

**Testimony of
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**Blueprint for States Policy Panel
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Good afternoon, Governor Dukakis, distinguished panel and guests. I am honored to provide the lead testimony today for the Blueprint for the States policy panel. I'd like to thank David Rosenbloom of Join Together for hosting this important hearing in conjunction with CADCA's National Leadership Forum.

I hope many of you will stay on this week and experience CADCA's 16th Forum. Tomorrow we will be hosting a Capitol Hill Day. Our focus tomorrow for our noon rally is the lack of adequate funding for substance abuse prevention, treatment and research and emphasis on the specific problem of underage drinking. Participating in tomorrow's Capitol Hill Day town hall meeting will be four key representatives. Confirmed speakers at the rally include: First Lady of Ohio Mrs. Hope Taft and two Representatives and two Senators. Two of our field's greatest champions, Senator Joseph Biden and Senator Charles Grassley are both speaking to our Forum attendees tomorrow as well. It is very appropriate that I share with you the significant Congressional involvement in our conference because these individuals are our champions on the issues of alcohol and drug abuse prevention, research, treatment, and recovery. These leaders should be one target audience for your findings.

Once again, funding has been substantially reduced for prevention and treatment. Everyone here today has a vested interest in joining with CADCA and other national organizations to advocate for increased substance abuse resources for our states and communities.

CADCA and our coalition members are excited about increased dialogue on the role of states as leaders, funders and yes, partners in the effort to reduce rates of abuse for alcohol, tobacco and illicit drugs. This is such an appropriate time to have this discussion.

Coalitions are unique mobilizing entities, comprised of representation from every sector of a community. The coalition movement began in the mid-1980's, when the crack epidemic was crippling our urban centers. Groups began to form with one goal in mind—Fighting Back.

In the early 1990's the nation addresses this issue by convening the President's Drug Advisory Council, composed of distinguished Americans who studied this issue for three years and recommended the creation of an independent non-profit organization to address these issues, Simultaneously, the Robert Wood Johnson Foundation became involved. RWJF created the fighting back movement by funding community coalitions, and provided substantial support for CADCA, as well as creating Join Together. The federal government, through SAMHSA provided community partnership grants, and in the late 1990's Congress became involved by passing the Drug-Free Communities Act. Today, the program has supported over 900 grants, and currently supporting over 700 communities. This focus on the community, in direct grants to communities took some getting used to for states.

Coalitions need state support, and states need coalitions. CADCA has formalized relationships with 38 Single State Agencies and Drug Czars. We will continue to reach out until all states and territories are members of CADCA. We are a resource to states because we can connect them back to their communities in a unique and powerful way. And, we will always work directly with communities, ideally in conjunction with state systems.

Never before have so many opportunities for collaboration between us. The Substance Abuse and Mental Health Services Administration’s Strategic Prevention Framework State Incentive Grants (SPF-SIG) are designed to encourage collaboration between state leadership and the community coalitions in their state.

In fact, Congress directs SAMHSA “to ensure that grantees within the strategic prevention framework State incentive grant program do not fund duplicative sub-state anti-drug coalition infrastructures, but utilize those already functioning and funded by programs such as the Drug Free Communities program.”

Community anti-drug coalitions are by nature, independent, locally-driven community mobilizing organizations. They must come from the people, not driven by those entrenched in a state system. Coalitions should have a symbiotic relationship with the state, but they also need to be independent in order to provide another check in a series of checks and balances. Savvy state leaders recognize an involved and informed public, capable of keeping substance abuse issue on the front burner.

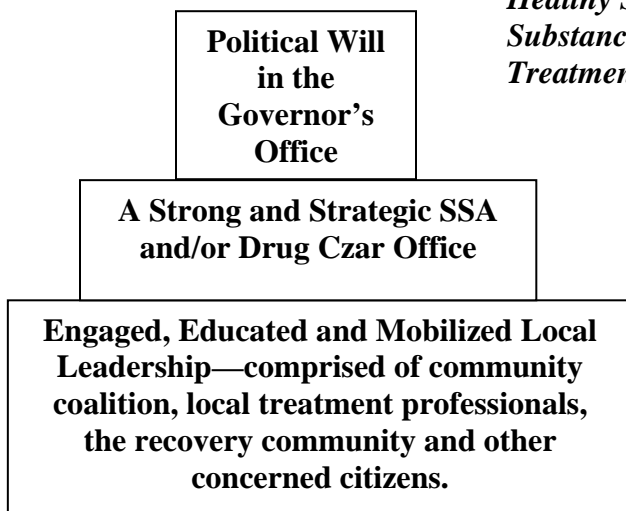
Our number one recommendation for this body is that states should adopt community mobilization as a primary strategy and support local coalitions to address what are at the core, local drug epidemics.

It is CADCA’s position that an ideal state structure will have 3 distinct characteristics. First, the state will have the political will at the office of Governor to place alcohol, tobacco and drug

abuse and addiction as a priority issue. Secondly, there will be a strong state institution in place for substance abuse. The Single State Agency (SSA) should not be buried somewhere in a state office organizational chart. State alcohol and drug abuse offices should be prominent and influential. The move to place substance abuse within a mental health structure may be problematic. As much as the change could be designed to bring about a greater understanding of the complexities of addiction and perhaps reduce stigma, it also has the potential of minimizing and de-emphasizing substance abuse.

And finally, we believe a state must have an educated, engaged and mobilized public. Coalition leaders and their volunteers--public health officers, people in recovery, prevention and treatment professionals, researchers, the faith community, law enforcement, school officials, youth, parents—collectively, these local groups must have a voice and political influence. States should listen to communities. And when states support and value coalitions, they hear a groundswell of support echoed back at them.

*The Building Blocks of a
Healthy State System to Address
Substance Abuse Prevention and
Treatment*



Without community mobilization, political will to leverage improvements in the substance abuse system and to take on entrenched interests will never materialize to support the even the most enlightened state officials. CADCA believes that community-based coalitions are the foundation on which we should build infrastructures to address these problems.

An example of a state that we consider to be a model is Florida. You will be hearing from Jim McDonough later today, but I'd like to share why CADCA believes this state is truly innovative. Florida has the building blocks in place for success. Number one, the state has the political will. The Governor is committed. The First Lady of Florida, Mrs. Columba Bush, is a strong spokesperson on the substance abuse issue, and co-hosts the state's annual prevention summit.

Secondly, Florida has both a strong Single State Agency and a Drug Czar, located in the Governor's Office. The role of the Drug Czar is to use that "bully pulpit"—to be the conscience, if you will, for the state on the issue. A good state Drug Czar can bring needed leadership, strategic thinking, innovation, and media attention to our issue. When a Drug Czar and the SSA can work together well, this is the ultimate partnership for state responsibility on substance abuse.

And lastly, Governor Bush has demonstrated a strong support for community coalitions, by proclaiming that there should be an active coalition in every one of Florida's 67 counties. Today, there is a coalition in every Florida County, and the state boasts almost 200 coalitions total. The state of Florida has invested in training and technical assistance for coalitions—to ensure that coalitions work smarter and achieve greater results. For these reasons, Governor Bush is receiving our highest honor—our National Leadership Award.

Naturally, many other states are deserving of praise for their support of community efforts. I cannot list them all—but we will be honored one state—the State of Washington—as our State Association of the Year on Thursday for their outstanding support of coalitions. Not surprisingly, states that foster and believe in the coalition model are achieving results.

As you know, it takes a different set of strategies to address drug and alcohol problems in local communities. The black tar heroin problem in New Mexico requires a different response than it takes to combat methamphetamine production in rural Iowa. CADCA believes America does not have a drug problem. America's communities have a drug problem.

Thank you for the opportunity to testify before your panel today. I applaud your efforts to provide a blueprint for states to best organize and deliver alcohol and drug prevention and treatment services.