producing nine Organized Crime Drug Enforcement Task Force Regional Drug Threat Assessments.	30	17*
Produce the National Drug Threat Assessment, High Intensity Drug Trafficking Areas Drug Market Analyses and other strategic domestic drug intelligence reports, as requested by the Department of Justice, Office of National Drug Control Policy and others.	46	47
Percentage of Document and Media Exploitation (DOMEX) missions that support the Department of Justice's strategic goals and objectives.	90%	100%
Percentage of users that would request DOMEX support in the future and refer DOMEX to others.	90%	100%

*The nine OCDETF Regional Drug Threat Assessments and several other strategic intelligence products scheduled to be published in the 4th Quarter were delayed.

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DEPARTMENT OF JUSTICE

Office of Justice Programs

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prevention	\$20.709	\$5.000	\$32.550
State and Local Assistance	92.155	71.500	99.050
Treatment	113.482	85.500	113.000
Total Drug Resources by Function	\$226.346	\$162.000	\$244.600
Drug Resources by Decision Unit			
Border Prosecutor Initiatives	\$0.000	\$10.000	\$0.000
Byrne Criminal Justice Innovation Program	5.000	15.000	20.000
Drug Courts	37.275	35.000	0.000
Enforcing Underage Drinking Laws	20.709	5.000	0.000
Mentally Ill Offender Act Program	9.940	9.000	0.000
Meth Enforcement and Cleanup	8.283	12.500	12.500
Northern Border Prosecution	2.485	0.000	0.000
OJP Consolidated Tribal Grant	0.000	0.000	65.100
Prescription Drug Monitoring Program	5.798	7.000	7.000
Problem Solving Justice	0.000	0.000	52.000
Regional Information Sharing System	44.910	27.000	27.000
Residential Substance Abuse Treatment	24.850	10.000	21.000
Second Chance Act	41.417	31.500	40.000
Southwest Border Prosecution	25.679	0.000	0.000
Total Drug Resources by Function	\$226.346	\$162.000	\$244.600
Drug Resources Personnel Summary			
Total FTEs (direct only)	67	67	67
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$1.8	\$1.6	\$1.2
Drug Resources Percentage	12.7%	10.4%	20.7%

Program Summary

MISSION

The Justice Assistance Act of 1984 established the Office of Justice Programs (OJP), whose mission is to provide Federal

leadership in developing the Nation's capacity to prevent and control crime, administer justice, and assist crime victims. As such, OJP resources are primarily

targeted to providing assistance to state, local, and tribal governments.

METHODOLOGY

OJP scores as drug control the dedicated specific resources in support of the *National Drug Control Strategy* that focus on breaking the cycle of drug abuse and crime, including drug testing and treatment, provision of graduated sanctions, drug prevention and education, and research and statistics.

BUDGET SUMMARY

The total drug control request for OJP in FY 2013 is \$244.6 million, an increase of \$82.6 million above the FY 2012 enacted level of \$162.0 million.

Border Prosecutor Initiative

Total FY 2013 Request: \$0.0 million
(Reflects \$10.0 million decrease from FY 2012 enacted level)

This program provides funding for local prosecutor offices in the Northern border, and the four Southwest border States of California, New Mexico, Arizona, and Texas for the costs of processing, detaining, and prosecuting drug and other cases referred from Federal arrests or Federal investigations.

FY 2013 Changes (-\$10.0 million): The Budget proposes to eliminate funding for the Border Prosecutor Initiative. As funding levels for some OJP programs decline, it is essential that OJP continue to support robust research and evaluation programs, encourage the continued development of evidence-based programs, and maintain funding for programs vital to our state, local, and tribal partners in the criminal justice system.

Byrne Criminal Justice Innovation Program

Total FY 2013 Request: \$20.0 million
(Reflects \$5.0 million increase over FY 2012 enacted level)

Recent research findings in areas such as community violence prevention and community policing have demonstrated that law enforcement or crime prevention efforts tailored to address particular problems in a defined area often achieve much better results than more general efforts targeting broader areas. Designed as a true interagency approach and integrated into the Administration's Neighborhood Revitalization Initiative, the Byrne Criminal Justice Innovation Program promotes organizational and resource efficiency among its Federal partners while achieving results, including improved community-police cooperation, enhanced intergovernmental communications and coordination, and reductions in serious and violent crime in targeted neighborhoods.

FY 2013 Changes (+\$5.0 million): The Budget proposes an increase of \$5.0 million to support this program. This request for increased funding will ensure that the Byrne Criminal Justice Innovation program has the resources needed to make a real difference in the nation's communities.

Drug Court Program

Total FY 2013 Request: \$0.0 million
Consolidated into the \$52.0 million Problem Solving Justice initiative)

The Drug Court program provides grants and technical assistance to state, local, and tribal governments to support the development, expansion, and enhancement of drug courts. This program also supports evaluations of the effectiveness of drug courts and drug courts strategies, including ongoing efforts to examine how drug courts

are different today, how courts have evolved from the original model and current barriers to compliance with the 10 key components of the drug court model.

FY 2013 Changes (Consolidated into Problem Solving Justice): The Budget proposes to consolidate funding for the Drug Court Program into the new Problem Solving Justice Program, which will assist state, local, and tribal governments in developing and implementing problem solving court strategies to address their jurisdiction's unique needs, including substance abuse and mental health issues. The Problem Solving Justice program will continue to provide grants to support drug courts.

Enforcing Underage Drinking Laws

Total FY 2013 Request: \$0.0 million
(Reflects \$5.0 million decrease from FY 2012 enacted level)

The Enforcing Underage Drinking Laws (EUDL) program supports and enhances efforts by states and local jurisdictions to prohibit the purchase and consumption of alcoholic beverages by minors. Minors are defined as individuals under 21 years of age.

FY 2013 Changes (-\$5.0 million): The Budget proposes a decrease of \$5.0 million. This initiative is supported through the Title V Local Delinquency Prevention Incentive Grants Program, for which OJP is requesting a total of \$40.0 million in FY 2013.

Mentally Ill Offender Act Program

Total FY 2013 Request: \$0.0 million
(Consolidated into the Problem Solving Justice initiative)

The Mentally Ill Offender Act Program provides grants and technical assistance to state, local, and tribal governments to support mental health courts and adult and juvenile collaboration grants programs in accordance with authorization language in both the Omnibus Crime Control and Safe Streets Act of 1968 and the Mentally Ill Offender Treatment and Crime Reduction Reauthorization and Improvement Act of 2008.

FY 2013 Changes (Consolidated into Problem Solving Justice): The Budget proposes to consolidate the Mentally Ill Offender Act Program into the new Problem Solving Justice Program, which will assist state, local, and tribal governments in developing and implementing problem solving court strategies to address their jurisdiction's unique needs, including substance abuse and mental health issues. The Problem Solving Justice program will continue to address the mentally ill offender issues formerly addressed through the Mentally Ill Offender Act Program.

Methamphetamine Enforcement and Lab Cleanup

Total FY 2013 Request: \$12.5 million
(Reflects no change from FY 2012 enacted level)

The Methamphetamine Enforcement and Lab Cleanup Grants provide assistance to state, local and tribal law enforcement agencies in support of programs designed to combat methamphetamine production and distribution, as well as target "hot spots" characterized by high levels of drug production or distribution. In cooperation

with the Drug Enforcement Administration, funding from this initiative also supports assistance to state and local law enforcement in removing and disposing of hazardous materials generated by clandestine methamphetamine labs, initiating container programs, and providing training, technical assistance and equipment to assist law enforcement agencies in managing hazardous waste. This program is administered by the Community Oriented Policing Services.

FY 2013 Changes (no change): The Budget proposes a continuation of anti-methamphetamine-related activities.

OJP Consolidated Tribal Grants

Total FY 2013 Request: \$65.1 million

(Reflects \$65.1 million over FY 2012 enacted level)

The Budget proposes an increase of \$65.1 million for the Consolidated Tribal Grants, an initiative designed to more flexibly address tribal criminal justice needs at the local level. The initiative will support grants, training, and technical assistance to improve tribal criminal justice outcomes, including drug and alcohol-related matters. This budget request represents 80 percent of total funding for the Consolidated Tribal Grants set-aside in FY 2013.

FY 2013 Changes (+\$65.1 million): The Budget proposes an overall increase of \$81.4 million for this program, of which 80 percent is scored in support of the *National Drug Control Strategy*.

Prescription Drug Monitoring Program

Total FY 2013 Request: \$7.0 million

(Reflects no change from FY 2012 enacted level)

The PDMP program enhances the capacity of regulatory and law enforcement agencies to collect and analyze controlled substance

prescription data, aiming to assist states that want to establish a PDMP. In addition to providing grants to states for PDMP planning, implementation, and enhancement, funding will support the continued training and technical assistance to states; further develop a clearinghouse of best practices and measures of effectiveness for PDMPs; and provide technical support for states to engage in electronic interstate data sharing.

FY 2013 Changes (no change): The request supports a continuation of the collection and analysis of controlled substance prescription data.

Problem Solving Justice

Total FY 2013 Request: \$52.0 million

(Reflects \$8.0 million increase over FY 2012 enacted level for the programs consolidated into the new program)

This program consolidates separate funding streams for the Drug Court Program and Mentally Ill Offender Grants. This consolidation will provide OJP the flexibility to continue providing grants to state, local, and tribal criminal justice agencies to help plan, implement, and improve drug court programs; and assist state, local, and tribal criminal justice agencies in working with mental health, substance abuse, housing, and related systems to decrease recidivism of mentally ill offenders, thus improving public safety and public health.

FY 2013 Changes (+\$8.0 million): The Budget proposes an increase of \$8.0 million over the level of funding previously dedicated to the consolidated programs. This program will assist state, local, and tribal governments in developing and implementing problem solving court

strategies to address their jurisdiction's unique needs.

Regional Information Sharing System

Total FY 2013 Request: \$27.0 million

(Reflects no change from FY 2012 enacted level)

The Regional Information Sharing System (RISS) is the only national criminal intelligence system operated by and for state and local law enforcement agencies. Six regional intelligence centers operate in all 50 states, the District of Columbia, and U.S. territories, with some member agencies in Canada, Australia, and England. These regional centers facilitate information sharing and communications to support member agency investigative and prosecution efforts by providing state-of-the-art investigative support and training, analytical services, specialized equipment, secure information-sharing technology, and secure encrypted e-mail and communications capabilities to over 6,000 municipal, county, state, and Federal law enforcement agencies nationwide.

FY 2013 Changes (no change): RISS will continue to provide investigative support and training, analytical services and secure communications capabilities to participating law enforcement agencies.

Residential Substance Abuse Treatment

Total FY 2013 Request: \$21.0 million

(Reflects \$11.0 million increase over FY 2012 enacted level)

The Residential Substance Abuse Treatment (RSAT) program for state prisoners was established to help states and units of local governments develop, implement, and improve residential substance abuse treatment programs in correctional facilities, and establish and maintain community-based aftercare services for

probationers and parolees. Ultimately, the program goal is to help offenders become drug-free and learn the skills needed to sustain themselves upon return to the community.

FY 2013 Changes (+\$11.0 million): The Budget proposes an increase of \$11.0 million. This increase will assist states and local jurisdictions with improving services for offenders with substance abuse programs and increasing the number of offenders served.

Second Chance Act

Total FY 2013 Request: \$40.0 million

(Reflects +\$8.5 million increase over FY 2012 enacted level)

The Second Chance Act Program builds on the success of OJP's past reentry initiatives by providing grants to establish and expand adult and juvenile offender reentry programs. This program authorizes various grants to government agencies and nonprofit groups to provide employment assistance, substance abuse treatment, housing, family programming, mentoring, victims support, and other services that can help reduce re-offending and violations of probation and parole. This budget request represents 50 percent of the total funding requested for Second Chance Act in FY 2013 (\$80.0 million).

FY 2013 Changes (+\$8.5 million): The budget proposes an increase of \$8.5 million for this program, which will support state and local efforts to implement innovative and evidence-based programs that help offenders transition make from prison or jail to the community and reintegrate into society safely and successfully.

PERFORMANCE

This section on OJP's FY 2011 performance is based on information from internal and external sources. The tables below include

performance measures, targets and achievements for the latest year for which data are available.

Drug Courts		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Percent of drug court participants who graduate from the drug court program	48%	43%

Discussion

BJA administers the Drug Court program. With more than 2,400 operational drug courts across the U.S., BJA will continue to shift its program emphasis from establishing new drug courts to building and enhancing existing drug court capacity through training and technical assistance, management information system enhancements, evaluations, increased services to drug court clients, and information dissemination.

Drawing on research and graduation trends, the FY 2011 target for the drug court graduation rate was 48 percent in FY 2011; the achieved rate was 43 percent.

For FY 2012, BJA will refine the reporting on graduation rates and provide greater detail regarding client-based information (e.g., moves from area of drug court program, deaths, etc.)

In FY 2011, BJA and the National Institute of Justice (NIJ) conducted a review of recent Drug Court research findings and identified seven evidence-based components of successful drug court programming, which is being used to guide applicants to design more effective program designs. Funding evidence-based approaches enhances the

potential return on investment of Drug Court Discretionary Grant funding.

In FY 2011, NIJ's Multisite Adult Drug Court Evaluation (MADCE), a study of nearly 1,800 drug court participants and comparison probationers was released. The study compared 29 jurisdictions across the U.S., collected data via: three waves of interviews with participants; drug detection tests; administrative records on treatment and recidivism; court observations; interviews with staff and other stakeholders; and budget and other cost information. MADCE found that adult drug courts significantly reduce drug use and criminal offending during and after program participation, and are more cost efficient than traditional case processing and supervision. Drug Court participants reported less drug use (56% vs. 76%) and were less likely to test positive for drug use (29% vs. 46%), when compared to comparable individuals in the control group. In addition, participants reported less criminal activity (40% vs. 53%) and had fewer re-arrests (52% vs. 62%, though the difference is not statistically significant). Overall, the net benefit of drug courts is an average of \$5,680 to \$6,208 per participant.

RSAT		
Selected Measures of Performance	CY 2010 Target	CY 2010 Achieved
» Number of participants in RSAT	25,000*	29,872

* BJA is reporting on a calendar year (CY) basis. The data for CY 2010 data are reported in the table.

Discussion

The RSAT program, administered by BJA and authorized by the Violent Crime Control and Law Enforcement Act of 1994 (Public Law 103-322), assists state and local governments in developing and implementing residential substance abuse treatment programs (individual and group treatment activities) in correctional and detention facilities. The RSAT program is provided in residential treatment facilities set apart from the general correctional population; is focused on the inmate's

substance abuse problems; and develops the inmate's cognitive, behavioral, social, vocational, and other skills to manage the substance abuse and related problems.

In 2010, BJA announced plans to provide training and technical assistance (TTA) to RSAT programs and is delivering a range of TTA services to RSAT programs to maximize the use of evidence-based substance abuse treatment and aftercare for inmates in need of such treatment.

PDMP		
Selected Measures of Performance	CY 2010 Target	CY 2010 Actual
» Number of interstate solicited reports produced	200,000	291,618
» Number of interstate unsolicited reports produced	1,300	979

Discussion

The Harold Rogers Prescription Drug Monitoring Program (PDMP), administered by BJA, enhances the capacity of regulatory and law enforcement agencies and public health officials to collect and analyze controlled substance prescription drug data and other scheduled chemical products, while allowing for legitimate medical use, through a centralized database administered by an authorized state agency. The program was created by the FY 2002 U.S. Department of Justice Appropriations Act (Public Law 107-77) with the goal to help prevent and detect the diversion and abuse of pharmaceutical controlled substances. Thirty-six states now have operational PDMPs and 12 states and

1 U.S. territory (Guam) have enacted legislation to establish a PDMP but are not fully operational. Under the BJA grant program, 12 awards were made in FY 2011 for states to implement or enhance a PDMP. Since inception of the grant program in FY 2002, grants have been awarded to 47 states and 1 U.S. territory to support their efforts to plan, implement, or enhance a PDMP.

DEPARTMENT OF JUSTICE

Organized Crime Drug Enforcement Task Force

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Investigations	\$378.783	\$378.447	\$373.602
Prosecution	148.729	149.065	151.191
Total Drug Resources by Function	\$527.512	\$527.512	\$524.793
Drug Resources by Decision Unit			
Bureau of Alcohol, Tobacco, Firearms & Explosives (ATF)	\$11.790	\$11.780	\$11.540
Criminal Division	2.095	2.089	2.118
Drug Enforcement Administration (DEA)	205.019	204.830	203.700
Executive Office for U.S. Attorneys (EOUSA)	146.304	146.171	148.257
Federal Bureau of Investigation (FBI)	141.459	141.330	138.479
OCDETF Fusion Center (OFC)	11.752	11.752	11.304
Threat Response Unit	0.330	0.805	0.816
U.S. Marshals Service (USMS)	8.763	8.755	8.579
Total Drug Resources by Decision Unit	\$527.512	\$527.512	\$524.793
Drug Resources Personnel Summary			
Total FTEs (direct only)	3,277	3,276	3,228
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$0.5	\$0.5	\$0.5
Drug Resources Percentage	100.00%	100.00%	100.00%

Program Summary

MISSION

The Organized Crime Drug Enforcement Task Forces (OCDETF) Program was established as a multi-agency partnership of Federal law enforcement agencies and prosecutors, with assistance from state and local police departments, to identify, dismantle, and disrupt sophisticated national and international drug trafficking and money laundering organizations. OCDETF combines the resources, expertise,

and statutory authorities of member agencies to attack all of the related components of major drug trafficking and money laundering organizations. OCDETF efforts lead to disruptions in the drug market, which result in reductions in the drug supply, as well as bolster law enforcement efforts.

METHODOLOGY

All OCDETF resources are scored as a part of the National Drug Control Budget.

BUDGET SUMMARY

The FY 2013 budget requests \$524.8 million, a decrease of \$2.7 million from the FY 2012 enacted level.

OCDETF focuses on key program priorities in order to effectively and efficiently support its mission. OCDETF's major priority is the Consolidated Priority Organization Target (CPOT) List – a unified agency list of the top drug trafficking and money laundering targets around the world that impact the U.S illicit drug supply. OCDETF Regional Coordination Groups also target and identify Regional Priority Organization Targets (RPOTs), the most significant drug and money laundering organizations threatening the nation. In addition, OCDETF requires that all cases include a financial component to enable the identification and destruction of the financial systems supporting drug organizations.

Investigations

**Total FY 2013 Request: \$373.6 million
(Reflects \$4.8 million decrease from FY 2012 enacted level)**

Reimbursable resources support investigative activities of the following participating agencies: ATF, DEA, FBI, and the USMS. Also included are the reimbursable resources that support the intelligence activities of OCDETF's member agencies, the OCDETF Fusion Center, and the International Organized Crime Intelligence and Operations Center (IOC-2).

Bureau of Alcohol, Tobacco, Firearms, and Explosives

ATF agents focus on major drug traffickers who have violated laws related to the illegal trafficking and misuse of firearms, arson, and explosives. Firearms often serve as a form of payment for drugs and, together with explosives and arson, are used as tools by drug organizations in order to intimidate, enforce, and retaliate against their own members, rival organizations, or the community in general. Thus, ATF's jurisdiction and expertise contributes to OCDETF's efforts to disrupt and dismantle the most violent drug trafficking organizations. The FY 2013 request will continue to support ATF investigative activities as a member of the OCDETF Program.

Drug Enforcement Administration

DEA is the agency most actively involved in the OCDETF Program with a participation rate in investigations that exceeds 80 percent. Also, DEA is the only Federal agency in OCDETF that has drug enforcement as its sole mission. The agency's vast experience in this field, its knowledge of international drug rings, its relationship with foreign law enforcement entities, and its working relationships with state and local authorities have made the DEA an essential partner. The FY 2013 request will continue to support the personnel and operational costs for DEA's participation in the OCDETF Program.

Federal Bureau of Investigation

FBI brings to OCDETF its expertise in the investigation of traditional organized crime and white collar/financial crimes. The FBI also has developed valuable relationships with foreign and state and local law enforcement. The FBI uses its skills to

gather and analyze intelligence data and to undertake sophisticated electronic surveillance. The FBI contributes to the OCDETF program and to the goal of targeting major drug trafficking organizations and their financial infrastructure. The FY 2013 request will continue to support FBI involvement in OCDETF investigations.

U.S. Marshals Service

USMS is the agency responsible for the apprehension of OCDETF fugitives. Fugitives are typically repeat offenders who flee apprehension only to continue their criminal enterprise elsewhere. Their arrest by the USMS immediately makes the community in which the fugitive was hiding and operating a safer place to live. The FY 2013 request will continue to support USMS involvement in OCDETF investigations.

OCDETF Fusion Center (OFC)

The FY 2013 request will support operations at the OFC, a comprehensive data center containing all drug and related financial intelligence information from the seven OCDETF-member investigative agencies, the Financial Crimes Enforcement Network, and others. The OFC conducts cross-agency integration and analysis of drug and related financial data to create comprehensive intelligence pictures of targeted organizations, including those identified as CPOTs and RPOTs. The OFC is also responsible for passing along actionable leads through the multi-agency Special Operations Division (SOD) to OCDETF participants in the field. These leads ultimately result in the development of better-coordinated, more comprehensive, multi-jurisdictional OCDETF investigations of the most significant drug trafficking and money laundering networks.

International Organized Crime Intelligence and Operations Center (IOC-2) (\$3 million increase from FY 2012 level)

The International Organized Crime Intelligence and Operations Center (IOC-2) was launched on May 29, 2009, in partnership with the OCDETF Fusion Center (OFC) and the Special Operations Division of the Drug Enforcement Administration (SOD). The IOC-2 mission is to significantly disrupt and dismantle those international criminal organizations posing the greatest threat to the United States. IOC-2 was able to leverage the already existing tools of the OFC and SOD, while simultaneously benefiting those organizations by expanding the scope of their missions, collection, and agency participation. IOC-2 brought several new Federal law enforcement agencies into partnership with the OFC and SOD, and significantly enhanced the scope of contribution of current partners. For example, ICE, the U.S. Secret Service (USSS), the Department of State's Diplomatic Security Service (DoS-DS) and the Department of Labor's Inspector General's Office (DoL-IG) all joined the OFC at the time of the creation of IOC-2 and began contributing their investigative data to the OFC's fused data pool. Similarly, the USSS and DoS-DS joined SOD at the time of IOC-2's creation.

The OCDETF Program requests \$3.0 million for operational and administrative costs in support of IOC-2 investigations.

FY 2013 Changes (-\$4.8 million):

OCDETF will continue to provide personnel, administrative and investigative support for task force partners.

Prosecution

FY 2013 Request: \$151.2 million

(Reflects \$2.1 million increase from FY 2012 enacted level)

Reimbursable resources are included for the ninety-four U.S. Attorneys Offices around the country (executed through the Executive Office for U.S. Attorneys) and the Criminal Division of the Department of Justice.

Criminal Division

With the increasing complexity and scope of OCDETF cases, senior attorneys are called upon with greater frequency to assist in the supervision and prosecution of OCDETF cases. OCDETF-funded NDDS/AFMLS attorneys support the Mexican Cartel prosecutions. The FY 2013 request will support attorneys in the Office of Enforcement Operations as it reviews all applications for electronic surveillance and assists agents and attorneys by providing guidance on the justification for and development of such applications.

Threat Response Unit

The FY 2013 request will support the OCDETF Executive Office attorneys detailed to OEO to enhance its support of OCDETF Southwest border-related wiretap applications and requests for approval to employ sensitive investigative techniques; and to the Office of International Affairs (OIA) to support the high priority extraditions related to OCDETF prosecutions of Mexican Cartels.

U.S. Attorneys

Experienced OCDETF attorneys are able to coordinate investigative efforts more efficiently and minimize the risk of legal challenges because of their familiarity with the intricacies of drug trafficking

investigations. Their involvement ensures that the prosecutions are well prepared, comprehensively charged, and expertly handled. The FY 2013 request will support the United States Attorneys' involvement in the development of case strategy for OCDETF investigations and prosecutions.

FY 2013 Changes (+\$2.1 million):

OCDETF proposes to increase their involvement along the Southwest border through investigations, wire-tap applications, and prosecutions.

PERFORMANCE

This section on the FY 2011 performance for OCDETF is based on agency GPRA documents and other agency information. The table includes selected performance measures, targets and achievements for the latest year for which data are available.

OCDETF monitors performance in two program areas: investigations and prosecutions. For investigations, OCDETF tracks the percent of active investigations linked to the Attorney General's CPOT list and the number of CPOT-linked organizations dismantled or disrupted. For prosecutions, OCDETF tracks leadership convictions and financial convictions.

Organized Crime Drug Enforcement Task Force Program		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Percent of OCDETF investigations linked to CPOTs	16%	17%
» Percent of convicted defendants linked to CPOT	4%	5%
» Percent of OCDETF investigations resulting in conviction of a leader	76%*	81%*
» Percent of OCDETF investigations resulting in financial convictions	25%*	27%*
» Percent of OCDETF investigations resulting in assets forfeited	80%*	80%*
» Percent of OCDETF investigations resulting in disruption/dismantlement of targeted organization	78%*	86%*
» Number of CPOT-linked Drug Trafficking Organizations Disrupted	185	230
» Number of CPOT-linked Drug Trafficking Organizations Dismantled	104	130

* Data based on information reported in OCDETF Final Reports. Due to the lag in reporting, activity may have occurred in the prior year.

Discussion

The goal of the OCDETF Program is to identify, investigate, and prosecute the most significant drug trafficking and money laundering organizations and related enterprises, and to disrupt and dismantle their operations in order to reduce the drug supply in the United States. By dismantling and disrupting trafficking organizations that are CPOT-linked, OCDETF is focusing enforcement efforts against organizations that include heads of narcotic and/or money laundering organizations, poly-drug traffickers, clandestine manufacturers and producers, and major drug transporters, all of whom are primarily responsible for the domestic drug supply. Additionally, OCDETF's financial investigations focus on eliminating the entire infrastructure of CPOT-linked organizations and permanently removing their profits.

OCDETF dismantled 130 CPOT-linked organizations in FY 2011, exceeding the target; this represents an 8 percent increase over the 120 that were dismantled in FY 2010, the highest number reported prior to FY 2011. OCDETF disrupted 230 CPOT-linked

organizations in FY 2011, exceeding its target for disruptions. This is 7 percent greater than the 214 reported at the end of FY 2010. The total of 360 CPOT-linked organizations that were either dismantled or disrupted during FY 2011 is almost 8 percent higher than the 334 dismantled or disrupted in FY 2010, which was a record year. This achievement exceeded OCDETF's goal for disruptions and dismantlements.

In addition to making important gains against CPOT-linked organizations in FY 2011, OCDETF agencies continued to achieve significant successes against the CPOTs. Over the course of the last year, six CPOT targets were dismantled and six CPOT targets were disrupted. It is estimated that the CPOTs dismantled affected the capability of importing and distributing 100,000 tablets of MDMA per month into the United States and distributing MDMA, cocaine, marijuana, hash, and methamphetamine around the world; distributing 40 kilograms of heroin to the New York area on a monthly basis; and

moving cocaine valued in excess of \$4 billion into the United States since 2004.

pounds of marijuana and \$3.8 million in other assets.

Law enforcement activity targeting these CPOTs involved complex and coordinated intelligence driven investigations, with exceptional cooperation between U.S. law enforcement agencies and international partners. During FY 2011, 17 percent of active OCDETF investigations were linked to CPOT targets.

Eighty-six percent of OCDETF investigations have resulted in the disruption or dismantlement of the targeted organizations. Moreover, assets seized from OCDETF investigations totaled more than \$421 million in FY 2011. Five percent of convicted defendants in OCDETF investigations were linked to a CPOT. Eighty-one percent of OCDETF investigations resulted in the conviction of a leader, 27 percent in finance-related convictions, and 80 percent in the forfeiture of assets.

In FY 2011, more than 300 Federal, state, local and foreign law enforcement agencies contributed investigative and prosecutorial resources to “Project Delirium” through OCDETF which aimed to disrupt the operations of Mexican drug cartels in the United States and Mexico. Overall, Project Delirium operations have resulted in the arrest of 1,985 individuals and the seizure of approximately \$62 million in U.S. currency, approximately 2,773 pounds of methamphetamine, 2,722 kilograms of cocaine, 1,005 pounds of heroin, 14,818

DEPARTMENT OF JUSTICE
United States Attorneys

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prosecution	\$82.180	\$79.490	\$80.610
Total Drug Resources by Function	\$82.180	\$79.490	\$80.610
Drug Resources by Decision Unit			
Criminal Decision Unit	\$82.180	\$79.490	\$80.610
Total Drug Resources by Function	\$82.180	\$79.490	\$80.610

Drug Resources Personnel Summary			
Total FTEs (direct only)	500	486	493
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$1.930	\$1.960	\$1.974
Drug Resources Percentage	4.3%	4.1%	4.1%

Program Summary

MISSION

The Nation's 94 United States Attorney Offices (USAOs) are vital participants in supporting the *National Drug Control Strategy* and participate in several components of that *Strategy*. The USAOs work in conjunction with law enforcement to disrupt domestic and international drug trafficking and narcotics production through comprehensive investigations and prosecutions of criminal organizations. A core mission of each of the USAOs is to prosecute violations of Federal drug trafficking, controlled substances, money laundering, and related Federal laws in order to deter continued illicit drug distribution and use in the United States. This mission includes utilizing the grand jury process to investigate and uncover the criminal conduct at issue, and subsequent

presentation of the evidence in court as part of prosecution of individuals and organizations who violate Federal law. USAOs also work to dismantle criminal drug organizations through asset forfeiture, thereby depriving drug traffickers of the proceeds from their illegal activities.

In addition to this traditional prosecutorial role, efforts to discourage illegal drug use and to prevent recidivism by convicted drug offenders also form important parts of the drug control mission of the United States Attorneys' Offices. Each USAO is encouraged to become involved in reentry programs that may help prevent future crime, including drug crimes. Re-entry programs, such as re-entry courts, typically include access to drug treatment and support for recovery. Prosecutors and

USAO staff also participate in community outreach through initiatives such as the Byrne Criminal Justice Innovation program and Project Safe Neighborhoods, which educate communities about the hazards of drug abuse.

METHODOLOGY

The Executive Office of the United States Attorneys does not have a specific appropriation for drug control activities. The United States Attorney's drug budget is derived by calculating the costs of attorney and non-attorney full-time equivalents (FTE) dedicated to non-OCDETF drug prosecutions. This data is captured at the end of the fiscal year; once the total cost is determined, an inflation rate is applied to the out-years.

BUDGET SUMMARY

The FY 2013 drug control request for the United States Attorneys is \$80.6 million, which is an increase of \$1.1 million over the FY 2012 enacted level. The resources will be used to support prosecution of violations of controlled substances, money laundering, and drug trafficking.

Criminal Decision Unit

Total FY 2013 Request: \$80.6 million
(Reflects \$1.1 million increase over FY 2012 enacted level)

The USAOs work in conjunction with law enforcement to disrupt domestic and international drug trafficking and narcotics production through comprehensive investigations and prosecutions of criminal organizations. A core mission of each of the USAOs is to prosecute violations of Federal drug trafficking, controlled substance, money laundering, and related Federal laws in order to deter continued illicit drug

distribution and use in the United States. This mission includes utilizing the grand jury process to investigate and uncover the criminal conduct at issue, and subsequent presentation of the evidence in court as part of prosecution of individuals and organizations who violate Federal law.

FY 2013 Changes (+\$1.1 million): The increase will continue to support drug-related prosecutorial activities.

PERFORMANCE

This section is on the FY 2011 performance of the drug control mission of the USAOs within the Department of Justice, based on agency GPRA documents and other agency information. The FY 2011 performance information for the USAOs drug related involvement is provided below.

U.S. Attorneys		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Conviction Rate for drug related defendants	NA	91.2%
» Percentage of defendants sentenced to prison	NA	89%

Note: The Executive Office of the United States Attorneys (EOUSA) reports actuals achieved.

Discussion

USAOs investigate and prosecute the vast majority of criminal cases brought by the Federal government to include drug related topics. USAOs receive most of their criminal referrals, or “matters,” from Federal investigative agencies, including the Federal Bureau of Investigation (FBI), the Drug Enforcement Administration (DEA), the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF), the United States Immigration and Customs Enforcement (ICE), the United States Secret Service, and the United States Postal Inspection Service. The EOUSA supports the *National Drug Control Strategy* through investigations and prosecutions, which contribute to reducing the threat, trafficking, use, and related violence of illegal drugs.

Three recent successful prosecutions demonstrate the work of the United States Attorneys during FY 2011:

(1) La Familia Mexican Drug Cartel – Chicago Cell Head (Northern District of Illinois): A significant accomplishment during FY 2011 included the August 2, 2011 sentencing of Jose Gonzalez-Zavala, the former head of the Chicago distribution network of a Mexican drug-trafficking cartel, to 40 years imprisonment for his role in orchestrating a conspiracy to distribute

more than 420 kilograms of cocaine. From 2008 until his arrest in June 2009, Gonzalez-Zavala directed the operations of the Chicago distribution cell of a drug-trafficking cartel known as La Familia Michoacana. Gonzalez-Zavala was 1 of more than 20 defendants charged in connection with narcotics trafficking by the La Familia Michoacana organization in the Chicagoland area. To date, 15 of those defendants have pleaded guilty for their roles in the organization. The investigation, which began in 2007, was part of Project Coronado, a multi-agency narcotics trafficking investigation, which focused on La Familia’s distribution network throughout the United States.

(2) Independence Missouri Prescription Drug Plea (Western District of Missouri):

On February 17, 2011, an Independence, Missouri physician who admitted that he participated in a conspiracy to distribute illegally over 83,000 OxyContin and oxycodone pills from July 2006 to January 2010 plead guilty. During the course of the conspiracy, the defendants caused OxyContin and oxycodone prescriptions to be issued for individuals with no legitimate medical need. Those prescriptions were later filled at pharmacies and paid by health care benefit programs. The estimated sales

of the pills totaled \$952,520. The physician, Bruce Layne Baker, was paid by his co-conspirators approximately \$50 to \$100 for each illegal prescription. To date, eight defendants have pleaded guilty for their role in connection with the conspiracy.

(3) Operation Knock-Out (Central District of California):

On January 6, 2011, George Manuel Flores, leader of the Varrio Hawaiian Gardens street gang, was sentenced to 30 years in prison. Flores admitted that, as leader of the gang, he was responsible for the distribution of more than 30 kilograms of heroin, more than 4.5 kilograms of crack cocaine, more than 1.5 kilograms of pure methamphetamine, and more than 100 kilograms of marijuana. Flores was 1 of 212 defendants charged as a part of Operation Knockout, including the lead defendant in the 57-defendant racketeering conspiracy case that was the centerpiece of Operation Knockout. During the course of the investigation, authorities seized approximately 33 pounds of methamphetamine and approximately 125 firearms. Many of the remaining defendants have pleaded guilty, some being sentenced to sentences as long as 25 years imprisonment.

DEPARTMENT OF JUSTICE
United States Marshals Service

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
International	\$1.054	\$1.101	\$1.099
Investigations	104.314	108.984	108.827
Prosecution	132.352	138.795	140.902
Total Drug Resources by Function	\$237.720	\$248.880	\$250.828
Drug Resources by Decision Unit			
Fugitive Apprehension	\$105.368	\$110.085	\$109.926
Judicial and Courthouse Security	86.064	89.594	91.812
Prisoner Security and Transportation	46.288	49.201	49.090
Total Drug Resources by Function	\$237.720	\$248.880	\$250.828
Drug Resources Personnel Summary			
Total FTEs (direct only)	1,139	1,139	1,139
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$1.1	\$1.2	\$1.2
Drug Resources Percentage	22.1%	21.2%	21.1%

Program Summary

MISSION

The U.S. Marshals Service (USMS) is the enforcement arm of the Federal courts and works in concert with other Federal agencies including the Drug Enforcement Administration; the Federal Bureau of Investigation; U.S. Immigration and Customs Enforcement; the Bureau of Alcohol, Tobacco, Firearms and Explosives; the Internal Revenue Service; and the U.S. Coast Guard. The USMS also works in cooperation with the Department of Justice’s Criminal Division, Tax Division, and the 94 U.S. Attorney’s Offices, as well as with state and local law enforcement.

USMS’ drug interdiction efforts center on capturing fugitives who have a nexus to the most serious drug trafficking and money laundering organizations, and those primarily responsible for the Nation’s drug supply. In order to contribute to the Administration’s mandate to reduce the drug supply, the USMS focuses its fugitive apprehension resources on coordinated, nationwide investigations, targeting the entire infrastructure of major drug trafficking. The USMS also directly contributes to the Attorney General’s drug supply reduction strategy by maintaining

the security of all in-custody prisoners with serious drug-related charges.

METHODOLOGY

The USMS does not have a specific appropriation for drug interaction activities, however, the Salaries and Expenses (S&E) appropriation is allocated to: 1) judicial and courthouse security to carry out the USMS judicial security mission; 2) task forces to carry out the USMS fugitive apprehension mission; and 3) district offices to carry out the USMS prisoner security and transportation mission. USMS resource estimates for drug control are based on the drug-related workload as of FY 2011 year-end. For Judicial and Courthouse Security as well as Prisoner Security and Transportation, 20 percent of in-custody prisoners have a drug-related charge. For Fugitive Apprehension, 28 percent of warrants cleared are drug-related. These percentages are applied to S&E appropriation to formulate drug-related resources. S&E resources include employee payroll, rent, and operating expenses.

BUDGET SUMMARY

The total drug control request for the USMS for FY 2013 is \$250.8 million, a net increase of \$1.9 million over the FY 2012 enacted level.

Judicial and Courthouse Security

**Total FY 2013 Request: \$91.8 million
(Reflects \$2.2 million increase over FY 2012 enacted level)**

Judicial and Courthouse Security encompasses personnel security (security protective detail for a judge or prosecutor), building security (security equipment to monitor and protect a Federal courthouse facility) includes maintaining security of prisoners in custody during court

proceedings. Deputy Marshals are assigned to 94 judicial districts (93 Federal districts and the Superior Court for the District of Columbia) to protect the Federal judicial system which handles a variety of cases including drug trafficking. The USMS determines the level of security required for high-threat situations by assessing the threat level, developing security plans based on risks and threat levels, and assigning the commensurate security resources required to maintain a safe environment.

FY 2013 Changes (+\$2.2 million): The requested increase will support security to ensure that judicial and courthouse proceedings properly.

Fugitive Apprehension

**Total FY 2013 Request: \$109.9 million
(Reflects \$0.2 million decrease from FY 2012 enacted level)**

Fugitive Apprehension includes domestic and international fugitive investigations, technical operations, criminal intelligence analysis, fugitive extraditions and deportations, sex offender investigations, and the seizure of assets. The USMS is authorized to locate and apprehend Federal, state, and local fugitives both within and outside the U.S. under 28 USC 566(e)(1)(B). The USMS has a long history of providing assistance and expertise to other law enforcement agencies in support of fugitive investigations. The broad scope and responsibilities of the USMS concerning the location and apprehension of Federal, state, local, and foreign fugitives is detailed in a series of Federal laws, rules, regulations, Department of Justice policies, Office of Legal Counsel opinions, and memoranda of understanding with other Federal law enforcement agencies.

FY 2013 Changes (-\$0.2 million): USMS will continue to support all aspects associated with the apprehension of fugitives.

agency GPRA documents and other agency information. The FY 2011 performance measures for the USMS drug related involvement are shown in the table below.

Prisoner Security & Transportation

Total FY 2013 Request: \$49.2 million

(Reflects \$0.1 million decrease from FY 2012 enacted level)

Prisoner Security and Transportation includes processing prisoners in the cellblock, securing the cellblock area, transporting prisoners by ground or air, and inspecting jails used to house Federal detainees. As each prisoner is placed into USMS custody, a Deputy Marshal is required to “process” that prisoner. Processing consists of interviewing the prisoner to gather personal, arrest, prosecution, and medical information; fingerprinting and photographing the prisoner; preparing an inventory of any received prisoner property; and entering/placing the data and records into automated tracking systems. The cellblock is the secured area for holding prisoners in the courthouse before and after appearance in a court proceeding. Deputy Marshals follow strict safety protocols in the cellblocks to ensure the safety of USMS employees and members of the judicial process.

FY 2013 Changes (-\$0.1 million): USMS will continue to support the security and transportation of prisoners in USMS custody.

PERFORMANCE

This section on the FY 2011 performance of the drug control mission of the USMS within the Department of Justice is based on

U.S. Marshals Service		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Number of prisoners with drug-related charges who escaped from USMS custody outside of the courtroom.	0	0
» Percent of primary Federal drug fugitives apprehended or cleared.	56%	62%

Discussion

The Prisoner Security and Transportation decision unit has the following measure “Number of prisoner escapes from USMS custody outside of the courtroom.” For drug-related performance, the USMS is reporting on the number of prisoners with drug-related charges. The FY 2011 target was to allow no escapes. The USMS met this performance target.

The Fugitive Apprehension decision unit has the following outcome: “Percent of primary Federal felony fugitives apprehended or cleared.” For drug-related performance, the USMS reports on the number of primary Federal drug fugitives apprehended or cleared. The USMS takes the number of primary drug fugitives apprehended or cleared (15,643 at the end of FY 2011) and divides it by the number of drug fugitives wanted at the start of the fiscal year (25,346 at the start of FY 2011). The FY 2011 target of 56 percent was achieved with 62 percent apprehended or cleared.

DEPARTMENT OF JUSTICE

United States Marshals Service Federal Prisoner Detention

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Corrections	\$533.000	\$580.000	\$604.000
Total Drug Resources by Function	\$533.000	\$580.000	\$604.000
Drug Resources by Decision Unit			
Detention Services	\$533.000	\$580.000	\$604.000
Total Drug Resources by Function	\$533.000	\$580.000	\$604.000
Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$1.5	\$1.6	\$1.7
Drug Resources Percentage	35.2%	36.7%	36.2%

Program Summary

MISSION

The Federal Prisoner Detention (FPD) appropriation (formerly the Office of the Federal Detention Trustee) is responsible for the costs associated with the care of Federal detainees in the custody of United States Marshals Service (USMS). The USMS ensures the safe, secure and humane confinement of persons in its custody while allowing unimpeded prisoner transportation. The FPD appropriation funds the care of Federal detainees in private, state, and local facilities, which includes housing, subsistence, transportation, and medical care.

METHODOLOGY

The FPD appropriation does not include specific resources dedicated to housing the drug prisoner population. The primary drivers of detention expenditures are the number of prisoners booked by the USMS, the length of time those prisoners are held in detention, and the cost. A Detention Population Forecasting Model is used to take a statistical approach for predicting detention needs using factors such as population, demographic trends, number and type of criminal cases processed, average processing time per type of case, and authorized/ requested positions of the Federal law enforcement, U.S. Attorneys, U.S. District court judges, and immigration judges. The methodology to determine the cost associated with the drug prisoner

population is to use the average daily population (ADP) for drug offenses multiplied by the per diem rate (cost per day to house) multiplied by the number of days in the year. Projections for out-year costs are based on projected future bookings by offense and the time offenders are expected to be held in detention at the projected per diem rates.

PERFORMANCE

This section on the FY 2011 performance of the drug control mission of the USMS FPD account within the Department of Justice is based on agency GPRA documents and other agency information. The FY 2011 performance information for FPD drug related involvement is provided below.

BUDGET SUMMARY

The FY 2013 request for the FPD is \$604.0 million, which is an increase of \$24.0 million over the FY 2012 enacted level.

Detention Services

Total FY 2013 Request: \$604.0 million
(Reflects +\$24.0 million increase over FY 2012 enacted level)

FPD resources are expended from the time a prisoner is brought into USMS custody through termination of the criminal proceeding and/or commitment to BOP.

FY 2013 Changes (+\$24.0 million): The FY 2013 increase supports services for Federal detainees in custody.

Federal Prisoner Detention ^{1/}		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Per Day Jail Costs (non-federal) ^{2/}	\$71.54	\$72.88

Notes:

1/ For the purposes of this document, the FPD account and OFDT are interchangeable.

2/ The per Day Jail Costs reflect the average daily costs for the total detainee population including detainees convicted of drug offenses.

Discussion:

USMS continues to explore new approaches to address diminishing detention capacity in an environment of an increasing detention population resulting from aggressive immigration, drugs

trafficking, and other law enforcement initiatives.

For FY 2011, the FPD population convicted of drug offenses was 21,907, which constituted 34.7 percent of the total

detainee population of 63,112. The detainee population is dependent upon the number of persons arrested by the Federal law enforcement agencies coupled with the length of time defendants are detained pending adjudication, release, or subsequent transfer to the Bureau of Prisons following conviction and sentencing. Currently, the challenges facing law enforcement officials at the Southwest border (SWB) directly affect the detention population overseen by FPD. In FY 2013, anticipated law enforcement initiatives on the SWB addressing drug and weapons trafficking are expected to increase the average time-in detention, thereby increasing the detainee population.

A key objective of USMS is to reduce prisoner processing time via eDesignate, an enterprise technology solution that automates the sentence to commitment business process by transferring data and documents electronically. All 94 Judicial Districts use eDesignate, which reduces post-sentencing time in detention during the sentence-to-commitment process. Moreover, USMS supports the *National Drug Control Strategy* in continuing to support alternatives to incarceration through to pretrial detention, such as electronic monitoring, halfway house placement, and drug testing and treatment.

USMS continues to look for efficiencies and cost avoidance in detention through process and infrastructure improvements funded by the FPD account. These improvements will address the requirements of affected partner agencies.

DEPARTMENT OF LABOR



DEPARTMENT OF LABOR
Employment and Training Administration

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prevention	\$6.600	\$6.600	\$6.500
Total Drug Resources by Function	\$6.600	\$6.600	\$6.500
Drug Resources by Decision Unit			
Job Corps	\$6.600	\$6.600	\$6.500
Total Drug Resources by Decision Unit	\$6.600	\$6.600	\$6.500

Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$11.0	\$10.7	\$9.7
Drug Resources Percentage	0.06%	0.06%	0.07%

Program Summary

MISSION

The Job Corps program is administered by the Department of Labor’s Employment and Training Administration (ETA). Established in 1964, Job Corps is a comprehensive, primarily residential, academic and career technical training program for economically disadvantaged youth, ages 16-24. There are currently 125 Job Corps centers nationwide in 48 states, Puerto Rico, and the District of Columbia, providing services to approximately 60,000 at-risk youth each year to help them acquire high school diplomas and occupational credentials leading to a career. A component of this program that also teaches life skills is the Trainee Employment Assistance Program (TEAP), which consists of a comprehensive

drug prevention and intervention program for all Job Corps participants.

METHODOLOGY

Job Corps’ expenditures for the TEAP program are for counselors to prepare Job Corps participants for employment, including: education on the dangers of alcohol, drug and tobacco use; abuse and prevention awareness activities; development of programs to prevent alcohol, drug and tobacco use and abuse among the student population; development and coordination of community resources to educate students on substance use and abuse; and identification of and provision of counseling services to students with substance abuse problems and arrangement of appropriate

treatment. In addition, the budget includes 100 percent of the cost of drug testing each individual student.

BUDGET SUMMARY

The FY 2013 total drug control request for the ETA's Job Corps drug prevention activities is \$6.5 million, a decrease of \$0.1 million below the FY 2012 level.

Trainee Employment Assistance Program (TEAP)

Total FY 2013 Request: \$6.5 million (Reflects -\$0.1 million decrease from FY 2012)
 Costs associated with Job Corps' TEAP include salaries of the counselors and the cost of administering drug testing. The cost of this portion of the program is \$5.9 million per year for the TEAP counselors. In addition, the Job Corps spends an additional

\$0.6 million on drug testing supplies and evaluations.

FY 2013 Changes (-\$0.1 million): In FY 2013, Job Corps will reduce the number of students in the program, consistent with a reduction in funding. However, Job Corps will maintain the high quality of services provided under the Trainee Employment Assistance Program. Fewer new students will be enrolled and tested upon entry in FY 2013, and fewer counselors will be needed.

PERFORMANCE

This section provides performance information regarding the Job Corps' drug prevention, education, and employability activities for the most recent program year for which data are available.

Job Corps		
Selected Measures of Performance	PY* 2010 Target	PY 2010 Achieved
» Percent of students tested for drugs upon entry	100%	100%
» Percent of students placed in employment, military or higher education at exit	65.3%	73%

*Program Year (PY)

Discussion

Job Corps provides training to both students and staff on drug-related requirements in the workplace, including employer drug testing policies and the effects of drug and alcohol abuse on employability.

Job Corps operates under a "Zero Tolerance" policy against violence, drugs and various minor rules. During Program Year (PY) 2010, the performance measure to test 100 percent of all students for drugs upon entry into the program was achieved.

To maintain a drug free environment, the Job Corps Director provided training and procedures to ensure that each center operator offered students counseling and education programs related to drug and alcohol abuse. These programs helped students meet the strict criteria for placement into drug free jobs in the military, government and private companies. In PY 2010 the target of 65.3 percent of students place in employment, military or higher education exiting the program was achieved at 73 percent.

Job Corps continues to augment its drug prevention and education activities throughout the program. In PY 2010, these activities included the presentation of drug prevention workshops at Job Corps' annual Health and Wellness Conference for Job Corps center staff. More than 425 practitioners from every aspect of the Job Corps system attended this conference.

Job Corps also increased basic drug awareness education training for all center staff through the use of information technology. Job Corps provided webinars and training sessions to assist staff in identifying the physical symptoms and signs of drug abuse and recognizing drug paraphernalia, in becoming familiar with privacy and confidentiality rules for relevant records, and with the medical, social and oral health implications of substance abuse.

In addition, Job Corps participated in national drug prevention and treatment campaigns such as Red Ribbon Week and Drug Abuse Resistance Education (DARE) activities, and utilized anti-drug guest speakers at Job Corps centers nationwide. Job Corps also developed and implemented a system wide program with accompanying curriculum to promote healthy lifestyle practices for students that included components on the avoidance of drug and alcohol abuse.

OFFICE OF NATIONAL DRUG CONTROL POLICY



OFFICE OF NATIONAL DRUG CONTROL POLICY

High Intensity Drug Trafficking Areas

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$62.983	\$63.228	\$52.600
Interdiction	23.612	20.994	17.465
Investigations	137.519	140.205	116.638
Prevention	3.269	2.530	2.530
Prosecution	4.316	4.747	3.949
Research and Development	2.695	2.700	2.700
Treatment	4.128	4.118	4.118
Total Drug Resources by Function	\$238.522	\$238.522	\$200.000
Drug Resources by Decision Unit			
High Intensity Drug Trafficking Areas	\$238.522	\$238.522	\$200.000
Total Drug Resources by Decision Unit	\$238.522	\$238.522	\$200.000

Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$0.239	\$0.239	\$0.200
Drug Resources Percentage	100.0%	100.0%	100.0%

Program Summary

MISSION

The High Intensity Drug Trafficking Areas program (HIDTA) was established by the Anti-Drug Abuse Act of 1988 to provide assistance to Federal, state, and local law enforcement entities operating in areas most adversely affected by drug trafficking. HIDTA was reauthorized in the Office of National Drug Control Policy Reauthorization Act of 2006 (P.L. 109-469). The mission of HIDTA is to disrupt the market for illegal drugs in the United States by assisting Federal, state, local, and tribal

law enforcement entities participating in HIDTA to dismantle and disrupt drug trafficking organizations, with particular emphasis on drug trafficking regions that have harmful effects on other parts of the United States.

METHODOLOGY

All HIDTA resources are scored as a part of the National Drug Control Budget.

BUDGET SUMMARY

In FY 2013, ONDCP requests \$200.0 million, which is a decrease of \$38.5 million from the FY 2012 enacted level. The HIDTA program is scalable and can operate effectively at the proposed lower level.

High Intensity Drug Trafficking Areas Program

Total FY 2013 Request: \$200.0 million
(Reflects \$38.5 million decrease from FY 2012)

The FY 2013 request includes \$200.0 million to provide assistance to Federal, state, and local agencies in each HIDTA region to carry out activities that address the specific drug threats of that region. A central feature of the HIDTA program is the discretion granted to HIDTA Executive Boards to design a strategy to respond to the specific drug trafficking threats found in each HIDTA region and to develop initiatives to implement the strategy. This flexibility allows each HIDTA Executive Board to tailor its strategy and initiatives to local conditions expediting a more focused response to changes in those conditions.

FY 2013 Changes (-\$38.5 million): The HIDTA program is funded at a level to maintain nearly the same level (as FY 2012) of basic support to all its regions.

PERFORMANCE

This section on the FY 2011 performance of the HIDTAs is based on program documents and other information. Since ONDCP is part of the Executive Office of the President, it does not meet the definition of “agency” under the Government Performance and Results Modernization Act of 2010 (GPRMA). Accordingly, HIDTA establishes measures and targets for internal management but does not report them as is

required for agencies subject to the GPRMA.

Discussion

FY 2011 achievements will be reported in summer 2012 after data have been fully collected and analyzed. For FY 2010, the most recent year for which complete data are available, HIDTA annual reports indicate there were 691 HIDTA initiatives in the 28 HIDTAs (including the 5 Southwest border HIDTA Regions). These initiatives were staffed by approximately 6,240 Federal agents and analysts and 16,560 state, local, and tribal officers, analysts, and other representatives.

HIDTA initiatives identified 8,693 DTOs operating in their areas of responsibility, of which 2,968 were disrupted or dismantled in FY 2010. Nearly two-thirds (64%) of these disrupted and dismantled DTOs were identified as part of a multi-state or international operation. In the process, HIDTA initiatives removed significant quantities of drugs from the market (detailed below) and seized \$774 million in cash and \$161 million in non-cash assets from drug traffickers. Moreover, 44 percent of HIDTAs achieved an average cost per DTO disrupted or dismantled below program average. In 2010, HIDTA task forces seized 1.2 million kg of marijuana; 48.3 thousand kg of cocaine powder; 5.1 thousand kg of methamphetamine; 4.4 thousand kg of Ice; 7.3 thousand kg of heroin; and 7.7 million outdoor marijuana plants plus 241.9 thousand indoor marijuana plants.

Domestic Marijuana Project

In FY 2010, ONDCP provided \$3.1 million in HIDTA discretionary funding to the

Domestic Marijuana Project (DMP)⁴. These resources are used for officer overtime, aviation flying hours, special equipment purchases, and other investigative costs, and to help coordinate eradication efforts by the DEA's Domestic Cannabis Eradication/Suppression Program (DCE/SP), the Department of the Interior, the Department of Agriculture, the Department of Defense (National Guard), and M7⁵ states' agencies. Approximately 8.86 million plants were eradicated from outdoor grows in the M7 States in FY 2010, a decrease of 370,000 plants from FY 2009.

National Methamphetamine and Pharmaceuticals Initiative (NMPI)

In FY 2010, ONDCP provided \$500,000 in HIDTA baseline funding and \$200,000 in HIDTA discretionary funding to the NMPI. The purpose of the NMPI is to counter the production, distribution, and consumption of methamphetamine and precursor chemicals in the United States, as well as the illegal diversion of pharmaceutical drugs through training, information sharing, assisting in targeting criminal enterprises involved in these activities, and investigative support. In FY 2011, the NMPI continued to sponsor and manage trainings attended by U.S. Federal, state, local, and tribal law enforcement and international partners such as China and Canada. As a result of NMPI's efforts, in 2010, 5,689 law enforcement personnel received training related to methamphetamine, chemicals, pharmaceuticals, and drug endangered children issues. In the first 2 quarters of FY 2011 the NMPI provided pharmaceuticals

training to 2,239 law enforcement personnel. The NMPI provides assistance to states and retailers in implementing the Federal Combat Meth Act regulations and the tracking of retail sale pseudoephedrine/ephedrine products. Furthermore, the NMPI continues its work to educate state and local leaders on efforts to reduce methamphetamine production via "prescription-only" scheduling of certain over the counter medicines containing precursor chemicals, as well as other tracking mechanisms.

National Southwest Border Counternarcotics Strategy

In FY 2011, ONDCP released an updated *National Southwest Border Counternarcotics Strategy* (SWB Strategy). The HIDTA program, specifically the five regions of the Southwest Border (SWB) HIDTA, continues to play major roles in the implementation of the SWB Strategy. The multi-agency HIDTA task forces along the border address all six strategic objectives outlined in this Strategy. While continuing to participate in various initiatives along the entire border, the SWB HIDTA increased its focus on initiatives in support of the SWB Strategy. Improved and enhanced cooperation, communications, and coordination are an integral part of the SWB HIDTA as it assists in the implementation of this Strategy. To that end, secured communication, through SIPRNET, has been established at three of the five Regions of the SWB HIDTA with a fourth Region expected to be online with its own access in FY 2012. In addition, the 2011 SWB CN Strategy dedicates a chapter to the development of strong, resilient U.S. communities that resist criminal activity and promote healthy lifestyles.

⁴ Previously known as the DMEIP which was renamed the Domestic Marijuana Project in FY 2011

⁵ M7 refers to seven states known as the Marijuana Seven. These include California, Oregon, Washington, Hawaii, Kentucky, Tennessee, and West Virginia.

OFFICE OF NATIONAL DRUG CONTROL POLICY

Other Federal Drug Control Programs

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prevention	\$129.740	\$92.000	\$108.600
Research and Development	10.878	12.150	10.000
Treatment	0.000	1.400	0.000
Total Drug Resources by Function	\$140.618	\$105.550	\$118.600
Drug Resources by Decision Unit			
Drug-Free Communities	94.810	92.000	88.600
Anti-Doping Activities	8.982	9.000	8.100
World Anti-Doping Agency Dues	1.896	1.900	1.900
Youth Drug Prevention Media Program	34.930	0.000	20.000
Section 1105 of P.L. 109-469	0.000	1.250	0.000
Drug Court Training and Technical Assistance	0.000	1.400	0.000
Total Drug Resources by Decision Unit	\$140.618	\$105.550	\$118.600

Drug Resources Personnel Summary			
Total FTEs (direct only)	1	1	1
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$0.141	\$0.106	\$0.119
Drug Resources Percentage	100.0%	100.0%	100.0%

Program Summary

MISSION

The Anti-Drug Abuse Act of 1988, as amended, and the Office of National Drug Control Policy (ONDCP) Reauthorization Act of 2006, established this account to be administered by the Director of ONDCP. The funds appropriated to the program support high-priority drug control programs and may be transferred to drug control agencies.

METHODOLOGY

All ONDCP Other Federal Drug Control Program resources are scored as a part of the National Drug Control Budget.

BUDGET SUMMARY

In FY 2013, ONDCP requests \$118.6 million for the Other Federal Drug Control Programs (OFDCP), which is an increase of \$13.0 million above the FY 2012 enacted level. OFDCP has four decision units: Media Campaign; Drug-Free Communities (DFC);

Anti-doping Activities; and World Anti-Doping Agency (WADA).

Youth Drug Prevention Media Program

FY 2013 Request: \$20 million

(Reflects \$20.0 million increase from FY 2012)

The FY 2013 request of \$20.0 million will sustain the Youth Drug Prevention Media Program's (Program) ability to reach teens with effective "Above the Influence" (ATI) messaging to counter the abundance of pro-drug messages in teens' lives and to provide messages to youth about the risks associated with drug use. This is especially important given the recent National Survey on Drug Use and Health (NSDUH) and Monitoring the Future (MTF) data showing illicit drug use continues to trend up. MTF data released in December 2011 shows there has been an upward trend in the use of marijuana over the past 5 years among 10th and 12th graders. Because most drug users initiate use with marijuana by itself or in combination with other substances, the ATI campaign remains a vitally important part of the *National Drug Control Strategy* to prevent illicit drug use.

The requested funds will ensure the Program is able to implement its two-tiered messaging strategy by delivering a base level of national-level prevention messaging via highly-targeted television and internet-based advertising (including a strong online and social media presence to support the growing ATI Facebook community of over 750,000 teens); and more targeted and customizable ATI efforts focusing on individual communities. This approach allows the Program to continue to reach all teens across the country with a highly visible national media presence, while actively engaging youth at the community level through various youth-serving

organizations (e.g., Boys and Girls Clubs, Y's, SADD chapters, and coalitions receiving funding from ONDCP's Drug-Free Communities program) with messaging most relevant to them and seeking their participation in the Program through activities in the *Above the Influence Activity Toolkit*.

FY 2013 Changes (\$20.0 million): The Youth Drug Prevention Media Program will continue to build upon the high level of awareness of its ATI brand with teens by executing its multi-tiered messaging approach – strong community-level local ATI drug prevention efforts delivered through various youth-serving organizations combined with a base level of national-level ATI messaging to maintain the integrity of the ATI brand.

Drug-Free Communities Support Program

FY 2013 Request: \$88.6 million

(Reflects \$3.4 million decrease from FY 2012)

The FY 2013 resources of \$88.6 million will support the development of drug-free community coalitions (DFCs) throughout the United States. The program provides up to \$125,000 per year in grant funding to local drug-free community coalitions, which must be matched at a minimum 1:1 ratio by local communities. These grants are awarded through peer-reviewed annual competitions. Community coalitions strive to increase community involvement and effectiveness in carrying out a wide array of drug prevention strategies, initiatives, and activities.

FY 2013 Changes (-\$3.4 million): DFC will fully fund more than 600 DFC grants, as well as continue the national

cross-site evaluation of DFC program effectiveness.

Anti-Doping Activities

FY 2013 Request: \$8.1 million

(Reflects \$0.9 million decrease from FY 2012)

The FY 2013 resources of \$8.1 million will continue efforts to educate athletes on the dangers of drug use and eliminate doping in amateur athletic competitions recognized by the United States Olympic Committee. Specifically, these funds support athlete drug testing programs, research initiatives, educational programs, and efforts to inform athletes of the newly adopted rules governing the use of prohibited substances outlined in the World Anti-Doping Code (the Code). In addition, funds will support legal efforts to enforce compliance with the Code and adjudicate athlete appeals involving doping violations.

FY 2013 Changes (-\$0.9 million): The budget will continue to support the anti-doping efforts.

World Anti-Doping Agency (WADA) Dues

FY 2013 Request: \$1.9 million

(Reflects no change from FY 2012)

The FY 2013 resources of \$1.9 million will support WADA's mission to address performance enhancing and illicit drug use in Olympic sports. The organization is jointly funded by national governments and the international sporting movement. The United States continues to play a leadership role in WADA's development by serving on the agency's governing Executive Committee and Foundation Board.

FY 2013 Changes (no change): Funds will support drug testing operations, athlete drug education and prevention efforts, and research.

PERFORMANCE

Youth Drug Prevention Media Program

This section on the FY 2011 performance of the Youth Drug Prevention Media Program (Program) is based on program documents and other information.

The Program is the sole, steadfast national anti-drug messaging vehicle. It has two distinct areas of focus: a teen-targeted “Above the Influence” (ATI) campaign (including a component to reach influencers of youth such as parents and coaches) and a young adult-targeted Anti-Methamphetamine (Meth) campaign.

The Program will build upon the high level of teen awareness of its ATI brand to execute the multi-tiered approach advocated in the *National Drug Control Strategy* – a baseline level of national ATI messaging combined with stronger local ATI drug prevention efforts delivered through various youth-serving organizations. This multi-tiered message delivery strategy strikes an effective balance between broad, national-level ATI prevention messaging (Tier One) and more targeted and customizable efforts focusing on local communities (Tier Two).

Discussion

The ATI measurement survey results from the past 5 years show that teens that are aware of or engaged with ATI are more likely to hold stronger anti-drug beliefs – suggesting the ATI messaging is resonating with teens and appears to be demonstrating positive Campaign effects.

A 2011 empirical assessment (Scheier et al, J. Drug Education, Vol. 41(4) 431-461, 2011) of the ATI campaign from November 2005 to January 2008 also suggests that

awareness of ATI is associated with greater anti-drug beliefs, fewer drug use intentions, and less marijuana use. This study provides further evidence of positive campaign effects and may strengthen reliance on mass media health persuasion campaigns as a useful adjunct to other programs targeting youth.

The ATI Program ran nationally (Tier One) beginning in September 2011 with new advertising and a broader anti-drug message focusing on substances typically associated with first use rather than a singular focus on a specific substance, such as marijuana. The Campaign encouraged increased participation with the ATI brand through its growing Facebook community of over 750,000 fans of ATI and is adding approximately 5,000 fans per week. Additional Tier Two local messaging (including additional localized ATI advertising, outreach, and youth events) was delivered in over 20 communities.

The Youth Ad Tracking Survey of 2011 indicates the following:

- In FY 2011, Campaign research indicated an average of 85 percent of the Campaign’s target audience was aware of the “Above the Influence” brand. This figure is comparable to other teen-targeted national brands such as Coca Cola, Burger King, and Nike;
- This awareness figure continued to be significantly higher than other national social marketing campaigns including the American Legacy Foundation’s teen-targeted anti-tobacco Truth Campaign with an awareness of 57 percent; and
- Most importantly, according to the Youth Ad Tracking Survey there continues to be a positive association between increased awareness levels of

ATI advertising and stronger anti-drug beliefs. Specifically, teens that were aware of the ATI held stronger anti-drug beliefs (including the risks of using drugs and the benefits of not using drugs) than teens unaware of the ATI.

The Campaign's anti-meth efforts were directed at young adults as national drug prevalence data show substantially higher use rates for 18-25 year olds. The 2011 Anti-Meth campaign ran from September through December 2011 in 15 states with elevated methamphetamine use. This Campaign:

- Reached 75 percent of the target audience an average of 10 times during the campaign, through paid advertising in the 15 states with the highest methamphetamine use
- Provided a mechanism for local organizations and community coalitions to receive free anti-meth resources including customizable versions of the ads (e.g. TV, print, radio, out-of-home billboards, and posters) for use as public-service announcements.

Drug Free Communities Support Program

This section on the FY 2011 performance of the DFC is based on program documents and other information. Since ONDCP is part of the Executive Office of the President, it does not meet the definition of "agency" under the Government Performance and Results Modernization Act of 2010 (GPRMA). Accordingly, DFC establishes measures and targets for internal management but does not report them as required for agencies subject to the GPRMA.

Discussion

Since the inception of the DFC Program, nearly 2,000 community coalitions addressing youth substance use have been funded. During FY 2011, there were a total of 726 DFC grants in the field (including both the DFC and DFC Mentoring Programs). A total of 57 grantees will graduate out of the DFC Program after receiving 10 years of funding, with 29 completing their first 5 years of funding in September 2012.

While DFC grantees report process data twice a year, they report outcome data every 2 years. As part of a new evaluation contract, the methodology was refined to assess more clearly the program's effectiveness and to reduce the data collection burden on DFC grantees. The modified Coalition Online Management and Evaluation Tool (COMET) is expected to launch in the Spring of 2012. DFC grantees will be trained on using the new system beginning in April 2012. Outcome reporting is scheduled for May and August 2012 (depending on each grantee's reporting schedule) with full compliance mandated for all grantees by February 2013.

The next report for the DFC Program, including data from January 2002 through November 2010, will be available mid-2012. Meanwhile, the following findings are based on the latest available data from January 2002-November 2009:

- 12 percent reduction of middle school alcohol use;
- 28 percent reduction of middle school tobacco use;
- 24 percent reduction of middle school marijuana use;
- 8 percent reduction of high school alcohol use;

- 17 percent reduction of high school tobacco use; and
- 11 percent reduction of high school marijuana use.

To summarize, past 30-day use declined significantly across all substances (alcohol, tobacco, marijuana) and all grade levels (middle and high school) between DFC coalitions' first and their most recent data report. Prevalence of 30-day use was lower across all substances for DFC high school students than among a nationally-representative sample of high school students taking the Youth Risk Behavior Survey (YRBS). Differences in prevalence of 30-day use between DFC and YRBS were statistically significant for alcohol in 2003, 2005, 2007, and 2009. Differences in prevalence of 30-day use were also statistically significant for marijuana in 2003, 2005, and 2007, but not in 2009. High school tobacco use continues to decline significantly in DFC grantee communities: between DFC grantees' 2009 data report and their previous report (typically from 2007), high school tobacco

use declined significantly (-1.8 percentage points).

The DFC Program also collects data on measures related to the extent to which coalitions are able to effectively address risk and protective factors that affect youth substance use. In FY 2010, 68 percent of DFC coalitions reported a decrease in at least 1 risk factor in their communities and 83 percent reported an increase in at least 1 protective factor in their communities. In addition, DFC coalitions reported positive changes in youth perceptions with 92 percent reporting improvement in at least 2 school grades of youth perception of risk and 90 percent reporting improvement in at least 2 grades of youth perception of parental disapproval of use. Finally, 91 percent of DFC coalitions reported at least a 5 percent improvement in 30-day youth use in at least 1 grade and 94 percent reported an increase in the age of onset in at least 2 grades.

OFFICE OF NATIONAL DRUG CONTROL POLICY

Salaries and Expenses

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Interdiction	\$5.341	\$5.073	\$4.848
International	5.339	5.073	4.847
Investigations	3.256	3.094	2.957
Prevention	4.297	4.083	3.902
Research and Development	1.297	0.000	0.000
State and Local Assistance	3.256	3.094	2.957
Treatment	4.297	4.083	3.902
Total Drug Resources by Function	\$27.084	\$24.500	\$23.413
Drug Resources by Decision Unit			
Operations	\$25.786	\$24.500	\$23.413
Policy Research	1.297	0.000	0.000
Total Drug Resources by Decision Unit	\$27.084	\$24.500	\$23.413
Drug Resources Personnel Summary			
Total FTEs (direct only)	99	98	98
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$0.027	\$0.025	\$0.023
Drug Resources Percentage	100.0%	100.0%	100.0%

Program Summary

MISSION

The Office of National Drug Control Policy (ONDCP), established by the Anti-Drug Abuse Act of 1988, and reauthorized by the ONDCP Reauthorization Act of 2006, is charged with developing policies, objectives and priorities for the National Drug Control Program. ONDCP seeks to foster healthy individuals and safe communities by effectively leading the nation's effort to reduce drug use and its consequences. ONDCP's responsibilities include developing a *National Drug Control Strategy*, the

consolidated National Drug Control Budget, and the associated *Budget and Performance Summary*. ONDCP also provides oversight on major programs such as the Drug Prevention Media Program, Drug-Free Communities Support Program, and High Intensity Drug Trafficking Areas (HIDTA).

METHODOLOGY

All ONDCP resources are scored as a part of the National Drug Control Budget.

BUDGET SUMMARY

In FY 2013, ONDCP requests \$23.4 million, which is a decrease of \$1.1 million from the FY 2012 enacted level.

Operations

Total FY 2013 Request: \$23.4 million

(Reflects \$1.1 million decrease from FY 2012)

The FY 2013 resources will enable ONDCP to carry out its responsibilities of advising the President on national and international drug control policies and strategies, and to ensure the effective coordination of anti-drug programs among National Drug Control Program agencies. In addition, ONDCP will provide oversight on major programs, such as the Drug Prevention Media Program, Drug-Free Communities Support Program, and HIDTA.

FY 2013 Changes (-\$1.1 million): The Budget will support ONDCP's mission.

SMALL BUSINESS ADMINISTRATION



SMALL BUSINESS ADMINISTRATION

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Prevention	\$0.998	\$0.000	\$0.000
Total Drug Resources by Function	\$0.998	\$0.000	\$0.000
Drug Resources by Decision Unit			
Drug Free Workplace Grants	\$0.998	\$0.000	\$0.000
Total Drug Resources by Function	\$0.998	\$0.000	\$0.000

Drug Resources Personnel Summary			
Total FTEs (direct only)	0	0	0
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	\$0.7	\$0.8	\$0.8
Drug Resources Percentage	0.1%	0.0%	0.0%

Program Summary

MISSION

SBA's Drug Free Workplace (DFWP) Demonstration Program was established by the Drug Free Workplace Act of 1998. The Program allows SBA to award grants to eligible intermediaries to assist small businesses financially and technically in establishing DFWP programs, and award grants to the Small Business Development Centers (SBDCs) to provide information and assistance to small businesses with respect to establishing DFWP programs. Among the activities that were performed by the grant recipients:

- Providing financial and technical assistance to small businesses as DFWP programs are set-up.
- Educating small business employers and employees on the benefits of a drug free workplace.

- Educating parents that work for small businesses on how to keep their children drug free.

BUDGET SUMMARY

In FY 2013, SBA is not requesting any drug control funding for grant awards. However, SBA will continue to offer DFWP resources to small business owners through the SBDCs nationally. This will help small business owners better understand drug free workplace policies as well as provide resources for referral to substance abuse treatment when needed by their employees.

DEPARTMENT OF STATE



DEPARTMENT OF STATE

Bureau of International Narcotics and Law Enforcement Affairs

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
International	\$575.288	\$513.203	\$507.790
Total Drug Resources by Function	\$575.288	\$513.203	\$507.790
Drug Resources by Decision Unit			
International Narcotics Control & Law Enforcement (INCLE)	\$575.288	\$513.203	\$507.790
Total Drug Resources by Decision Unit	\$575.288	\$513.203	\$507.790
Drug Resources Personnel Summary			
Total FTEs (direct only)	108	83	67
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$1.6	\$2.0	\$2.5
Drug Resources Percentage	36.1%	25.1%	20.3%

Program Summary

MISSION

The Bureau of International Narcotics and Law Enforcement Affairs (INL) is dedicated to strengthening criminal justice systems, countering the flow of illegal narcotics, and minimizing transnational crime.

Functioning democratic criminal justice systems strengthen international law enforcement and judicial effectiveness, bolster cooperation in legal affairs, and support the rule of law and respect for human rights. Strong criminal justice systems are also essential to counternarcotics efforts and minimizing transnational crime. In addition to traditional counternarcotics activities, such as disrupting the overseas production and trafficking of illicit drugs, INL supports the development of capable police and

competent judicial officials. In order for counternarcotics efforts to be sustainable, strong criminal justice systems must be developed. Similarly, minimizing transnational crime requires both specialized assistance and the overall development of criminal justice systems.

INL performs initiatives designed to minimize the impact of international crime and drugs on the United States and its international partners, as well as improving foreign law enforcement and intelligence gathering capabilities and enhancing the effectiveness of criminal justice sectors to allow foreign governments to increase drug shipment interdictions, effectively investigate, prosecute, and convict major

narcotics criminals, and break up major drug trafficking organizations.

METHODOLOGY

INL receives appropriated foreign assistance funds from the International Narcotics Control and Law Enforcement (INCLE) account. In preparing the annual foreign assistance budget request, the Department allocates all funding according to the Foreign Assistance Standardized Program Structure. INL allocates INCLE resources to achieve Peace and Security and Governing Justly and Democratically program objectives. Within the Peace and Security objective, INCLE resources support Stabilization Operations and Security Sector Reform, Counternarcotics, and Transnational Crime program areas. INL scores as drug control everything that is allocated under the Counternarcotics program area.

BUDGET SUMMARY

In FY 2013, INL requests \$507.8 million for drug control efforts, which is a decrease of \$5.4 million from the FY 2012 enacted level of \$513.2 million. Major INCLE programs are described below.

Major Partner Nation Programs

Afghanistan

FY 2013 Request: \$160.4 million

(Reflects \$54.0 million increase over FY 2012)

Funded in the separate Overseas Contingency Operations (OCO) budget for extraordinary and temporary requirements associated with achieving key national security goals in Afghanistan, the FY 2013 drug funding request will support programs in the areas of supply reduction, interdiction, demand reduction, public awareness, capacity building, and aviation.

Specifically, programs will focus on building sustainable interdiction and law enforcement capacity by supporting the Drug Enforcement Administration (DEA) – mentored Counternarcotics Police of Afghanistan (CNPA) vetted units and their specialized teams through training, salary supplements, and technical areas such as electronic surveillance and intelligence analysis. Afghan government efforts to reduce the supply of illicit opium poppy and cannabis crops will also be enhanced through support for Afghan Governor-led eradication and the Good Performers Initiative. Afghanistan will also receive demand reduction support to eliminate the burgeoning domestic market for Afghan opiates through clinical services, mentoring programs, and village-based treatment. In addition, capacity-building efforts to strengthen the central government’s ability to independently support counternarcotics activities over the long term will also receive support. The Ministry of Counternarcotics (MCN) projects will continue to provide training and mentoring to MCN staff who administer INL-funded counternarcotics projects as the programs transition to full Afghan management.

FY 2013 Changes (+\$54.0 million): The majority of the increase in drug control funding in FY 2013 is attributed to increased requirements for support to the CNPA, in Kabul and the provinces, and the work of the DEA in Afghanistan. Additionally, the budget request reflects an increase in funding for the successful Good Performers Initiative, acknowledging its role in stabilizing poppy cultivation trends.

Bolivia

FY 2013 Drug Control Request: \$5.0 million
(Reflects \$2.5 million decrease from FY 2012)

The FY 2013 drug control request continues an accelerated transfer of costs associated with interdiction to the Government of Bolivia (GOB), while a full transfer of eradication program support is completed by the end of FY 2012. Program Development and Support Costs (PD&S) are needed to facilitate program downsizing, local personnel severance costs, and closing regional offices and warehouses. The remaining drug control program funds will focus extensively on law enforcement capacity building programs and support the criminal justice system capacity for the prosecution of narcotics-related cases. A significant portion of these funds will enhance the professionalism and capacity of the National Police through training programs.

FY 2013 Changes (-\$2.5 million): The FY 2013 drug control request will continue to cover essential program monitoring costs, including program staff salaries and some interdiction operations in high value target areas. Some requested funding will be used to advance drug prevention and treatment.

Brazil

FY 2013 Request: \$1.9 million
(Reflects \$1.0 million decrease from FY 2012)

The FY 2013 drug control request will provide continued training and equipment for the Government of Brazil's (GOB) intelligence-based interdiction efforts at seaports, international airports, and at strategic major transit points.

FY 2013 Changes (-\$1.0 million): The FY 2013 decrease is attributed to a broader

reduction of INCLE funding to Brazil as the Brazilian government commits greater resources to counternarcotics and crime prevention.

Caribbean Basin Security Initiative

FY 2013 Request: \$11.5 million
(Reflects \$6.3 million decrease from FY 2012)

The drug control request will continue efforts to combat the trafficking of drugs throughout the Caribbean Basin with support sustainable for law enforcement professionalization and capacity building, as well as interdiction operations. Regional projects focusing on information sharing – including digital fingerprint and ballistics data, anti-money laundering, demand reduction, border security, and the refurbishment of the Regional Security System's airborne maritime surveillance program – will continue.

FY 2013 Changes (-\$6.3 million): The FY 2013 drug control request will improve regional cooperation and capacity for drug interdiction and eradication that is critical to keeping pace with drug traffickers who seek to capitalize on weak institutions and porous borders. The decrease in counternarcotics funding is reflective of a focus shift towards capacity building for law enforcement personnel rather than on logistical support and equipment.

Central America Regional Security Initiative (CARSI)

FY 2013 Request: \$14.0 million
(Reflects \$4.8 million decrease from FY 2012)

The drug control request for Central America supports programs in Belize, Nicaragua, Guatemala, Panama, El Salvador, Costa Rica, and Honduras. CARSI provides assistance to these countries in a range of

areas, including direct law enforcement cooperation, assistance for law enforcement and justice sector capacity building, and prevention programs aimed at addressing the root causes of crime and violence. In the area of counternarcotics, funds will combat international drug trafficking in Central America. Support may include the continuation of successful DEA, U.S. Immigration and Customs Enforcement, and other vetted units; demand reduction programs such as Drug Abuse Resistance Education; assistance to combat the growing poppy cultivation in Guatemala; and regional land and maritime interdiction capabilities and logistics assistance.

FY 2013 Changes (-\$4.8 million): The decrease in counternarcotics funding in FY 2013 is attributed to the end of INCLE funding for the aviation program in Guatemala, as the 4-year program ended in FY 2012.

Central Asia

FY 2013 Drug Control Request: \$11.8 million (Reflects \$4.8 million increase over FY 2012)

The FY 2013 funding request includes support for the Central Asia Counternarcotics Initiative (CACI), as well as new bilateral counternarcotics funding for Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, and Uzbekistan. The CACI program will improve the ability of Central Asian countries to disrupt drug trafficking originating from Afghanistan and dismantle related criminal organizations through effective investigation, prosecution, and conviction of mid- to high-level traffickers. The focus of the programs will be regional cooperation and on the establishment of vetted investigative units/task forces that will serve as an impetus for further reform,

facilitate increased information sharing, and form a foundation for further institutional capacity building. Funds will also support the work of the United Nations Office on Drugs and Crime (UNODC) in the region and the Central Asia Regional Information and Coordination Center (CARICC) to promote regional drug intelligence collection, analysis, and sharing, as well as operational cooperation, including with Afghanistan. With the impending transition and withdrawal of the U.S. troops from Afghanistan, the need to address the drug trafficking problem at the regional level is crucial. The 2010 U.S. Counternarcotics Strategy for Afghanistan calls for enhanced regional and international community support for Afghan-led counternarcotics efforts, expanded United States counternarcotics engagement with Afghanistan's neighbors and regional actors, and strengthening counternarcotics cooperation between Afghanistan and neighboring countries.

FY 2013 Changes (+\$4.8 million): The increase in FY 2013 is attributed to new funding for bilateral counternarcotics projects in Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, and Uzbekistan, and support to DEA vetted units in select countries of the region.

Colombia

FY 2013 Request: \$114.0 million (Reflects \$16.4 million decrease from FY 2012)

The FY 2013 drug control request will continue support for the Government of Colombia's (GOC) implementation of its National Consolidation Plan. Under this program, military, counternarcotics, alternative development, and justice are being extended in a coordinated fashion to former conflict/remote areas where coca

production and trafficking remain impediments to state security and democratic development. Colombian-led interdiction and eradication programs will be utilized in many of these consolidation zones. Counternarcotics support will also continue to build the GOC's capacity to take over additional counternarcotics responsibilities.

FY 2013 Changes (-\$16.4 million): The decrease in the FY 2013 request is due to the expected successful transition of two U.S.-supported Colombian military programs in 2012 (Counterdrug Brigade and Colombian Army Aviation) to the GOC. Nationalization of further program components will continue in a sustainable manner.

Ecuador

FY 2013 Request: \$4.5 million
(Reflects no change from FY 2012)

The FY 2013 drug control request will support the Counternarcotics Police Directorate (DNA) port and canine operations; mobile anti-narcotics units that include modernizing detection equipment; provision of communications equipment; vehicle acquisition and maintenance; as well provide a port security advisor from U.S. Customs and Border Protection. Funds will also support improving the prosecution of criminal cases, particularly those related to narcotics trafficking and money laundering, as well as provide assistance for the implementation of the code of criminal procedures. Support for the military will build capacity to protect national territory against narcotics traffickers in areas of limited police presence, particularly along the Northern border with Colombia. Funds will also support demand reduction projects.

FY 2013 Changes (No change): The FY 2013 drug control request will continue support for its counternarcotics efforts.

Haiti

FY 2013 Request: \$1.4 million
(Reflects \$1.2 million decrease from FY 2012)
In partnership with the U.S. Coast Guard, FY 2013 drug control funding will advance post-earthquake efforts aimed at restoring and upgrading the logistical and maintenance capacity of the Haitian Coast Guard. A key initiative will be co-locating other Haitian National Police (HNP) units to increase Government of Haiti presence and improve operational results. Funds will provide technical assistance to the HNP Counternarcotics Unit (BLTS) to assist it in further developing the capability to effectively conduct and track operations and investigations. The BLTS currently has some officers vetted by DEA. Funds will be used to provide additional training and equipment to support the deployment of elements of both units throughout the country.

FY 2013 Changes (-\$1.2 million): The decrease in the FY 2013 drug control request is attributed to a completion of infrastructure projects aimed toward counternarcotics efforts. FY 2013 funding will focus solely on capacity building and training for the BLTS and Haitian Coast Guard.

Iraq

FY 2013 Request: \$1.0 million
(Reflects no change from FY 2012)
The FY 2013 drug control request will support continued training for, and technical development of, Iraqi drug demand prevention and treatment services.

Funds will also support the implementation of an Iraqi drug demand reduction strategy and the facilitation of epidemiological assessments of Iraqi substance abuse to identify and target areas of greatest need.

FY 2013 Changes (No change): The requested funding will continue addressing drug demand reduction efforts in the Iraqi region.

Mexico

FY 2013 Request: \$55.0 million
(Reflects \$12.0 million decrease from FY 2012)

The FY 2013 drug control request will continue supporting counternarcotics, law enforcement, and demand reduction programs to advance the goal of dismantling drug trafficking and other criminal organizations. Funding will also provide support for forensics laboratories and justice sector security, as well as prison reforms and prosecutorial capacity building. The Government of Mexico continues to invest its own resources in equipment and technology to confront transnational criminal organizations and protect its borders. The Demand Reduction program will have completed installation of an information technology networking infrastructure to connect drug referral centers across the country. In addition, the canine training and technical assistance program will become largely self-sufficient.

FY 2013 Changes (-\$12.0 million): The decrease in drug control funding reflects the maturation of programs that will become the responsibility of the Government of Mexico. Despite the decrease, a new effort to boost Mexico's southern border security will be funded in 2013.

Pakistan

FY 2013 Request: \$12.1 million
(Reflects \$1.1 million increase over FY 2012)

The FY 2013 drug control request will continue to support the Government of Pakistan's (GOP) efforts to decrease the trafficking, cultivation, and use of narcotics. In the area of crop control, INL's agricultural programs in Pakistan improve the economic potential of current and former poppy growing lands. FY 2013 funding will increase support for the cultivation of high-value, licit crops, farmer training courses, and construction of farmer-to-market roads with accompanying small scheme hydro-electric and irrigation projects. In the area of interdiction, funding will provide training, as well as administrative support, to Pakistan's counternarcotics law enforcement agencies. Operational support to law enforcement agencies, such as vehicular support, to increase their capacity to carry out counternarcotics missions, will also continue. Finally, FY 2013 demand reduction funding will allow INL to maintain existing support for residential and outpatient drug treatment facilities and continue to identify reputable centers to support.

FY 2013 Changes (+\$1.1 million): The FY 2013 increase in funding will build upon opportunities and initiatives presented by engaged civilian entities in Pakistan's counternarcotics sector.

Peru

FY 2013 Request: \$22.3 million
(Reflects \$5.9 million decrease from FY 2012)

The FY 2013 drug control request will continue to address increasing narcotics trafficking threats and assist the Government of Peru (GOP) by enhancing the capabilities of the Peruvian National

Police and that of the Anti-Narcotics Directorate to provide security for eradication teams and interdiction in coca cultivation and narcotics trafficking zones. Counternarcotics assistance will also help the GOP to publicize links between drug production and common crime so that Peruvians understand that their quality of life is degraded by drug trafficking. The GOP's current counternarcotics strategy coincides with U.S. goals, clearly linking interdiction and eradication with alternative development and prevention.

FY 2013 Changes (-\$5.9 million): The decrease in counternarcotics funding in FY 2013 is attributed to the transition from the traditional strategy of eradication and interdiction to capacity building in citizen security, including the police and justice sectors, as well as demand reduction.

West Africa

FY 2013 Request: \$14.1 million

(Reflects \$3.8 million decrease from FY 2012)

West Africa is facing a significant threat from transnational organized crime, as seen most prominently by the dramatic increase in drug trafficking through the region. Weak criminal justice institutions, corrupt government facilitators, and large territories not governed by state authorities have created an operating environment attractive to a variety of transnational criminal actors. Funding will be provided to build national counternarcotics capacities throughout West Africa by supporting programs that include the following but are not limited to: legal frameworks development; interdiction-investigation links being strengthened; investigative, prosecutorial, and adjudication capacity building for complex crime; legitimate

revenue generation enhancement; government accountability enhancement; network building that combat transnational crime; and drug demand reduction programs being created in West Africa.

FY 2013 Changes (-\$3.8 million): The FY 2013 drug control request will continue support efforts in West African partner nations.

Centrally-Managed Programs

Interregional Aviation Support (IAS)

FY 2013 Request: \$42.0 million

(Reflects \$8.4 million decrease from FY 2012)

The FY 2013 drug control request will support the IAS program which provides centralized core-level services necessary to operate the Air Wing's fleet of over 135 fixed- and rotary-wing aircrafts supporting INL's aviation activities worldwide. This base of support is essential for sustaining logistical systems, depot-level maintenance, and the safe and professional operational employment of INL air assets. Centrally-administered oversight includes: setting, implementing, and monitoring uniform safety and training standards consistent with aviation industry practices; a logistics support system for acquiring, storing, and shipping critical aviation parts and components worldwide; fleet-wide maintenance management; management of the Critical Flight Safety Program; and administration of the aviation support contract. INL aircraft are employed in Colombia, Bolivia, Peru, Guatemala, Afghanistan, and Pakistan, and are also available, as needed, to support other temporary deployment locations.

FY 2013 Changes (-\$8.4 million): The reduction of drug control funding in FY

2013 is due to reduced aviation requirements for Colombia related to ongoing nationalization efforts and reduced aviation needs in Bolivia. The reduced IAS amount also reflects the defraying of some central costs due to contributions from non-INCLE aviation programs recovered through the Aviation Working Capital Fund.

Critical Flight Safety Program (CFSP)

FY 2013 Request: \$8.2 million

(Reflects \$0.6 million decrease from FY 2012)

The drug control request will support the modernization of the INL air fleet and provide subsequent ongoing life cycle fleet management (life cycle analysis, safety upgrades, and programmed depot-level maintenance). The program was established to address the declining condition of aged aircrafts (primarily former military aircrafts for which there was no commercial or military support available) in order to ensure safety and airworthiness, extend service life, and maximize reliability and availability of aircraft to perform essential missions.

FY 2013 Changes (-\$0.6 million): The decrease in CFSP funding for counternarcotics-related aircrafts results from a larger percentage of total CFSP funds being used to support the portion of the fleet that is associated with rule of law, law enforcement, and border control programs.

Drug Awareness and Demand Reduction

FY 2013 Request: \$12.5 million

(Reflects no change from FY 2012)

The drug control request supports the U.S. foreign policy priority of reducing drug use, crime and related violence that threatens our national security and hinders the

economic development, political stability, and security in emerging democracies and developing countries. Unprecedented child drug addiction and lack of services to target rising drug addiction among women pose challenging public health threats to selected regions worldwide. The FY 2013 request will give particular attention to the heroin threat and addiction problems in Southwest Asia (home of the world's largest addiction rates), the plethora of unlicensed treatment facilities in Latin America, the drug-related HIV/AIDS epidemics in Southeast Asia and Africa, the crack cocaine threat in the Southern Cone, the drug addiction/criminal gang overlap in Central America, the shortage of treatment facilities for addicted women and children worldwide, and the dearth of prevention/treatment services in Africa.

FY 2013 Changes (No change): The FY 2013 request continues to support treatment efforts and a prevention outreach campaign that will enhance accessibility and will increase public awareness through its unique means of dissemination.

International Organizations

FY 2013 Request: \$3.4 million

(Reflects \$0.5 million decrease from FY 2012)

The drug control request will support the UN Office for Drugs and Crime (UNODC) and the Organization of American States/Inter-American Drug Abuse Control Commission (OAS/CICAD). These programs strengthen foreign governments' judicial and law enforcement capacity to attack drug trafficking and transnational crime groups directly, disrupting their organizations, arresting their leaders, and seizing their assets. Programs also promote compliance with the international drug control treaties

and enhance international cooperation among states, helping close off safe havens to traffickers and other crime groups.

FY 2013 Changes (-\$0.5 million): The FY 2012 request included funding for meetings of the G8 Roma Lyon Group, which the United States is hosting in FY 2012. The FY 2013 request represents a reduction from FY 2012 since no additional funding in FY 2013 is needed for these meetings.

PERFORMANCE

This section on the FY 2011 performance of the State Department programs is based on data reported in each U.S. embassy's 2011 Performance Plan and Report (PPR), as

entered into the Foreign Affairs Coordination and Tracking System (FACTS-II). This information is then verified through year-end host-nation reporting and U.S. embassy reports for the 2012 International Narcotics Control Strategy Report (INCSR). The data provides a detailed picture of actual seizures, eradication, and coca cultivation in the Western Hemisphere and around the world for Calendar Year 2011.

The table below includes selected program measures with targets and achievements for the latest year for which data are available for the Western Hemisphere, Asia (Laos), Afghanistan, and for Demand Reduction efforts.

Bureau of International Narcotics and Law Enforcement Affairs		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
Andean Programs		
» Number of Hectares of coca eradicated in Bolivia, Colombia and Peru	115,200	157,691
International Narcotics and Law Enforcement		
» Number of Hectares of illicit opium poppy cultivated in Laos	<1,000	4,100
» Kilos of illicit narcotics seized by host governments in USG-assisted areas in the Western Hemisphere	78,880*	83,860
Assistance to Rebuilding Countries		
» Reduce cultivation of opium poppy in Afghanistan by having provinces becoming either a poppy free province (PFP) or poppy reducing province (PRC)	27 total of PFP and PRC	21 total of PFP and PRC
Demand Reduction		
» Percentage of target population that have not used drugs after treatment.	40%	46-89%**

*The "FY 2011 Target" and achieved figures are from FACTS-Info entries into the PPR (November 2011) and combine all drugs (cocaine, heroin, methamphetamine, and cannabis) seized. Please note that this does not reflect all drug seizures are normally reported on a Calendar Year basis, and not all countries reported their seizures in the report.

**The 46-89% range is based on country reporting from Colombia, Thailand, and Vietnam.

Discussion

Andean Programs

The long-term goal of U.S. supported Andean Programs is to reduce the flow of drugs to the United States, address instability in the Andean region and strengthen the ability of both source and transit countries to investigate and prosecute major drug trafficking organizations and their leaders and to block and seize their assets. Among other efforts, INL accomplishes this through aerial eradication, forced and voluntary manual eradication, increasing capabilities for drug interdiction, reducing demand for illicit drugs and strengthening rule of law and alternative livelihood efforts.

Eradication is a critical component of the U.S. government's counternarcotics strategy in the Andean region but is not the only metric used in determining success. Eradication data are aggregated by calendar year rather than by fiscal year. The 2011 target was for eradication of 115,200 hectares in Bolivia, Colombia, and Peru. In 2011, the Department supported efforts that eradicated over 157,691 hectares through aerial and manual eradication techniques. Bolivia eradicated 10,601 hectares, Colombia eradicated 136,800 hectares and Peru eradicated 10,290 hectares.

The Colombian Government's capability to conduct interdiction continues to increase; for calendar year 2011 the Government of Colombia reports seizures of a total of 186 MT of cocaine and cocaine base, 69,000 kilos of Marijuana, 360 kilograms (kg) of heroin and approximately 1 million gallons of liquid and 9.2 million kilos of solid precursor chemicals. In addition, they destroyed 190 cocaine hydrochloride (HCL)

labs, 2,283 coca base labs, 2 heroin labs, and 3 potassium permanganate labs.

The Government of Peru (GOP) reported that by the end of September 2011, approximately 10.2 MT of cocaine paste and 6.8 MT of cocaine hydrochloride (HCL) had been seized. The GOP also reported the seizure of 2.7 MT of marijuana and the destruction of 133 MT of marijuana plants. In addition, the Peruvian National Police Anti-Narcotics Directorate (DIRANDRO) destroyed 1,126 cocaine laboratories, including 15 HCL and 1,111 base laboratories in the Upper Huallaga Valley and the Apurimac and Ene River Valley.

As of the end of November 2011, the Government of Bolivia reported that they had seized 26.3 MT of cocaine base, 5 MT of cocaine HCL and 580 MT of coca leaf. They also reported seizing more than 700 MT of solid precursor chemicals and nearly 650,000 gallons of liquid precursors. Meanwhile, during the period, they dismantled 4,946 coca base labs, 21 HCL labs and 19 labs for the recycling of chemicals.

International Narcotics and Law Enforcement

Other efforts in the Western Hemisphere include the Mérida Initiative in Mexico the Central America Regional Security Initiative (CARSI), and the new Caribbean Basin Security Initiative. USG programs target the criminal organizations that profit from illicit narcotics trafficking.

In 2011, the Government of Mexico seized 6 metric tons (MT) of cocaine, 909 MT of marijuana, 93 kilograms (kg) of opium gum, 268 kg of heroin, and 13 MT of

methamphetamine, eradicated 7,478 hectares (ha) of marijuana and 4,124 ha of poppy, and dismantled 137 drug-processing labs. Additionally, Mexican law enforcement arrested 10,979 Mexican nationals and 218 foreigners on drug-related charges, including 22 high-profile drug traffickers.

The long-term goal of the INCLE program in Southeast Asia is to remove all countries receiving U.S. assistance from the List of Major Drug Producing and Drug Transit Nations. The United States goal is to remove Laos from the President's list of major illicit drug producing countries once opium poppy cultivation is estimated by the U.S. government as less than 1,000 hectares. In 2011, Laos opium poppy cultivation was 4,100 hectares according to the UN's estimates.

The U.S. continues to focus on alternative development programs and law enforcement development to support Lao efforts to reduce opium cultivation.

Assistance to Rebuilding Countries

The purpose of the counternarcotics program in Afghanistan is to reduce opium poppy cultivation in order to create stability in Afghanistan and prevent it from becoming a narco-state controlled by insurgents. The FY 2011 target of the program was to have 27 of Afghanistan's 34 provinces designated as poppy-free provinces (PFP) or provinces reducing cultivation (PRC). In results reported in September 2011 by the U.N., the number of poppy-free provinces in Afghanistan decreased from 20 in 2010 to 17 in 2011 as Baghlan and Faryab provinces in the Northern region and Kapisa province in the Eastern region lost their poppy-free status.

Four other provinces made progress in reducing cultivation, including Helmand in the Southern Region, where nearly half of Afghanistan's poppies are cultivated. This brought the number of PFP and PRC countries to 21.

The United Nations Office of Drugs and Crime (UNODC) estimates that Afghanistan cultivated 131,000 hectares of opium poppy in 2011, a seven percent increase in cultivation from 2010, due in part to a significant increase in the price following a poppy blight the previous year. UNODC also estimates that Afghan opium poppy crops increased from 3,600 metric tons (MT) of raw opium in 2010 to 5,800 MT in 2011, a 60 percent increase, due to the ending of a blight that had affected high cultivation provinces.

Demand Reduction

Demand Reduction support continues to be an important part of the counternarcotics programs worldwide with particular emphasis in Afghanistan and Mexico.

The United States supported 25 drug prevention programs in FY 2011 resulting in creating/supporting 54 drug-free community coalitions located in Brazil, Colombia, Guatemala, Mexico, and Peru. The target of 40 percent of the target population that have not used drugs after treatment in countries where the U.S. is supporting demand reduction programs, ranged from 46-89 percent in Colombia, Thailand, and Vietnam.

In El Salvador, which was selected for evaluation in FY 2011, the percentage of the target population that has not used highly addictive drugs after treatment was 68 percent. For individual drug categories,

reductions were noted for cocaine HCl (80%), crack cocaine (76%), marijuana (70%), inhalants (60%), and tranquilizers (50%).

In Afghanistan, drug consumption represents one of the greatest threats to the future of Afghanistan. Addressing drug use in Afghanistan serves a counter-insurgency mission by denying revenue to the insurgents and safeguarding a vulnerable segment of the population that is prone to exploitation. Drug demand reduction programs also rescue the vital human capital that will be needed to build a self-sustained public and private sector for generations to come. An outcome evaluation for the Afghanistan demand reduction program will measure effectiveness of treatment (clients who are drug free 1 year post-treatment).

In FY 2011, the United States supported 29 residential drug treatment centers in Afghanistan, making it the largest contributor to drug treatment services in Afghanistan (nearly three-quarters of all centers). Of the 29 centers, 14 treat adult males, 6 treat adult females, 6 treat children, 2 treat adolescent males, and 1 treats adolescent females.

In Mexico, long-standing bilateral efforts with the United States to make progress in demand reduction continued. In FY2011 the 9th U.S. – Mexico Bi-national Drug Demand Reduction Policy Meeting was held in Mexico City. In compliance with instructions from the U.S.-Mexico High-Level Group, drug consumption patterns in both nations were reviewed, with an emphasis on usage in border communities. A proposal was put forth and accepted to conduct a bi-national study of

the nature of drug abuse along the border, and assess the impact of counter-drug programs. Panel presentations and discussions at this year's meeting focused on enhancing strategies to: (1) improve ways to strengthen youth anti-drug beliefs; (2) strengthen coordination among multiple community partners to create integrated communities; and (3) advance alternatives to incarceration for drug-using offenders. The meeting concluded with adoption of a proposal to formalize a system to continually monitor and report on the demand reduction initiatives underway in the both nations.

As partners implementing the Merida Initiative, Mexico and the United States are cooperatively promoting clinical trials, certification and training for drug addiction counselors, and community coalition formation, including innovative method for addressing alternative to incarceration through a drug treatment court, a pilot program in Monterrey, Mexico, through its Action Program for Prevention and Treatment of Addictions, is implementing its own national policy. Mexico is strengthening infrastructure to offer treatment of problems related to the use of psychoactive substances for individuals and their families; as well as emphasizing prevention thorough broad participation of public, social and private entities.

In 2011, the office of First Lady Zavala of Mexico commissioned the formulation and distribution of a questionnaire and information packet on drug abuse and related behaviors for any concerned family member or friend of at-risk individuals. This *Tool Kit* is widely available in Nueva Vida and other health centers.

The U.S. maintains a strong, long-standing bilateral relationship with Mexico on demand reduction. The two countries are working closely to implement programs that are aimed to improve and standardize the professional standards of drug treatments, scientific research, and training of diagnostic and treatment professionals in addition to other activities.

Merida has provided assistance to the Mexican National Institute of Psychiatry and University of Miami to establish a joint clinical trials network (CTN). This program connects Mexican scientific institutions to their counterparts in the U.S. to expand their research capacity and stand up a national clinical trials network that will help to standardize evaluations of drug abuse treatments in Mexico.

Through Merida, Centros de Integración Juvenil (CIJ), a primary care provider for drug addicted youths, has opened a pilot inpatient treatment center in Ciudad Juárez, a model that CIJ hopes to replicate across the U.S.-Mexico border.

INL is also supporting community coalition building – bringing together parents, teachers, clergy, coaches, and others to raise drug abuse awareness – in Ciudad Juárez, Tijuana, and Nogales.

Through a pilot project, INL has placed extensive drug rehabilitation and therapy services in select state prisons, which are in desperate need of such services. This presidential priority seeks to break the cycle of addictions while individuals are incarcerated, thus reducing the likelihood of recidivism.

The U.S. also supports an alternative to incarceration for drug related crimes through training and professional exchanges of staff in Mexico's first, pilot drug court in Monterrey, Nuevo Leon. INL plans to support a program offering robust training for all interested Mexican cities and municipalities in replicating this model court.

In the final quarter of 2011, the Organization of American States' Inter-American Drug Abuse Control Commission (CICAD) selected 600 new drug counselors to participate in a training of trainers using a standardized curriculum developed by CICAD.

DEPARTMENT OF STATE
United States Agency for International Development

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
International	\$198.645	\$283.304	\$179.071
Total Drug Resources by Function	\$198.645	\$283.304	\$179.071
Drug Resources by Decision Unit			
Developmental Assistance Account	\$29.984	\$43.089	\$29.438
Economic Support Fund	168.661	240.215	149.633
Total Drug Resources by Decision Unit	\$198.645	\$283.304	\$179.071
Drug Resources Personnel Summary			
Total FTEs (direct only)	14	14	14
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$8.5	\$8.3	\$8.4
Drug Resources Percentage	2.4%	3.4%	2.1%

Program Summary

MISSION

The United States Agency for International Development (USAID) is the U.S. government agency responsible for most of the U.S. government's economic and development foreign assistance. It receives overall foreign policy guidance from the U.S. Secretary of State. USAID advances U.S. foreign policy objectives by supporting economic growth, agriculture and trade, health, democracy, conflict prevention, and humanitarian assistance. USAID's Alternative Development (AD) programs support U.S. counternarcotics objectives by helping countries develop economic alternatives to narcotics production. Specifically, USAID implements alternative livelihoods programs that focus on licit job

creation, improving commercial agricultural production and market linkages in drug production-prone areas, and offering farmers incentives to discontinue planting poppy and other illicit crops. USAID also works to improve transportation systems, develop agricultural processing facilities and storage networks, and expand irrigation in targeted areas to create and grow a viable agri-business industry.

METHODOLOGY

USAID receives appropriated foreign assistance funds from the Economic Support Fund and Development Assistance accounts. In preparing the annual foreign assistance budget request, the Department allocates all funding according to the

Foreign Assistance Standardized Program Structure.

BUDGET SUMMARY

The FY 2013 request for drug control efforts at the Department of State, U.S. Agency for International Development is \$179.1 million, a decrease of \$104.2 million from the FY 2012 enacted level of \$283.3 million. All of USAID's FY 2013 drug control funding is requested under the Economic Support Fund and Development Assistance accounts.

Economic Support Funds – Afghanistan

**FY 2013 Request: \$65.0 million
(Reflects \$81.5 million decrease from FY 2012)**

Promoting alternative livelihoods as part of a comprehensive counternarcotics strategy remains an important objective of U.S. agricultural assistance in Afghanistan. In FY 2013, USAID programs will continue to focus on reducing illegal crop production through alternative livelihoods programs that improve economic opportunities in rural areas, expand the range of licit choices available to Afghan farmers, and reduce dependency on illicit opium production. Programs will focus on increasing productivity for food security and targeted value chain development in order to promote licit income generation and incentivize the longer-term, sustainable transition of farmers to licit crop production. USAID will also target other factors that constrain the implementation of licit agricultural production, by repairing damaged irrigation systems and supporting higher-yield licit crops, for example. USAID will encourage a shift to high-value tree and trellis crops to foster permanent migration away from poppy. To undercut the opium marketing advantage, USAID programs will

also foster alternative market linkages in poppy-prone areas and enhance links among farmers, traders, and buyers for licit crops.

FY 2013 Changes (-\$81.5 million):

USAID has shifted away from stabilization- and staple crop-focused alternative development programs to those programs that more closely integrate stabilization, alternative development, and market-led agricultural development objectives in support of our transition strategy. These programs place greater focus on high value crops and sustained agricultural growth, as well as support to government institutions (e.g. the Ministry of Agriculture, Irrigation, and Livestock) to build upon and sustain progress to date.

Economic Support Funds and Development Assistance Funds – Andean Region

**FY 2013 Request: \$114.1 million
(Reflects \$22.7 million decrease from FY 2012)**

Colombia and the Andean Region remain the focus of State's efforts to disrupt the market for illegal drugs because it is the source of more than 90 percent of cocaine and about half of the heroin entering the United States. USAID administers the Economic Support Fund in Colombia and the Development Assistance Fund in Ecuador and Peru as sources of funding for alternative development projects and aid in the Andean Region. These resources support projects to advance the development of legitimate crops, legal enterprises, and licit employment opportunities in lieu of illicit activities. Alternative development funds also strengthen state institutions, support

construction of productive and social infrastructure, expand state presence, and strengthen community resolve to resist drug trafficking activities.

FY 2013 Changes (-\$22.7 million):

Decreased funding for Ecuador and Peru in the FY 2013 request reflects increasing budget constraints for foreign assistance programs within Latin America and prioritization to address citizen security concerns associated with narcotics trafficking in Mexico and the Northern Triangle of Central America. The reduction in Colombia’s funding for

alternative development efforts reflects the success of Plan Colombia and the ability of the Colombia government to support many alternative development programs themselves.

PERFORMANCE

This section on the FY 2011 performance for USAID is based on data reported in each U.S. embassy’s 2011 Performance Plan and Report (PPR), as entered into the Foreign Affairs Coordination and Tracking System (FACTS-II) and other program information.

United States Agency for International Development		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Number of jobs created (agricultural and non-agricultural) in USAID-assisted areas in the Andean Region	41,200	41,212
» Number of families benefiting from alternative development activities in the Andean region	64,700	67,398
» Increased sales of licit farm and non-farm products in the Andean region*	\$37,000,000	\$68,524,811
» Hectares of licit agricultural crops developed or expanded in areas receiving USAID assistance in Afghanistan	14,736	58,802
» Number of new direct jobs created (agricultural and non-agricultural) in USAID-assisted areas in Afghanistan (annual)	48,584	63,198
» Increase in sales of licit farm and non-farm products in USAID-target areas of Afghanistan over previous year (in millions USD)	3,650,000	56,517,921
» Number of rural households benefiting directly from USAID interventions in Afghanistan	200,864	707,944

* This data corresponds to country programs in Bolivia and Peru. The other two Andean Region country programs, in Colombia and Ecuador, do not collect data for this indicator.

Discussion

Bolivia

USAID’s AD program continued to successfully provide support to help diversify the economies of Bolivia’s coca growing regions, reduce communities’ dependency on coca, and provide important incentives for producers and communities to cooperate with the

Government of Bolivia’s (GOB) voluntary coca eradication program. Most AD assistance in Bolivia takes place in the Yungas, a forested region on the eastern slopes of the Andes in the department of La Paz in accordance with the GOB’s coca control plans. In total, approximately 30,100 families benefited directly from AD

assistance. In FY 2011, U.S. assistance helped introduce, establish or rehabilitate nearly 3,000 hectares of crops, including coffee, cocoa and banana. Support for farm communities and businesses helped to generate 2,000 new jobs and \$12.5 million in sales of AD products.

Colombia

USAID's top priority within Colombia is continued support of the Colombian government's National Consolidation Plan, which seeks to marginalize the influence and control of criminal gangs and terrorist organizations, and create more viable options for citizens in the licit economy. USAID provided alternative livelihoods and worked to strengthen the government's capacity to provide government services at municipal levels in support of consolidation. USAID supported 16 producer associations, and implemented alternative livelihood activities that benefited 5,000 additional families. The USG continued providing technical assistance to agriculture producer beneficiaries and implemented 11 new social and productive infrastructure projects.

USAID helped build capacity within local communities to mobilize resources and address self-determined priority needs in the conflict-afflicted region of Montes de Maria which helped lead to local governments supporting 25 rapid impact projects, totaling over \$460,000. USAID also completed analyses on 7 economic value chains, and the findings for three of these products (honey, cassava and cacao) have been utilized to date to successfully improve coordination and market information. Improved land ownership is a cornerstone to improving consolidation. USAID worked with four priority

municipalities to update data information systems on land formalization, restitution and legalization which indirectly benefited 11,000 families.

USAID's Specialty Coffee Program provided rural families with licit economic opportunities, concentrating on indigenous communities in the Sierra Nevada region. The program finalized 44 projects and began implementation of 10 new ones, including value chain development of the specialty coffee sector. During FY 2011, two-thirds of specialty coffee activities were implemented in coordination with the GOC, which contributed almost half of the programming costs. Approximately \$21 million in public and private funds have been leveraged for these activities.

Ecuador

AD programs in Ecuador financed the construction of 42 infrastructure projects, benefiting 34,530 people. Water and sanitation systems contributed to satisfying basic needs of the population, while irrigation canals, bridges and improved roads helped increased income for families by extending growing seasons, increasing yields, and improving access to markets. A health education hand-washing component has been adopted by the Ministry of Housing and Urban Development to be replicated throughout the country.

USAID also supported AD in the agricultural sector. Through 23 affiliated anchor firms, USAID provided training to 6,176 families, added 7,027 hectares of licit crop production, and created 3,402 full-time-equivalent jobs. The program fostered increased yields, which have resulted in higher income for participant families and contributed to overall poverty reduction

along the northern border of Ecuador. AD projects have also leveraged over \$10 million in private and public sector investments, both as direct inputs to USAID programs and as complementary investments.

In addition, through its alternative development program USAID implemented two projects to teach peaceful reconciliation techniques to foster stability and security. USAID established 16 reconciliation centers, trained 1,886 people in conflict transformation skills, and reached an additional 7,466 persons through beneficiaries' replication of USAID's training. These projects have been successful in establishing effective government partnerships with schools and with municipal youth services offices.

Peru

In FY 2011, USAID worked with Peruvian farmers and their associations, the private sector, and the GOP to strengthen value chains for cacao, palm oil, and coffee. AD activities benefited 22,635 families in such communities, consolidating earlier achievements in San Martín and expanding the model to new areas in the Huánuco and Ucayali regions. In FY 2011, USAID provided assistance to a total of 18,913 farmers to maintain 37,461 hectares of licit crops, including 7,654 newly established hectares of licit crops, mostly cacao. An additional 3,722 producers received \$8.5 million in USAID-guaranteed loans, for a total of 22,635 families directly benefiting from USG assistance.

Sales from Peruvian farmers directly assisted by USAID amounted to \$56 million at farm-gate price, generating 16,399 equivalent full-time jobs in FY 2011, 18

percent of which are held by women. USAID supported 32 cooperatives and producers' associations, which involved a broader farmer group and achieved \$72.4 million in total sales in the same period. USAID also worked with the private sector to increase the viability of licit agricultural products.

One of USAID's principal successes this year was to begin to shift the burden of responsibility for the provision of licit livelihoods to the GOP, the private sector, and community groups. USAID helped develop regional and municipal government capacity to finance and manage local infrastructure and basic social services. USAID also successfully leveraged \$8,523,317 in accrued public investment in FY 2011, most of it representing co-investments for infrastructure and agricultural projects. On the national policy side, USAID provided technical assistance to GOP institutions, in particular the National Commission for Development and Life without Drugs (DEVIDA), to effectively manage the GOP's national counter-narcotics and AD policy.

Afghanistan

In FY 2011, USG alternative development programs in Afghanistan continued to focus on licit income generation and job creation by improving commercial agriculture, specifically in poppy production-prone areas. In FY 2011, 58,802 hectares of licit alternative crops targeted by USG programs were under cultivation in Afghanistan, exceeding the 14,736 targeted. The number of new direct jobs (measured as full-time equivalent) created by USG-sponsored alternative development totaled 63,198, exceeding the targeted 48,584.

At the programmatic level, the Incentives Driving Economic Alternatives for the North, East, and West (IDEA-NEW) program provided over 121,000 farmers in poppy-prone areas with agricultural productivity and/or business skills training. In poppy-prone eastern provinces, IDEA-NEW provided assistance to targeted farmers to cultivate permanent alternative crops, such as fruit and nut saplings, high value vegetable seeds, alfalfa (fodder) seeds, trellis posts, and fertilizer. During FY 2011, close to 298,219 families benefited from IDEA-NEW interventions in 14 provinces and 12,362 full time equivalent jobs were created.

To date, the Commercial Horticulture Agriculture Marketing Program (CHAMP) program has supported 8,117 farmers in targeted areas and contributed to the cultivation of an additional 2,317 hectares of alternative crops. The Afghanistan Vouchers for Increased Productive Agriculture Plus (AVIPA Plus) program also contributed to crop diversification in FY 2011 by distributing horticultural seeds through 250,000 vouchers in Helmand and Kandahar, Afghanistan's two highest poppy-producing provinces. Agricultural programs such as the Agricultural Development Fund (ADF) and Afghanistan Farm Service Alliance (AFSA) complemented alternative development objectives by providing farmers with needed agricultural credit and market and technical information.

In collaboration with the UK and Danish Governments and the Helmand Provincial Reconstruction Team, USAID supported the planning and funding of the Helmand Food Zone (HFZ) program, which combined efforts in alternative livelihood assistance, security, government-led eradication, and

education to combat poppy production. In FY 2011, the HFZ saw a more than 30 percent decline in poppy production. These efforts reinforced stability by providing economically viable alternatives and livelihoods incentives to reduce poppy cultivation, thereby minimizing revenues that go to anti-government elements while providing the base for a sustainable licit rural economy.

DEPARTMENT OF THE TREASURY



DEPARTMENT OF THE TREASURY

Internal Revenue Service

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Investigations	\$60.136	\$60.257	\$60.602
Total Drug Resources by Function	\$60.136	\$60.257	\$60.602
Drug Resources by Decision Unit			
Criminal Investigations	\$60.136	\$60.257	\$60.602
Total Drug Resources by Decision Unit	\$60.136	\$60.257	\$60.602
Drug Resources Personnel Summary			
Total FTEs (direct only)	329	329	329
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$12.1	\$11.8	\$12.8
Drug Resources Percentage	0.5%	0.5%	0.5%

Program Summary

MISSION

The mission of the Criminal Investigation (CI) is to reduce or eliminate the financial gains of major narcotics trafficking and money laundering organizations using unique financial investigative expertise and statutory jurisdiction. These efforts support the goals of the President's *National Drug Control Strategy* and the *National Money Laundering Strategy*.

CI supports the overall Internal Revenue Service (IRS) mission by investigating criminal violations under its jurisdiction through three programs: the Legal Income Source Program, the Illegal Income Source Program, and the Narcotics Program. The Narcotics Program supports the *National Drug Control Strategy* and the *National*

Money Laundering Strategy through continued support of multi-agency task forces including Organized Crime Drug Enforcement Task Force (OCDETF), the OCDETF Fusion Center (OFC), High Intensity Drug Trafficking Area (HIDTA), and the High Risk Money Laundering and Financial Crimes Areas (HIFCA).

METHODOLOGY

The Narcotics Program's drug control funding is calculated by the share of FTEs performing counterdrug efforts against the entire IRS CI budget request.

BUDGET SUMMARY

The IRS drug control budget request for FY 2013 is \$60.6 million, an increase of \$0.3 million over the FY 2012 enacted level.

Criminal Investigations

Total FY 2013 Request: \$60.6 million
(Reflects \$0.3 million increase from FY 2012)

CI plays an intricate role in reducing and disrupting the supply of illegal drugs. The criminal provisions of the Internal Revenue Code (Title 26), the Bank Secrecy Act (Title 31), and the Money Laundering Control Act are particularly useful in the financial investigations (and prosecution) of major narcotics traffickers and money launderers, as well as the seizure and forfeiture of their profits. CI is a participating member of the OCDETF Program and primarily focuses on those sophisticated cases that meet OCDETF designation standards. CI maximizes the use of its resources while making a significant contribution to many investigations.

With the globalization of the U.S. economy and the increasing use of electronic funds transfers, investigations have become more international in scope. CI's international

strategy places special agents in strategic foreign posts to facilitate the development and use of information obtained in host nations in support of its investigations. Such information is especially crucial to the success of high level narcotics and money laundering investigations.

FY 2013 Changes (+\$0.3 million): The IRS will continue to support investigations of illegal activities, including narcotics trafficking and money laundering. The budget request maintains the FY 2012 current level, adjusted for pay and non-pay inflation.

PERFORMANCE

The FY 2011 performance information for the IRS CI OCDETF program is based on agency GPRA documents and other agency information.

IRS Criminal Investigations		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
» Number of investigations completed for OCDETF cases	680	927
» Number of Convictions	410	435
» Conviction Rate*	85%	88%

* The conviction rate is the percent of adjudicated criminal cases that result in convictions.

Discussion

IRS CI supports the President's *National Drug Control Strategy* by dedicating investigative resources towards narcotics related crimes and the OCDETF Program. Significant accomplishments during FY 2011 include the successful investigation and conviction of defendants on a variety of drug, money laundering and tax evasion

charges: below are examples of significant cases regarding narcotics and related financed money laundering.

After pleading guilty, on January 12, 2011, in Eugene, OR, a defendant was sentenced to 24 months in prison for conspiracy to manufacture and distribute marijuana, psilocybin mushrooms, and ecstasy, and for

laundering money and structuring currency transactions. The defendant laundered more than \$700,000 of the proceeds in numerous financial transactions and structured more than \$32,000 in currency transactions to evade financial institution reporting requirements.

\$38 million from the sale of methamphetamine.

On July 13, 2011, in Hillsboro, OR, a defendant was sentenced in Federal court to 30 months for conspiracy to manufacture, distribute, and possess with the intent to distribute more than 1,000 kilograms of marijuana. The defendant's role in the Kent Jones Drug Trafficking Organization was to transport marijuana in quantities between 100 and 250 pounds from Southern California to other states, including Oregon, Kentucky, New York, New Jersey, and Pennsylvania. The Jones Organization, identified as a Regional Priority Target (RPOT) by the Federal Organized Crime and Drug Enforcement Task Force (OCDETF), operated throughout the United States, importing drugs from Mexico and Southern California.

On August 4, 2011 in Portland OR, the last of five defendants involved in smuggling large quantities of ephedrine from India into the United States, was sentenced to 54 months in prison. All five defendants were convicted of conspiracy to illegally import and distribute ephedrine, and two were convicted of conspiracy to commit money laundering. Ephedrine is the main precursor chemical necessary for the production of the controlled substance methamphetamine. Law enforcement officials conservatively estimated that the ephedrine shipments would produce at least 2,500 pounds of pure ephedrine, 1,250 pounds of pure methamphetamine, and a gross profit between \$20 million and

DEPARTMENT OF TRANSPORTATION



DEPARTMENT OF TRANSPORTATION
Federal Aviation Administration

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Intelligence	\$9.800	\$10.250	\$10.330
Investigations	0.800	0.820	0.820
Prevention	16.270	16.600	16.600
State and Local Assistance	1.010	1.010	1.020
Total Drug Resources by Function	\$27.880	\$28.680	\$28.770
Drug Resources by Decision Unit			
Air Traffic Organization	\$8.790	\$9.240	\$9.310
Aviation Safety/Aerospace Medicine	17.070	17.420	17.420
Security & Hazardous Materials	2.020	2.020	2.040
Total Drug Resources by Decision Unit	\$27.880	\$28.680	\$28.770
Drug Resources Personnel Summary			
Total FTEs (direct only)	166	166	166
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$15.925	\$15.902	\$15.171
Drug Resources Percentage	0.18%	0.18%	0.19%

Program Summary

MISSION

The mission of the Federal Aviation Administration (FAA) is to provide the safest, most efficient aerospace system in the world. The Air Traffic Organization (ATO) monitors the Air Defense Identification Zone (ADIZ), an area of airspace within which the identification, location, and control of aircrafts is required in the interest of national security. The Office of Aerospace Medicine (AAM) supports drug-related activities within the FAA and in the Aviation Industry through its mission to reduce drug use and its consequences throughout the national

aerospace. The Office of Security and Hazardous Materials' (ASH) Law Enforcement Assistance Program (LEAP) provides an extensive support function that includes technical and administrative assistance on a timely and continuous basis to all Federal, state, and local law enforcement agencies (LEA) engaged in drug interdiction efforts.

METHODOLOGY

There are no single identifiable line items within the ATO, AAM, or ASH appropriations that fund drug control efforts. The ATO drug funding is

determined by estimating the costs associated with the time air traffic controllers spend on drug interdiction activities. All AAM operations, capital improvements and acquisitions, and program training activities are funded out of the associated appropriations as part of operation costs. The drug-scored ASH funding is an estimate of support provided to law enforcement agencies, and to assist law enforcement in the interdiction of dangerous drugs and narcotics into the United States.

BUDGET SUMMARY

In FY 2013, the request for drug-related efforts performed by FAA is \$28.8 million, an increase of \$0.1 million over the FY 2012 enacted level.

Air Traffic Organization (ATO)

**Total FY 2013 Request: \$9.3 million
(Reflects \$0.1 million increase over FY 2012)**

Air traffic controllers that staff the Air Route Traffic Control Centers (ARTCCs) monitor the ADIZ to detect possible suspicious aircraft movement. When suspicious movement is identified, ARTCC staff notifies the Drug Enforcement Administration (DEA) and U.S. Coast Guard (USCG) of such activity. When FAA receives confirmation of suspicious aircraft movement from the DEA and USCG, controllers support interdiction efforts by providing radar vectors to track the time of arrival, traffic advisory information, and last known positions to intercept aircrafts of interest. ARTCC staff supports DEA and USCG in preplanned interdiction efforts through the establishment of temporary flight restriction areas, which is often on a real-time basis. ATO also supports DEA and USCG during training exercises.

FY 2013 Changes (+\$0.1 million): The FY 2013 request will continue to support air traffic controllers in their efforts to monitor airspace to maintain national security.

Aerospace Medicine (AAM)

**Total FY 2013 Request: \$17.4 million
(Reflects no change from FY 2012)**

The AAM Aviation Industry Program mandates the implementation of the FAA's drug testing regulation (14 CFR part 120), requiring employers (i.e., air carriers, air traffic control towers, and air tour operators) to drug test their employees working directly or by contract (including subcontract at any tier) in a safety-sensitive position. These positions include flight crew, flight attendants, flight instructors, maintenance or preventive maintenance, air traffic controllers, aviation screeners, ground security coordinators, and aircraft dispatchers.

AAM's Industry Program Office conducts inspections of employer programs and investigations of airmen or employee violations. The positions and associated funding are required to ensure that compliance efforts continue, primarily in the form of conducting onsite inspections and/or investigations of employees and employers, as well as analyzing statistical testing reports submitted by the air carriers and contractors.

The AAM Internal FAA Program is responsible for randomly testing employees in positions characterized as "Testing Designated Positions" (TDP), safety/security critical for drug and/or alcohol use. The five drugs tested for are amphetamines, cannabinoids (marijuana), cocaine, opiates, and phencyclidine (PCP). The positions and

associated funding are required to ensure compliance with drug testing mandated by Executive Order 12564 dated September 15, 1986, and implemented by the Department of Transportation order 3910.C, Drug and Alcohol-Free Departmental Workplace.

Aerospace Medicine efforts are comprised of two primary program activities: special investigations & enforcement (\$0.8 million) and industry drug abatement (\$11.6 million).

FY 2013 Changes (No change): The FY 2013 request will continue to support efforts to reduce drug use and its consequences throughout the national aerospace.

Security and Hazardous Materials Safety (ASH)

Total FY 2013 Request: \$2.0 million
(Reflects no change from FY 2012)

FAA special agents assist law enforcement agencies (LEAs) in drug interdiction activities, accessing FAA data that is critical to the development of intelligence on airmen and aircrafts involved in illegal drug trafficking. The information provided to LEAs assists them in the arrest and conviction of airmen or seizure of aircraft. Due to the joint work with LEAs, the FAA becomes aware of investigations and information that enable and support the initiation of FAA regulatory enforcement investigations on airmen and aircrafts suspected of drug trafficking. In many cases, these investigations result in revocation of airmen certificates and/or deregistration of aircrafts, which increases the safety of the National Airspace System. The El Paso Intelligence Center utilizes FAA air traffic information/systems to track and assist

Federal, state, and local LEAs in interdicting and seizing assets involved in counternarcotics activities. In addition, FAA Law Enforcement Assistance Program special agents provide support to LEAs on other national security issues.

FY 2013 Changes (No change): The requested funding will allow ASH to continue to provide support to law enforcement agencies involved in drug interdiction activities.

PERFORMANCE

This section on the FY 2011 performance regarding the drug control mission of the FAA is based on business plan objectives established by individual lines of business and staff offices within the agency. The FY 2011 performance information for FAA drug control activities is provided below.

Federal Aviation Administration		
Selected Measures of Performance	FY 2011 Target	FY 2011 Achieved
Aviation industry random testing of safety-sensitive employees	< 1% for Drugs < 0.5% for Alcohol	0.534% 0.088%
Schedule and inspect a minimum number of regulated aviation industry drug and alcohol testing programs for compliance pursuant to 14 CFR Part 120 and 49 CFR Part 40	1620	1633
Initiate regulatory investigations on 95% of all airmen involved in the sale or distribution of illegal drugs within 30 days of knowledge of a conviction or notification by law enforcement	95%	95%
Initiate regulatory investigations on 95% of all aircraft involved in illegal activity within 30 days of knowledge of that activity	95%	95%
The Law Enforcement Assistance Unit will ensure initial response to inquiries from federal, state, law enforcement, ASH headquarters and field elements within 24 to 48 hours of request.	95%	95%
Provide assistance and briefings to other agencies as requested.	95%	95%

Discussion

Air Defense Identification Zone

At present, the agency is only able to determine a level of effort and estimate costs in support of these tracking requests. However, because this activity directly supports the *Strategy's* goal of reducing the trafficking of illicit drugs, the agency is working to develop a performance metric in support of this activity.

Drug Testing of Safety-Sensitive Employees

In FY 2011, only 0.534 percent of those persons randomly selected tested positive for drugs, while 0.088 percent tested positive for alcohol, much less than their respective one and one-half percent thresholds.

Law Enforcement Assistance Program

In FY 2011, FAA LEAP Special Agents responded to 2,796 requests from law enforcement for investigative assistance regarding airman/aircraft. This was a 34 percent increase in requests from FY 2010. Regulatory investigations, initiated by FAA LEAP Special Agents against airmen/aircraft, resulted in action being taken in 449 instances, including the revocation, suspension, or denial of 189 airmen/medical certificates. Notable FY 2011 accomplishments of FAA support of drug interdiction initiatives undertaken by LE agencies include:

- When provided the name of a pilot associated with an investigation a Drug Trafficking Organization (DTO) for a

narcotics smuggling and money laundering, FAA LEAP Special Agents, from information included in the Airman Registry, identified and provided address information that was previously unknown to law enforcement. The information resulted in the identification of additional associates and seizures of cocaine at different locations in Puerto Rico and the U.S. Virgin Islands totaling 1,030 kilos worth an estimated \$36M.

- An FAA LEAP Special Agent working with the Air Marine Operations Center (AMOC) assisted in identifying and tracking a suspect aircraft from California to Tennessee. As a result, the law enforcement officers seized a single-engine Cessna airplane and discovered more than 17 pounds of high-grade hydroponic marijuana with a street value of more than \$70,000. The pilot and passenger were arrested and charged with possession of marijuana for sale.
- During a routine ramp inspection, a FAA LEAP Special Agent identified an aircraft with registration violations and, due to a close working relationship with the DEA, was aware of law enforcement interest in the aircraft. The Special Agent informed DEA who had lost situational awareness of the aircraft's location and was able to subsequently seize the aircraft.
- The FAA LEAP Special Agent in Alaska is well integrated into the Alaska Information Analysis Center (AKAIC – Alaska law enforcement fusion center). The LEAP Special Agent is a contributor to an ongoing assessment, led by AKAIC, of general aviation movement across the border with Canada and Russia as well as in-state general aviation traffic

to analyze intelligence information for law enforcement to assist in interdiction efforts of illegal drug and alcohol smuggling by general aviation. Other participants include Alaska State Troopers, Federal Bureau of Investigation, Department of Homeland Security, Transportation Security Administration, U.S. Coast Guard, and the Royal Canadian Mounted Police. The contributions from the FAA LEAP Special Agent include information generated as a result of ramp inspections at 87 remote airports on 1732 general aviation aircraft over the past year, joint efforts with the USCG Air Station patrols, and ongoing interaction with all levels of law enforcement. Of the aircraft inspected, 18 were in DEA's Narcotics and Dangerous Drugs Information System (NADDIS) and the locations of those aircraft were shared with DEA and the Fusion Center law enforcement team.

- Law enforcement requested FAA LEAP Special Agent assistance in identifying an aircraft, associated with a Drug Trafficking Organization for which they only had partial pictures and one number from the registration. Of 69 possible aircraft with similar characteristics and tail numbers, the FAA LEAP Special Agent was able to identify and provide the requestor with the location and tail number of the aircraft.

DEPARTMENT OF TRANSPORTATION

National Highway Traffic Safety Administration

Resource Summary

	Budget Authority (in Millions)		
	FY 2010 Final	FY 2011 Enacted	FY 2012 Request
Drug Resources by Function			
Prevention	\$2.688	\$2.688	\$3.988
Total Drug Resources by Function	\$2.688	\$2.688	\$3.988
Drug Resources by Decision Unit			
Drug Impaired Driving	\$2.688	\$2.688	\$3.988
Total Drug Resources by Decision Unit	\$2.688	\$2.688	\$3.988
Drug Resources Personnel Summary			
Total FTEs (direct only)	2	2	2
Drug Resources as a Percent of Budget			
Total Agency Budget (in Billions)	\$0.9	\$0.8	\$1.0
Drug Resources Percentage	0.3%	0.3%	0.4%

Program Summary

MISSION

The National Highway Traffic Safety Administration's (NHTSA) mission is to save lives, prevent injuries, and reduce economic costs due to road traffic crashes through education, research, safety standards, and enforcement activity. The Drug Impaired Driving Program contributes to this mission by supporting a range of initiatives intended to reduce drugged driving.

METHODOLOGY

NHTSA's drug-related budget estimates are based on an annual review of the resources necessary to maintain and improve the programs and research that support efforts to reduce drugged driving through law enforcement training, education, and research.

BUDGET SUMMARY

In FY 2013, the total budget request for NHTSA is \$4.0 million for its drugged driving activities, which reflects a \$1.3 million increase over the FY 2012 enacted level.

Drug Impaired Driving

Total FY 2013 Request: \$4.0 million

(Reflects a \$1.3 million increase over FY 2012)

The Drug Impaired Driving Program, part of the Agency's Impaired Driving Program, supports infrastructure and sponsors research on the nature and incidence of the drugged driving problem. The program maintains and refines the Drug Evaluation and Classification (DEC) infrastructure to enable accurate detection of drug impairment by trained law enforcement officers. Further, the program provides

leadership, guidance, and resources to assist states and communities in implementing effective programs to reduce drugged driving. The program also provides technical assistance and training programs on drugged driving for prosecutors, judges, and law enforcement officials.

Research

FY 2013 Request: \$1.2 million

(Reflects no change from FY 2013)

In FY 2013, NHTSA will use \$1.2 million to field the next nationally representative roadside survey to measure the prevalence of drug use by drivers. Data collection is expected to be completed during FY 2013. In order to better document the increased risk of crash involvement due to drug use by drivers, NHTSA will complete the analysis of data collected during the case-control study. This study will provide better information on the relative crash risk associated with driving under the influence of selected drugs (those used by a large percentage of the driving population) and alcohol.

Training

FY 2013 Request: \$1.5 million

(Reflects an increase of \$0.6 million over FY 2013)

In FY 2013, the agency will use \$1.5 million to deliver the improvement of law enforcement training in the area of drug impaired driving. NHTSA is promoting and facilitating the adoption of the Advanced Roadside Impaired Driving Enforcement (ARIDE) curriculum as an intermediate level of training to enhance law enforcement officers' ability to identify potentially drug-impaired drivers. NHTSA will continue efforts to increase the use of Standardized Field Sobriety Test (SFST) training and provide training and judicial education within states in support of alcohol and drug

impaired driving enforcement and adjudication.

FY 2013 Changes (+\$0.6 million): In FY 2013, NHTSA will increase training activities to include administration of an online ARIDE course for greater penetration within the law enforcement community. NHTSA will also increase its capacity to provide training to existing Traffic Safety Resource Prosecutors (TSRPs) and the Judicial Outreach Liaisons (JOLs).

Data Collection

FY 2013 Request: \$0.9 million

(Reflects an increase of \$0.5 million over FY 2013)

In FY 2013, the agency will use \$0.9 million to support existing data collection efforts to determine the extent of the drug impaired driving problem and to better develop programs and potential countermeasures to address this problem.

FY 2013 Changes (+\$0.5 million):

NHTSA will make additional system enhancements to the National Sobriety Testing Resource Center and DRE Data Collection website to increase the speed and ease of use and provide improved outputs to better understand the nature of drug impaired driving. The system is internet-based and accessible to law enforcement, toxicologists, prosecutors, NHTSA, and Highway Safety Offices to enter, review, collate, and access data relating to drug impaired driving arrests.

Public Information and Outreach

FY 2013 Request: \$0.4 million

(Reflects an increase of \$0.2 million over FY 2013)

In FY 2013, the agency will use \$0.4 million to support public information and outreach efforts. NHTSA will continue to partner with the International Association of Chiefs

of Police (IACP) and the National Sheriffs' Association (NSA) to support standardized impaired driving messages. In addition, NHTSA will continue to support and contribute to the annual Impaired Driving Conference which brings leaders and practitioners in the drug impaired driving detection field together to share information, address technical and judicial issues, and serve to promote effective and consistent enforcement and detection efforts.

FY13 Changes (+\$0.5 million): In FY 2013, NHTSA will provide updated educational materials to pharmacists and pharmacy technicians on

prescription and over-the-counter medication that impair driving. NHTSA will also work with State Highway Safety Offices and local communities to gain wider distribution of the drug fact sheets for specific audiences (i.e., parents, youth, older drivers, coalitions), and increase support for the national impaired driving crackdowns.

PERFORMANCE

This section on the FY 2011 performance of the Drug Impaired Driving Program is based on agency GPRA documents and other agency information.

Drug Impaired Driving Program		
Selected Measures of Performance	FY2011 Target	FY2011 Achieved
Complete 50 » percent of data collection	Collect data from over 1,250 crashes.	Data collected on over 1,250 crashed and 2,500 control drivers.

Discussion

The Drug Impaired Driving Program contributes to the Department's long-term goal of reducing the highway fatalities. The measure for FY 2011 reflects a milestone in the development of improved methods to train law enforcement in detecting drug-impaired drivers and in developing valid and reliable measures of the drug impaired driving problem by increasing the Agency's understanding of the extent of drug use among drivers and the role of drugs in crash causation.

Completing this analysis of a roadside survey of alcohol and drug use among drivers, will provide a nationally representative estimate of drug use among

the driver populations and will be used to guide future program development and lead to critical further research regarding the role of drugs in crash causation.

In FY 2011, NHTSA continued to measure prevalence and crash risk, and begin analysis of the case control study data for the Case Control Study of the Crash Risk of Drug Impaired Drivers. NHTSA collected data from 1250 crashes and 2,500 control drivers as part of the study. This study is now past its half way mark.

In FY 2012, NHSTA will develop and Pilot Test an On-line version of the ARIDE program.

These initiatives directly support the *National Drug Control Strategy's* goal to reduce the prevalence of drugged driving by improving our understanding of the issue, allowing for future development of new and updated countermeasures that will directly affect drug driving prevention.

DEPARTMENT OF VETERANS AFFAIRS



DEPARTMENT OF VETERANS AFFAIRS

Veterans Health Administration

Resource Summary

	Budget Authority (in Millions)		
	FY 2011 Final	FY 2012 Enacted	FY 2013 Request
Drug Resources by Function			
Treatment	\$513.730	\$530.169	\$549.255
Research and Development	\$19.153	\$18.560	\$18.913
Total Drug Resources by Function	\$532.883	\$548.729	\$568.168
Drug Resources by Decision Unit			
Medical Care	\$513.730	\$530.169	\$549.255
Research and Development	\$19.153	\$18.560	\$18.913
Total Drug Resources by Decision Unit	\$532.883	\$548.729	\$568.168
Drug Resources Personnel Summary			
Total FTEs (direct only)	2,580	2,580	2,580
Drug Resources as a Percent of Budget			
Total Agency Budget (in billions)	125.5	126.9	140.3
Drug Resources Percentage	0.4%	0.4%	0.4%

Program Summary

MISSION

The Department of Veterans Affairs' (VA) Veterans Health Administration's (VHA) mission statement is "Honor America's Veterans by providing exceptional care that improves their health and well-being." Care for Veterans with mental illnesses and substance use disorders is an important part of overall health care. The goal of VHA's Office of Mental Health Services is to provide effective, safe, efficient, recovery-oriented, and compassionate care for those with substance use disorders and mental illness, for those who are vulnerable to substance use disorders, and for those who are in continuing care to sustain recovery.

Consistent with ONDCP guidance, programs and costs described herein will be limited to those services provided in SUD Specialty Treatment.

METHODOLOGY

In accordance with the guidance provided by the Office of National Drug Control Policy, VHA's methodology incorporates specialized treatment costs, as well as the cost for specialized treatment of substance abuse in a mental health setting. The reported amount for substance abuse treatment in VHA is based on specific patient encounters. This is for all inpatient and outpatient episodes of care whether

provided by VHA staff or purchased in the community.

The cost of the VHA provided services is assigned through the Decision Support System (DSS) management cost accounting system and is based on the products consumed by producing departments. Every product is valued and assigned a cost. The costs of all the products a patient uses are rolled up. A national data extract of patients at the encounter level is created and is the source of the cost. An additional extract at the encounter level also splits out the DSS intermediate product department, (NDE IPD). The cost of the contracted care comes from the Inpatient (Hospital) and Outpatient (FEE) payment systems. The DSS costs and payments are expenditures. These expenditure costs are modified to reflect full VHA obligations. As noted above, all the products are accumulated to an encounter. The DSS NDE IPD extracts show the cost of the encounter by department and the cost by three cost categories; Variable Direct, Fixed Direct and Fixed Indirect. All the costs, including the fixed costs, from all the departments are included in the cost calculation; however, there are no FTE numbers in the extract.

BUDGET SUMMARY

For FY 2013, VHA estimates \$568.2 million in obligations, which is an increase of \$19.4 million from the FY 2012 level.

Medical Care

Total FY 2013 Request: \$549.3 million (Includes +\$19.1 million in program changes)
VHA, in keeping with modern medical practice, continues to improve service delivery and efficiency by integrating services for mental health disorders, including SUD, into primary care settings as

well as more closely coordinating SUD care with specialty care for other mental health conditions. For example, SUD specialist positions have been funded to directly augment care for patients receiving care offered by post-traumatic stress disorder teams or services at each of the VA medical centers.

Reaching Special Populations

The Uniform Mental Health Services Handbook, approved by the Under Secretary for Health on September 11, 2008, specifies substance use disorder services that must be made available to all Veterans in need of them. Secondary prevention services are highlighted among these and include diagnosis and assessment of possible drug abuse problems in patients who receive care in VA mental health clinics or whose presenting medical problem suggests risk of substance abuse (e.g. treatment for Hepatitis C or HIV or care provided in an emergency department for trauma).

Three special populations are targets of particular VA substance use disorder prevention and treatment efforts: service members returned from Iraq and Afghanistan and who are eligible for VHA services; patients receiving care in Mental Health Residential Rehabilitation Treatment Programs (MH-RRTPs); and patients having Post Traumatic Stress Disorder.

Returning Veterans from OEF/OIF/OND.

Interagency efforts with the Department of Defense continue in order to assure that newly separated Veterans who are referred to VA are seen quickly by VHA and that results of their Post Deployment Health Reassessment questionnaires are available to mental health care providers in VA. At

VA, Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn Veterans are seen in special primary care post-deployment clinics that have mental health staff on the team who are sensitive to potential mental health needs of these Veterans.

Patients in Residential Rehabilitation Treatment Programs. VHA offers care in Mental Health Residential Rehabilitation Treatment Programs (MH-RRTPs) to Veterans suffering a range of mental health concerns. Although many of these programs are designated as “Substance Abuse RRTPs” and focus primarily on SUD services, nevertheless, up to 70 percent of patients receiving care in other types of MH-RRTPs also have SUD diagnoses and are in need of SUD services. VHA is now providing each of its “non-Substance Abuse” MH-RRTPs (that average a census of at least 40 patients) a full time substance use disorder specialist to provide a range of substance use disorder clinical services. These services include substance abuse specific treatment while in the MH-RRTP, relapse prevention services, and arrangement of substance abuse treatment follow-up services after MH-RRTP discharge.

Patients with Post Traumatic Stress Disorder. In light of the frequent co-occurrence of substance use disorder problems with Post Traumatic Stress Disorder, VHA has also assigned a full time substance use disorder specialist to each of its hospital-level PTSD services or teams. The staff person is an integral member of the PTSD clinical services team and works to integrate substance use disorder care with all other aspects of PTSD-related care. Among the position’s responsibilities are

identification of Veterans in the early stages of a substance use disorder or who are at risk for developing a problem and provision of services to prevent substance abuse.

Increase Treatment Capacity in Targeted Areas

Access to care is also emphasized by the Uniform Mental Health Services Handbook and, as noted, the Handbook commits the VA to providing substance use disorder treatment services to every eligible Veteran regardless of where he or she lives. Additionally, the Handbook specifies that a contact be made by the substance use disorder program within 24 hours of the time care is sought and that a comprehensive assessment be made within 14 days of the initial contact (as is the standard for other mental health conditions). To further enhance access to substance use disorder treatment, clinics offering these services must offer evening or weekend hours.

During the past 3 years, staff from the Office of Mental Health Services in VA have consulted with VISNs and VA points of medical service on how to satisfy Handbook specifications that are now required. Performance metrics have been developed are being utilized to assure compliance with the requirement to provide all components of the Mental Health Services Handbook. Other metrics are being developed to further evaluate treatment capacity and quality of substance use disorder services.

Treatment across the Criminal Justice System – Guiding the Effectiveness of Drug Courts

Interaction with Veterans served by Drug Courts will occur through the Veterans Justice Outreach (VJO) initiative.

The Uniform Mental Health Services Handbook affirmed that “Police encounters and pre-trial court proceedings are often missed opportunities to connect Veterans with VA mental health services as a negotiated alternative to incarceration or other criminal sanctions.” On April 30, 2009, the Under Secretary for Health released “Information and Recommendations for Services Provided by VHA Facilities to Veterans in the Criminal Justice System” (IL 10-2009-005), stating that justice-involved Veterans (who are not incarcerated) are as eligible for VA services as those without justice involvement. On May 27, 2009, the Deputy Under Secretary for Health for Operations and Management issued a memorandum requiring VA medical centers to provide outreach to justice-involved Veterans in the communities served. All VA medical centers have a designated VJO Specialist; most of these are centrally-funded positions, dedicated to serving justice-involved Veterans on a full-time basis.

In communities where justice programs relevant to Veterans exist (Veterans Courts, Drug Courts, Mental Health Courts, and police Crisis Intervention Teams), VA will assume the initiative in building working relationships to assure that eligible justice-involved Veterans get needed care. In communities where no such programs exist, VA will reach out to potential justice system partners (judges, prosecutors, police and jail administrators) to connect eligible justice-involved Veterans with VA services.

The National Association of Drug Court Professionals (NADCP) currently recognizes 75 operational Veterans Treatment Courts (VTC); its definition of a VTC includes

linkage to VHA treatment services. In communities without VTCs, VA medical centers have established relationships with a range of justice system and community partners, including police and sheriffs’ departments, local jail administrators, judges, prosecutors, public defenders, probation officers, and community mental health providers.

FY 2013 Changes (+\$19.1 million): The VA, through its VHA, operates a national network of substance abuse treatment programs located in the Department’s medical centers, residential rehabilitation facilities, and outpatient clinics. The program changes are the result of inflationary increases and are subject to change. The majority of VHA’s funding goes to support outpatient and residential rehabilitation and treatment services.

Research and Development

FY 2013 Request: \$18.913 million

VHA research supports generation of new knowledge to improve prevention, diagnosis, and treatment of substance use disorders and alcohol abuse, as well as to heighten effectiveness, efficiency, accessibility, and quality of Veterans’ health care.

Research & Development currently has ongoing projects on drug and alcohol abuse. Topics of investigation range from access to treatments and outcomes for Veterans with substance use disorders to alcoholism and brain functions to development of novel medication strategies for opiate abuse to gender differences in post-deployment addictive behaviors among returning Veterans.

FY 2013 Changes (\$0.3 million): The VHA will continue to research improvement that will improve treatment for veterans with substance abuse issues.

PERFORMANCE

This section is based on agency Government Performance and Results Act (GPRA) documents and other agency information. VHA reports performance for two separate drug-related initiatives: (1) health care and (2) research and development. The table below includes target and achievement levels on performance measures for the most recent year available.

VHA’s health care performance measure for ONDCP reporting purposes is “continuity of care” (i.e. the percent of patients who have *engaged* in SUD treatment as demonstrated by being seen for at least three visits in a month and who *persevere* in SUD treatment by being seen for at least two treatment sessions for each of the following 3 months).

VHA has in place a national system of performance monitoring that uses social, professional, and financial incentives to encourage facilities to provide the highest quality health care. This system has begun to incorporate performance measures related to substance use disorder treatment.

Veterans Health Administration		
Selected Measures of Performance	FY 2010 Target	FY 2010 Achieved
Medical Care		
Percent of clients receiving appropriate continuity of care	47%	52%
Research and Development		
Number of research studies related to substance abuse disorder	5	21
Number of research studies related to alcohol abuse	5	46
Number of research studies related to both substance abuse disorder and alcohol abuse	N/A	14

Discussion

In FY 2011, VHA provided services in a specialty SUD setting to 109,156 patients with a drug use disorder diagnosis. Of these, 46 percent used cocaine, 28 percent used opioids and 37 percent used cannabis. Eighty-one percent had co-existing psychiatric diagnoses. (These categories are not mutually exclusive.) In FY 2011 VHA exceeded its target of 47 percent for clients

receiving appropriate continuity of care. With regard to research, VHA exceeded its FY 2011 targets for two measures related to the number of research studies regarding substance abuse disorders and alcohol abuse.

VHA provides two types of 24-hour care to patients with particularly severe or acute

substance use disorders. These include care in residential rehabilitation treatment programs for substance use disorders and inpatient detoxification in numerous medical and general mental health units.

Most Veterans with substance use disorders are treated in outpatient programs. Outpatient detoxification is available for patients who are medically stable and who have sufficient social support systems to monitor their status. Standard outpatient programs typically treat patients 1 or 2 hours per session and patients are generally seen once or twice a week. Intensive substance use disorder outpatient programs provide at least 3 hours of service per day and patients attend 3 or more days per week.

VHA is steadily expanding the availability of opioid agonist treatment for opioid-dependent Veterans. In FY 2011, evidence-based medication assisted treatment for opioid dependence, including office-based treatment with buprenorphine, has expanded to 123 of the VHA's 140 parent health care systems plus 121 sub-facilities. VA operates methadone maintenance programs at 28 facilities and 25 VHA facilities maintain contractual arrangements for providing these services through community-based licensed opioid agonist treatment programs.

VHA has also expanded access to other SUD treatment services including hiring new substance use disorder specialists to work in a variety of VHA health care settings. Eighty-eight percent of the 406 additional SUD staff assigned to work in large community based outpatient clinics, mental health residential rehabilitation programs, intensive SUD outpatient programs and

post-traumatic stress disorder teams have now been hired or have a set date to begin work. The Homeless Programs are funding 100 SUD specialists to support the Department of Housing and Urban Development – VA Supportive Housing (HUD-VASH) program. In addition, there are approximately 80 SUD Specialists working in Health Care for Homeless Veterans (HCHV) programs including 32 newly funded HCHV SUD Specialist positions being added in FY 2012. These specialists emphasize early identification of SUD as a risk for maintaining permanent housing, promote engagement or re-engagement in SUD specialty care programs, and serve as linkages between Homeless and SUD programs.

VHA has begun implementation of the Brief Addiction Monitor (BAM) using paper administration and is awaiting the imminent release of a software patch that will integrate the assessment process with our electronic health record and permit automatic data extraction. The BAM is designed to assist SUD specialty care clinicians in monitoring the progress of patients while they are receiving care for a substance use disorder, serving as a basis for giving feedback to them to enhance their motivation for change, and informing clinical decisions, such as the intensity of care required for the patient.

IV. Glossary

Glossary

Actuals

A common term used to refer to data on actual performance compared to goals.

Baselines

The starting point from which change is measured and targets are set.

Budget Authority

Authority provided by law to incur financial obligations that will result in outlays.

Corrections

Activities that are associated with the incarceration and/or monitoring of drug-related offenders, including federal assistance for community corrections, such as those related to probation and parole.

CR

A Continuing Resolution, which is a type of appropriations legislation used by Congress to fund government agencies if a formal appropriations bill has not been signed into law by the end of the Congressional fiscal year. The legislation takes the form of a joint resolution, and provides funding for existing federal programs at current or reduced levels.

Demand Reduction

Activities conducted by a National Drug Control Program agency, other than law enforcement, intended to reduce the willingness of individuals to use illicit drugs. Demand reduction activities include drug use education; drug abuse prevention; drug abuse treatment; drug abuse research; drug abuse rehabilitation; drug-free workplace programs; and, drug-testing.

Domestic Law Enforcement

A Drug Control Budget category that combines resources for the following functional units: investigations, intelligence, state and local assistance, corrections, prosecution, and law enforcement research.

Drug Budget Decision Unit

Drug budget decision units correspond to discrete program categories that are identifiable components of budget accounts enumerated in the Budget of the President.

Drug Control Functions

Drug control functions correspond to the nine specific program areas that encompass all possible drug control activities: (1) Prevention; (2) Treatment; (3) Interdiction; (4) International; (5) Investigations; (6) Intelligence; (7) State and Local Assistance; (8) Research and Development; (9) Prosecution; and, (10) Corrections.

Drug Methodology

The process by which drug-related financial statistics identified for certain agencies or bureaus are calculated. All bureaus utilize a drug methodology for presenting their drug budget by drug control function.

Efficiency Measures

Metrics that indicate what outcomes or outputs are realized for a given level of resource use.

Enacted

The drug-related budget authority approved by Congress for the current fiscal year.

Final

The drug-related budget authority approved by Congress, net of rescissions and transfers, for the fiscal year most recently closed.

Fiscal Year

The fiscal year is the Federal Government's accounting period. It begins on October 1st and ends on September 30th. For example, fiscal year 2012 begins on October 1, 2011, and ends on September 30, 2012.

Full-time Equivalents (FTEs)

Civilian employment in the Executive Branch is measured on the basis of full-time equivalents. One FTE is equal to 1 fiscal work year. Thus, one full-time employee counts as one FTE, and two half-time employees also count as one FTE.

Government Performance and Results Act

All Federal Departments must comply with the Government Performance and Results Modernization Act of 2010 (GPRAMA). The GPRAMA requires Federal agencies to develop long-term strategic plans, which define measurable goals. National Drug Control Agencies submit GPRAMA data and other performance related information in their annual performance budget submissions to the Director of ONDCP.

Intelligence

Activities or programs with a primary focus to provide guarded information for use by national policy makers, strategic planners, or operational/tactical elements, principally in the areas of national security and law enforcement. Activities include collecting, processing, analyzing, and disseminating information related to drug production and trafficking organizations and their activities (including transportation, distribution, and

finance/money laundering). Additional activities include assessing the willingness and ability of foreign governments to carry out effective drug control programs.

Interdiction

Activities designed to interrupt the trafficking of illicit drugs into the United States by targeting the transportation link. Specifically, interdiction involves intercepting and ultimately disrupting shipments of illegal drugs, their precursors, and the profits of drug distribution.

International

Activities primarily focused on areas outside of the United States, including a wide range of drug control programs to eradicate crops, seize drugs (except air and marine interdiction seizures), arrest and prosecute major traffickers, destroy processing capabilities, develop and promote alternative crops to replace drug crops, reduce the demand for drugs, investigate money laundering and financial crime activities, and promote the involvement of other nations in efforts to control the supply of and demand for illicit drugs.

Investigations

Federal domestic law enforcement activities engaged in preparing drug cases for the arrest and prosecution of leaders and traffickers of illegal drug organizations, seizing drugs and assets, and ensuring that federal laws and regulations governing the legitimate handling, manufacturing, and distribution of controlled substances are properly followed.

National Drug Control Program Agency

An agency that is responsible for implementing any aspect of the *National Drug Control Strategy*, including any agency

that receives Federal funds to implement any aspect of the *National Drug Control Strategy*, but does not include any agency that receives funds for a drug control activity solely under the National Foreign Intelligence Program, the Joint Military Intelligence Program, or Tactical Intelligence and Related Activities, unless such agency has been designated – (A) by the President; or (B) jointly by the Director [of ONDCP] and the head of the agency.

National Drug Control Strategy

The President’s *Strategy* is an annual publication, created by the ONDCP, which details the Federal programs with a drug control emphasis. The Reauthorization Act determines how the *Strategy* is defined and implemented. This *Strategy* sets forth a comprehensive annual plan to reduce drug use and its consequences in the United States. The *Strategy* is supported by the *Budget and Performance Summary*, which identifies the drug control programs and their appropriations.

Outcome Measures

The intended result or impact of carrying out a program or activity. Outcomes may relate to society as a whole or to the specific beneficiaries of programs, depending on the size and reach of the program.

Output Measures

Metrics that indicate the goods and services produced by a program or organization and provided to the public or others.

Performance Measures

Indicators or metrics that are used to gauge program performance. Performance measures can be either outcome or output measures.

Prevention

Activities focused on discouraging the first-time use of controlled substances and outreach efforts to encourage those who have begun to use illicit drugs to cease their use.

Prosecution

Federal activities related to the conduct of criminal proceedings against drug trafficking and money laundering organizations, with the aim of bringing a civil or criminal judgment against their members, forfeiting their assets, divesting leaders of their power, and, as appropriate, extraditing, deporting, and excluding their members.

Request

The budget authority proposed in the budget of the President, which is submitted to Congress for consideration on the first Monday in February of every year.

Research and Development

Activities intended to improve the capacity, efficiency, or quality of drug control activities.

State and Local Assistance

Federal drug control assistance to help state and local law enforcement entities reduce drug-related violent crime and the availability of illegal drugs.

Supply Reduction

Any activity or program conducted by a National Drug Control Program agency intended to reduce the availability of drugs in the United States and abroad. Supply reduction activities include international drug control; foreign and domestic drug intelligence; interdiction; and, domestic law enforcement.

Targets

Quantifiable or otherwise measurable characteristics that tell how well a program must accomplish a specific performance measure.

Treatment

Activities focused on assisting regular users of controlled substances to become drug-free through such means as counseling services, in-patient and out-patient care, and the demonstration and provision of effective treatment modalities.