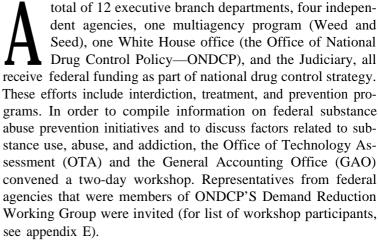
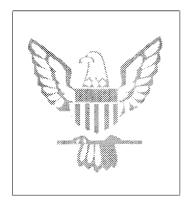
# Appendix B: Federal Programs: Prevention and Causation



During the workshop, federal agency representatives were asked to make a short presentation covering the following three issues:

- 1. The agency's substance abuse prevention program(s). What are its goals and objectives (primary or secondary prevention, research)? What are its target populations?
- 2. Risk and/or protective factors related to substance abuse that the agency has identified. To what extent is the agency able to address specific factors in the implementation of prevention programs?
- **3.** Methods the agency uses for assessing whether prevention programs are effective? What requirements (if any) does the agency impose on grantees for reporting program effectiveness and evaluation outcomes?



This appendix summarizes presentations made at the workshop, and focuses on federal agencies with external programs (e.g., outreach, technical assistance, grants). In addition to these programs, each federal agency, pursuant to the federal Employee Substance Abuse and Treatment Act of 1986 (Public Law 99-570), maintains an employee assistance program (EAP) to provide appropriate prevention, treatment, and rehabilitation programs for drug- and alcohol-related problems among civilian employees. The total federal government cost for EAPs in fiscal year 1991 was \$30.5 million, covering administrative and counseling services for employees seeking to overcome drug, alcohol, emotional, and other personnel problems (4).

#### **ACTION**

ACTION's mission is to foster and expand voluntary citizen service in communities throughout the Nation in activities designed to help the poor, the disadvantaged, the vulnerable, and the elderly. Needs assessment and programs that address needs are designed and implemented at the local level. (In *April*, 1994, *ACTION was merged into the Corporation for National Service.*)

The agency spends over \$10 million annually to support volunteer programs addressing drug abuse prevention. The Drug Alliance Program awards about \$1 million each year to communitybased volunteer efforts designed to assist in the delivery of illicit drug use prevention information. Under Volunteers in Service to America (VISTA), full-time stipended volunteers are assigned to local sponsoring organizations to perform activities determined and defined by the sponsoring organization and the low-income communities in which they serve. The needs being addressed are numerous. and include the need to reduce the spread and use of illicit drugs in low-income communities. Over 450 full-time volunteers are currently engaged in drug reduction projects. Drug abuse prevention activities can be found in other ACTION programs, including student community service programs (small grants 1 inking student volunteers with their communities), the retired senior volunteer program (intergenerational drug abuse prevention activities), and a foster grandparent program (person-to-person services between senior citizens and children who are mental] y, emotionally, or physically disabled) that frequently includes children born to mothers who used drugs during pregnancy.

## DEPARTMENT OF DEFENSE

The Department of Defense (DOD) consolidated all drug interdiction and counter-drug activities into a single appropriations line in fiscal year 1990. The demand reduction component accounts for approximately 10 percent (about \$10 million) of DOD drug-related spending; by far the largest percentage of dollars is spent on support to law enforcement and the National Guard.

The linchpin of DOD's prevention efforts is mandatory urinalysis drug testing (28,000 tests were conducted during fiscal year 199 1). DOD policy for military personnel is zero tolerance. In most cases—the exception being lower ranking enlisted personnel caught for the first time—an officer or noncommissioned officer caught using illicit drugs will be processed for separation from the service. Substance abuse education for military personnel begins upon reporting to duty. There are mandatory briefings each year for military personnel, as well as during transfers between commands. DOD dependent school programs on military installations throughout the world have adopted the Drug Abuse Resistance Education (DARE) program.

Congress recently expanded DOD's legal authority to conduct community-based awareness programs, providing authority to the National Guard and to the active and reserve military to go out beyond military installations, particularly into innercity schools, to present antidrug programs. Congress provided 5 years authority for this program.

## DEPARTMENT OF EDUCATION

The Department of Education (DOE), pursuant to the Drug-Free Schools and Communities Act (DFSCA) of 1986 (Public Law 99-570) and subsequent amendments, implements the largest federal program addressing drug abuse prevention. In fiscal year 1993, Congress appropriated \$598 million for DFSCA.

The majority of DFSCA funds is allocated as a formula grant program to States. Each State is required to allocate at least 90 percent of the funds it receives to local educational agencies (LEAs) to improve antidrug abuse education, prevention, early intervention, and rehabilitation referral programs. Remaining State funds are allocated to the governor of each State. The governor provides financial support for antidrug abuse efforts to parent groups, community based organizations, or other public or private nonprofit entities. At least 42.5 percent of the Governor's funds must be used for programs for high-risk youth.

At the national level, DOE operates the following grant programs:

- Emergency. This program provides funds to LEAs that demonstrate a significant need for additional assistance in combating drug and alcohol abuse. LEAs compete for funding to support a comprehensive range of services, including educational programs, counseling programs, enhancement of school security, after-school programs, programs for parents and other community outreach efforts, and alternative programs for students with a history of drug abuse or others who are difficult to reach in the regular school setting. Appropriation in fiscal year 1993: (\$24.5 million).
- Institutes of Higher Education. The Fund for the Improvement of Postsecondary Education in the Office of Postsecondary Education has awarded more than 800 grants since fiscal year 1987 to institutions of higher learning to develop, implement, operate, and improve drug education and prevention programs for students enrolled in institutions of higher education. Three discretionary grant competitions are involved: institution-wide programs for comprehensive, campus-based programs; a specific approaches program; and the National College Student Organizational Network Program to support student organizations pre-

- vention efforts. In addition, the Office of Elementary and Secondary Education awards grants to institutes of higher education to support demonstration programs in drug and alcohol abuse in elementary and secondary schools. Appropriation in fiscal year 1993: (\$19.3 million).
- Regional Centers. DFSCA authorizes the Department to support five regional centers to: 1) train school teams to assess and combat drug and alcohol abuse problems, 2) assist State educational agencies in coordinating and strengthening prevention programs, 3) assist local educational agencies in developing training programs for educational personnel, and 4) evaluate and disseminate information on effective substance abuse education and prevention programs and strategies. Five cooperative agreements were awarded during fiscal year 1990 for 4-year terms. Appropriation in fiscal year 1993: (\$16. 1 million).
- School Personnel. This program provides financial assistance to State and local educational agencies and institutions of higher learning to establish, expand, or enhance programs and activities for the training of elementary and secondary school teachers and administrators, and other personnel in the areas of drug and alcohol abuse education and prevention. Appropriation in fiscal year 1 993: (\$1 O million).
- Indian Youth. This program is administered under a memorandum of understanding between the Departments of Education and Interior. Drug and alcohol abuse education and prevention services are provided to Indian children attending elementary and secondary schools operated by the Bureau of Indian Affairs. Appropriation in fiscal year 1993: (\$5.6 million).
- Counselor Training. This program provides financial assistance to State and local educational agencies, institutions of higher learning, and private nonprofit agencies to establish, expand, or enhance programs and activities for the training of counselors, social workers, psychologists, or nurses who are providing or

will provide drug abuse prevention, counseling, or referral services in elementary and secondary schools. Appropriation in fiscal year 1993: (\$3.6 million).

Native Hawaiians. This program provides funding for drug prevention and education for Hawaiian natives. The Governor of Hawaii designates organizations eligible to receive funding under this program. Appropriation in fiscal year 1993: (\$1, 1 million).

In addition to these grant programs, the Department supports a number of activities, including the development of curriculum and production of drug prevention newsletters, videotapes, and other materials in conjunction with the Department of Health and Human Services (HHS) and the National Clearinghouse for Alcohol and Drug Information. In conjunction with the Department of Justice, the Department of Education is supporting activities at the National School Safety Center on prevention of drug-related violence in schools.

A Department-commissioned study (1) estimates that DFSCA has been very successful in providing schools and localities with resources to expand their programs. An estimated 11,000 local educational agencies (78 percent of the total) comprising approximately 94 percent of all schoolchildren receive DFSCA services. While coverage is extensive, evaluation efforts need to be strengthened in order to improve school-based prevention programs. Currently, 25 States conduct surveys in drug attitudes and use, but only 15 State education agencies had performed outcome studies.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### ■ Center for Substance Abuse Prevention

The Center for Substance Abuse Prevention (CSAP), created in 1986 by Congress as the Office of Substance Abuse Prevention, provides national leadership for alcohol and drug abuse prevention and intervention efforts, with special emphasis on programs for youth and high-risk populations.

To accomplish its mission, CSAP carries out demonstration projects targeted to specific highrisk groups; assists communities in developing long-term, comprehensive prevention programs that involve all sectors of the community; operates a national clearinghouse of publications and other materials and services; develops and carries out media campaigns and other knowledge-transfer programs; provides training in the prevention of addictive disorders for health care and allied professionals, parents, youth, multicultural groups, and others; and provides technical assistance and other services to help communities, organizations, and others develop and implement prevention efforts.

These projects address a number of risk and protective factors that fall within five major groupings: individual-based factors, family-based factors, school-based factors, peer-based factors, and community-based factors.

CSAP demonstration grants address different points on the spectrum of risk and protective factors. Primary evaluation is process-oriented, in order to assure that projects are targeting multiple systems (e.g., youth, family, schools, community organizations) seen as being crucial to effective drug prevention efforts.

## **■ Indian Health Service**

The Indian Health Service (IHS) contracts with tribal groups for a variety of health care services. The fiscal year 1993 budget for alcohol and drug abuse prevention services was \$82.3 million. Unlike other federal grants for such services, IHS provides funds for sovereign Indian nations on a contract basis. Thus, there is no mandate for demonstration programs, research protocols, or the like. IHS has a target population of 1.1 million people.

## National Institute on Alcohol Abuse and Alcoholism

The National Institute on Alcohol Abuse and Alcoholism (NIAAA), part of the National Institutes of Health (NIH), is the primary federal research agency on alcohol-related programs including

epidemiology, genetics, neuroscience, medical consequences of alcohol and alcoholism, alcohol use and pregnancy, adverse social consequences of alcohol use and dependence, diagnostic criteria and screening instruments, prevention, intervention, and treatment.

NIAAA supports two types of prevention research. Basic prevention research explores factors that influence the risk of developing alcohol use problems. These factors include individual characteristics that may place a person at risk (e.g., age, gender, and family history) and factors within the environment that may affect risk (e.g. family interaction, workplace factors, characteristics of drinking establishments, and alcoholic beverage prices). Applied prevention research evaluates the effectiveness of purposeful actions taken to reduce problems related to alcohol use. Such actions include measures to modify the drinking environment (e.g., legislation establishing minimum drinking age, laws regarding drinking and driving, and server training programs) and measures designed to change individual behavior (e.g., educational programs).

Epidemiologic research has examined a variety of individual characteristics—"including age, gender, and race and ethnicity-related to alcohol consumption and risk for alcohol problems. For example, NIAAA has found that both alcohol abuse and alcohol dependence are more likely to occur among men than among women; young, single men are more likely to be frequent heavy drinkers and to report alcohol dependence and alcohol-related problems. Black men and white men have similar drinking patterns overall, although black men had somewhat higher abstention rates than white men (29 percent verses 23 percent, respectively,), and white men were somewhat more likely to be heavier drinkers. However, black men appear to experience some types of alcohol-related problems at lower levels of consumption. research has also focused on early behavioral characteristics of children that predict use of alcohol and other drugs, as well as individual risk factors associated with fetal alcohol syndrome (2).

## ■ National Institute on Drug Abuse

## Programs and Target Populations

The National Institute on Drug Abuse (NIDA) is the lead federal agency for research to increase knowledge about the causes and treatment of drug abuse and addiction, to identify the means of preventing and controlling drug abuse, and ultimately, to eliminate the demand for illicit drugs. NIDA was created by Congress in 1974 as one of the three institutes in the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA). In 1992, with the reorganization of ADAMHA by Congress, NIDA was moved to NIH.

NIDA consists of three major components: staff offices, which assist the agency's Director with leadership and management functions; program divisions, which oversee research grants and contracts; and the Addiction Research Center (based in Baltimore, Maryland), NIDA's intramural arm.

The Division of Epidemiology and Prevention Research, one of six NIDA divisions, is primarily responsible for prevention and causation/correlation research. A broad-based epidemiology grant program examines the natural history, incidence, and prevalence of drug abuse in the population as a whole and among several subpopulations, such as children and adolescents and pregnant women and their offspring. Research efforts also focus on the etiology, or causes, of drug abuse, which encompasses the identification and study of risk factors, high-risk populations, and the crime-drug nexus. The fundamental information obtained from these studies guides NIDA in determining its research priorities.

By supporting researchers across the country and conducting its own field research, the Division seeks to answer questions such as what drugs are being abused, to what extent, and by whom. Major ongoing research efforts include the National Household Survey, the High School Senior Survey, and the Drug Abuse Warning Network, which monitor use trends among households, high school seniors, and emergency room populations, respectively.

Other areas of research interest include the consequences of drug abuse; the efficacy of various prevention strategies; and the economic, demographic, and psychosocial factors that place individuals at higher risk for becoming drug abusers. Drug abuse among children of child-bearing age, maternal drug use, and pregnancy outcomes are also areas of particular concern.

The Division works with State, federal, and international governmental agencies and private organizations to encourage the sharing of information. This is accomplished by developing community- and State-based epidemiologic surveillance networks and by providing technical assistance and other consultation to researchers interested in developing studies or surveys in areas such as prevention research.

In fiscal year 1992, the Prevention Branch had a research budget of \$14 million and supported 40 grants. The Epidemiological Research Branch, which conducts etiology research, had a budget of \$28 million and supported between 60 and 70 individual projects.

#### Factors Addressed

NIDA has sponsored etiologic research for 20 years. Its studies indicate that correlates to drug use and abuse can be clustered into four groups of risk and protective factors: individual, family, peer group, and community. As a result, NIDA encourages research that is theory-based, has multiple components in the intervention, is comprehensive to include multiple stages and environments.

## DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

The Department of Housing and Urban Development (HUD) does not undertake research programs, but through its Public Housing Drug Elimination Program, targets a population identified as being at risk for drug abuse and addiction: residents of public housing.

The Public Housing Drug Elimination Program, funded at a level of \$165 million in fiscal

year 1992, has resulted in a total of more than 1,300 grants being awarded to public housing agencies for such activities as innovative drug education and treatment programs, counseling; support of tenant patrols acting in cooperation with local law enforcement agencies: physical improvements designed to enhance security; and employment of security personnel and investigators.

In addition, HUD sponsors a Youth Sports Program, designed to foster recreational activities in public housing, and technical assistance and training program that helps housing authorities and resident organizations assess the nature of local drug problems and develop a strategy for addressing problems.

#### DEPARTMENT OF INTERIOR

The **National Park Service** has implemented the DARE program in public schools adjacent to certain national parks and Indian reservations. The DARE program, taught by uniformed law enforcement officers, is designed to teach elementary and high school students how to resist peer pressure to use drugs. Over 70 park service personnel have been trained as DARE instructors; these instructors have made presentations to more than 8,000 students in 70 schools.

The Bureau of Indian Affairs (B IA) has been involved in the DARE program since 1988; 47 BIA personnel have presented the DARE program to 3,300 students. BIA has two substance abuse training programs—a counselor training program, to train school personnel, and a drug-free schools program, where BIA schools receive 1 percent of federal drug-free school funding (see description under Department of Education). BIA and HHS' Indian Health Service have an interdepartmental memorandum of agreement that results in the coordination of data collection, resources, and programs of both agencies to assist American Indian tribes and Alaska natives to achieve their goals in the provision of prevention, intervention, and treatment services for those affected by substance abuse.

## DEPARTMENT OF JUSTICE

The Department of Justice is primarily responsible for interdiction efforts to stem the sale, possession, and use of drugs. While law enforcement officials have a primary focus on supply-side issues, a number of programs are targeted toward demand reduction. These efforts, spread across several DoJ entities, do not focus on root causes or risk factors per se, but rather at broad-based awareness building efforts.

## ■ Drug Enforcement Administration

The Drug Enforcement Administration (DEA) employs 20 agents (out of a total force of approximately 3,000 agents) in a demand-reduction program. Each of 19 geographic divisions has a demand-reduction agent, with the exception of the Atlanta office, which has 2 such agents. Total DEA spending for its demand reduction program is \$700,000, with half those funds being obligated by DEA national headquarters, and the 19 field offices receiving funds ranging from \$12,000 to \$30,000 a year.

Because of the small budget and limited personnel for demand-reduction efforts, DEA attempts to work with intermediaries who develop drug prevention programs, in an attempt to maximize the effect of its efforts. DEA has identified five national priorities for its demand-reduction efforts: minority and high-risk youth, sports drug awareness programs, user accountability programs, training for law enforcement personnel, and development of community-based coalitions and alliances.

Activities include school visit programs, conducting about 100 drugs in the workplace seminars annually, and working with communities to adopt programs that are seen as being effective.

## ■ Federal Bureau of Investigation

The Federal Bureau of Investigation (FBI) established a Drug Demand Reduction Program (DDRP) in 1988 to augment the enforcement efforts of the FBI as a long-term solution to the drug abuse problem. DDRP seeks to reduce the demand for drugs in diverse communities through flexible

strategies designed to focus primarily on the youth and to respond to community requests and needs.

A staff of 5 persons at FBI headquarters supports 60 special agents (14 of whom are full-time) across the United States. Agents go into communities to do drug prevention work, usually educational presentations that are a component of a larger, ongoing, comprehensive program. Field office programs report to the Office of Public and Congressional Affairs at FBI headquarters in Washington.

The FBI budget for this activity is approximately \$300,000. The average field office receives about \$800, although larger field offices, such as New York and Los Angeles, receive close to \$8,000 for this program. The FBI has developed some materials on its own, and relies heavily on CSAP and the Department of Education for materials as well. Youths are the target population for most FBI-related programs.

## ■ Office of Justice Programs

The Office of Justice Programs (OJP) collects statistical data and conducts analyses of emerging criminal justice issues through five component units. Of these five components, two-the Bureau of Justice Assistance (BJA) and the Office of Juvenile Justice and Delinquency Prevention (OJJDP)—have a particular emphasis in substance abuse prevention issues.

## Programs and Target Populations

BJA provides funding, training, and technical assistance to State and local governments to combat violent crime, gang activity, and drug trafficking. BJA's primary effort is the National Citizens Crime Prevention Program, a coalition of more than 110 federal, national, and State organizations. The national "Take a Bite Out of Crime" program featuring McGruff the dog, is perhaps the best-known part of this campaign. An offshoot of this effort is BJA's community drug abuse prevention initiative, designed to assist programs and encourage active participation by communities in working with law enforcement officials to enhance the quality of life by reducing crime, violence and drug abuse. BJA also sponsors national

night-out campaigns (e.g., front-porch vigils and community patrols), the Southern Christian Leadership Conference's program targeting African-American neighborhoods, expansion of boys and girls clubs in public housing projects, efforts to train instructors in working with parents to help their children remain drug-free, and the DARE program. As of July 1992, almost 14,000 police officers had received DARE training through BJA's regional training centers.

OJJDP awards funds to state and local governments and sponsors research to prevent and control juvenile crime.

#### Factors Addressed

OJJDP has identified a number of risk factors as predictors for delinquency and drug use: 1) early variety and frequency of antisocial behavior in elementary schools; 2) having parents or siblings engage in crime or drug use; 3) family situations lacking supervision, excessively severe or inconsistent disciplinary practices, or low communication and involvement between parents and children; 4) family situations where high levels of conflict exist; 5) social isolation and multiple entrapment of parents in extreme poverty, poor living conditions, and low status occupations; 6) school failure; 7) association with drug-using peers; and 8) transitions, such as the change from elementary to junior high school, and junior to senior high school.

#### **Evacuation Methods**

Each project funded by BJA contains an evaluation plan. Although evaluation activities vary from bureau to bureau, four types of evaluations are generally conducted:

- Program assessments, where a program's strengths and weaknesses are described in order to evaluate progress made in solving the problem addressed by the program.
- Impact evaluations, describing how a program has an impact on the problem addressed, explaining the processes critical to the success of the program, with a focus on outcomes.

- Intensive impact evaluations, which explain why a program is effective as well as whether the program has had significant impact. They examine how a program produced results and depict the special processes to which the outcomes may be attributed.
- Evaluation reviews, which examine topics where a number of evaluations are already complete but have never been synthesized for use by the criminal justice system.

## United States Attorneys

The U.S. Attorneys are the chief federal prosecutors in 94 district offices across the country. Within each of the 94 offices is a Law Enforcement Coordinating Committee (LECC) to improve cooperation between State, local, and federal law enforcement agencies within each district.

The primary role of U.S. Attorneys offices is on supply-side issues, including criminal prosecution and enforcement of asset forfeiture laws. Since the mid- 1980s, LECCS have become more involved in demand-reduction efforts in their districts, by playing a role in activities such as training seminars for law enforcement officials on drug use prevention; drug education subcommittees; task forces to assess the needs and resources of local communities; involvement in school assemblies; and coordination of antidrug rallies.

LECCS tailor their programs to local needs, and have resulted in variety of activities. In Delaware, for example, the United States Attorney and police chiefs throughout the state created a police rock band that goes into local schools with a local antidrug message. In Florida, the U.S. Attorney organized a law enforcement summit on drug abuse prevention. In the Northern District of New York, the LECC coordinator helped prepare a 1 -hour television and radio program that was simulcast on major networks in the Syracuse area. In the Northern District of Georgia, the LECC coordinator is involved in turning a former nightclub that was seized and forfeited into a law enforcement center that will also be used by young people as a drug-free recreational center.

## DEPARTMENT OF LABOR

Section 4303 of the Anti-Drug Abuse Act of 1986 (Public Law 99-570 mandated the Secretary of the Department of Labor (DOL) to"... collect such information as is available on the incidence of drug abuse in the workplace and efforts to assist workers including counseling, rehabilitation, and employee assistance programs." The statute also authorized the Secretary to "conduct such additional research as is necessary to assess the impact and extent of drug abuse and remediation efforts."

While DOL lacks a direct mandate in substance abuse prevention, and therefore, deals indirectly with identification of root causes or risk factors, the Department is concerned because substance abuse and addiction directly affects several of its major mandates, including employee training, worker safety, occupational health, productivity, and competitiveness. Approximately 66 percent of illicit drug users are employed either full- or part-time, and it is assumed that alcohol abusers (1 in every 10 people in this country) are represented in the work force at about the same proportion that they are in the general population.

The Employment Training and Education Administration provides job training and education to address unemployment, which is a risk factor often associated with substance abuse. Through the Job Training Partnership Act, money is distributed through block grants to the States. Recipients of such monies are encouraged to provide drug education and awareness to participants.

The Job Corps program provides residential training programs for youth aged 16 to 21. They conduct drug screening, education, and orientation at all 105 Job Corps training sites, and all sites do some drug intervention.

The Mine Safety and Health Administration formed a substance abuse committee in 1985, consisting of representatives of labor, management in union and nonunion mines, and federal government agencies that have a role in reducing substance abuse. The committee has developed a manual and two videos on substance abuse prevention for distribution through 800 mines nationwide.

The primary effort undertaken by DOL has been a survey by the Bureau of Labor Statistics to collect information about drug testing programs in workplaces. This survey found that drug testing was more prevalent in larger establishments than in smaller ones, current employees were most often tested for reasonable suspicion, testing programs were more likely to target job applicants than current employees, and applicants were more likely than current employees to test positive for drugs.

The Department, in conjunction with the Small Business Administration (SBA) and the Office of National Drug Control Policy, has sponsored a national conference on substance abuse in small business, and is in the process of developing a substance abuse data base, drawing in large part on information available through other government agencies. Through the Occupational Safety and Health Administration, administers an employee assistance grant program to employers and employer groups to enable the development of employee drug and alcohol abuse programs. Under this grant program, \$1.5 mill ion has been awarded to 23 groups.

## OFFICE OF NATIONAL DRUG CONTROL POLICY

ONDCP was created by Congress as part of the Anti-Drug Abuse Act of 1988 (Public Law 100-690). The Director of ONDCP, the so-called drug czar, is responsible for coordinating U.S. drug control policy, resources, and operations.

ONDCP has no authority over federal agencies, nor does it issue grants or conduct research. As a policymaking agency, ONDCP created a national drug control strategy, which contained four elements for preventing drug use: mobilizing communities against drugs, educating young people that drug use is harmful and wrong, encouraging businesses to establish drug-free workplace programs, and promoting antidrug programs through the media.

Following his election in 1992, President Clinton cut the size of ONDCP staff and announced his intention to elevate the drug czar to Cabinet status.

## SMALL BUSINESS ADMINISTRATION

SBA'S Office of Workplace Substance Abuse Prevention was established in 1992 to coordinate the Agency's efforts to help small businesses meet the challenges imposed by substance abuse in the workplace. In each of SBA'S 110 field offices throughout the country, an individual serves as a substance abuse coordinator, to provide direct assistance to the small business community.

The most tangible SBA effort to date is the development of a self-help drug kit to provide assistance and guidance to small business owners wishing to establish and implement a workplace substance abuse program. The kit, "Drug-Free: It's Good for Business," is a step-by-step system with instructions, training aids, forms, and informational material to assist business owners in adopting formal antidrug policies, provide supervisory and employee training, organize an employee assistance program, and (if desired) establish drug testing procedures.

SBA is developing a STOP DRUGS initiative (Small Businesses Together and Organized to Prevent Drugs), a coalition of small businesses willing to share information with other small business operators. SBA is working with NIDA and DOL to undertake research that specifically examines the effect of employee substance abuse on small businesses. SBA is also working with the DoJ's Weed and Seed program. SBA views its role as part of the '\*seeding' component by offering financial and business development resources to targeted communities.

## DEPARTMENT OF TRANSPORTATION

The National Highway Traffic Safety Administration (NHTSA), part of the Department of Transportation, regulates automobile safety and administers traffic safety programs. Because alcohol is the single largest factor involved in highway auto deaths and injuries, NHTSA has targeted as its primary risk group young people aged 15 to 20 (the age group with the highest ratio of accidents attributed to alcohol).

NHTSA'S programs fall under two categories-deterrence programs and prevention programs. Deterrence programs include advocating for the passage of State laws in a number of areas, including: immediate suspension of licenses for driving under the influence of alcohol, lowering the blood alcohol level at which it is illegal to drive to .08 (all States except five currently have a standard of O. 10), prohibiting open containers of alcohol in cars, prohibiting consumption of alcohol in automobiles, sobriety check points, provisional licensing (e.g., laws creating restrictions on new drivers such as daylight-only driving), zero tolerance (e.g., laws making it illegal for a minor to have any level of alcohol in his/her blood), and improved enforcement of laws already in effect (e.g., minimum age alcohol purchase laws). Prevention programs include public information and education programs aimed at schools, employers, and programs aimed at responsible use of alcohol. NHTSA created the Techniques for Effective Alcohol Management (TEAM) program, and has worked with the Ad Council in creating public service announcements on drinking and driving. NHTSA has also collaborated with other federal agencies to identify communication strategies to reach young persons at high risk for health-related problems (with HHS' Office for Disease Prevention and Health Promotion), and to develop workshops for school-based programs (with the Department of Education and HHS' CSAP.