H. R. 2291

To extend the authorization of the Drug-Free Communities Support Program for an additional 5 years, to authorize a National Community Antidrug Coalition Institute, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

June 21, 2001

Mr. Portman (for himself, Mr. Levin, Mr. Cummings, Mr. Oxley, Mr. Rangel, Mr. Herger, Mr. Wynn, Mr. LaTourette, Mr. Stupak, Mr. Lewis of Kentucky, Ms. Carson of Indiana, Mr. Isakson, Mr. Kildee, Mr. Cunningham, Mr. Reyes, Mr. Watkins of Oklahoma, Mr. McNulty, Mr. Sessions, Mr. Abercrombie, and Mr. Barrett of Wisconsin) introduced the following bill; which was referred to the Committee on Government Reform, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To extend the authorization of the Drug-Free Communities Support Program for an additional 5 years, to authorize a National Community Antidrug Coalition Institute, and for other purposes.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,

1	SECTION 1. FIVE-YEAR EXTENSION OF DRUG-FREE COMMU-
2	NITIES SUPPORT PROGRAM.
3	(a) FINDINGS.—Congress makes the following find-
4	ings:
5	(1) In the next 15 years, the youth population
6	in the United States will grow by 21 percent, adding
7	6,500,000 youth to the population of the United
8	States. Even if drug use rates remain constant,
9	there will be a huge surge in drug-related problems,
10	such as academic failure, drug-related violence, and
11	HIV incidence, simply due to this population in-
12	crease.
13	(2) According to the 1994–1996 National
14	Household Survey, 60 percent of students age 12 to
15	17 who frequently cut classes and who reported de-
16	linquent behavior in the past 6 months used mari-
17	juana 52 days or more in the previous year.
18	(3) The 2000 Washington Kids Count survey
19	conducted by the University of Washington reported
20	that students whose peers have little or no involve-
21	ment with drinking and drugs have higher math and
22	reading scores than students whose peers had low
23	level drinking or drug use.
24	(4) Substance abuse prevention works. In 1999,
25	only 10 percent of teens saw marijuana users as

popular, compared to 17 percent in 1998 and 19

26

- percent in 1997. The rate of past-month use of any drug among 12 to 17 year olds declined 26 percent between 1997 and 1999. Marijuana use for sixth through eighth graders is at the lowest point in 5 years, as is use of cocaine, inhalants, and hallucinogens.
 - (5) Community Anti-Drug Coalitions throughout the United States are successfully developing and implementing comprehensive, long-term strategies to reduce substance abuse among youth on a sustained basis. For example:
 - (A) The Boston Coalition brought college and university presidents together to create the Cooperative Agreement on Underage Drinking. This agreement represents the first coordinated effort of Boston's many institutions of higher education to address issues such as binge drinking, underage drinking, and changing the norms surrounding alcohol abuse that exist on college and university campuses.
 - (B) In 2000, the Coalition for a Drug-Free Greater Cincinnati surveyed more than 47,000 local students in grades 7 through 12. The results provided evidence that the Coalition's initiatives are working. For the first time in a dec-

ade, teen drug use in Greater Cincinnati appears to be leveling off. The data collected from the survey has served as a tool to strengthen relationships between schools and communities, as well as facilitate the growth of anti-drug coalitions in communities where such coalitions had not existed.

- (C) The Miami Coalition used a three-part strategy to decrease the percentage of high school seniors who reported using marijuana at least once during the most recent 30-day period. The development of a media strategy, the creation of a network of prevention agencies, and discussions with high school students about the dangers of marijuana all contributed to a decrease in the percentage of seniors who reported using marijuana from over 22 percent in 1995 to 9 percent in 1997. The Miami Coalition was able to achieve these results while national rates of marijuana use were increasing.
- (D) The Nashville Prevention Partnership worked with elementary and middle school children in an attempt to influence them toward positive life goals and discourage them from using substances. The Partnership targeted an

area in East Nashville and created after school programs, mentoring opportunities, attendance initiatives, and safe passages to and from school. Attendance and test scores increased as a result of the program.

- (E) At a youth-led town meeting sponsored by the Bering Strait Community Partnership in Nome, Alaska, youth identified a need for a safe, substance-free space. With help from a variety of community partners, the Partnership staff and youth members created the Java Hut, a substance-free coffeehouse designed for youth. The Java Hut is helping to change norms in the community by providing a fun, youth-friendly atmosphere and activities that are not centered around alcohol or marijuana.
- (F) Portland's Regional Drug Initiative (RDI) has promoted the establishment of drug-free workplaces among the city's large and small employers. Over 3,000 employers have attended an RDI training session, and of those, 92 percent have instituted drug-free workplace policies. As a result, there has been a 5.5 percent decrease in positive workplace drug tests.

2

3

4

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

(G) San Antonio Fighting Back worked to increase the age at which youth first used illegal substances. Research suggests that the later the age of first use, the lower the risk that a young person will become a regular substance abuser. As a result, the age of first illegal drug use increased from 9.4 years in 1992 to 13.5 years in 1997.

(H) In 1990, multiple data sources confirmed a trend of increased alcohol use by teenagers in the Troy community. Using its "multiple strategies over multiple sectors" approach, the Troy Coalition worked with parents, physicians, students, coaches, and others to address this problem from several angles. As a result, the rate of twelfth grade students who had consumed alcohol in the past month decreased from 62.1 percent to 53.3 percent between 1991 and 1998, and the rate of eighth grade students decreased from 26.3 percent to 17.4 percent. The Troy Coalition believes that this decline represents not only a change in behavior on the part of students, but also a change in the norms of the community.

1	(6) Despite these successes, drug use continues
2	to be a serious problem facing communities across
3	the United States. For example:
4	(A) According to the Pulse Check: Trends
5	in Drug Abuse Mid-Year 2000 report—
6	(i) crack and powder cocaine remains
7	the most serious drug problem;
8	(ii) marijuana remains the most wide-
9	ly available illicit drug, and its potency is
10	on the rise;
11	(iii) treatment sources report an in-
12	crease in admissions with marijuana as the
13	primary drug of abuse—and adolescents
14	outnumber other age groups entering
15	treatment for marijuana;
16	(iv) 80 percent of Pulse Check sources
17	reported increased availability of club
18	drugs, with ecstasy (MDMA) and ketamine
19	the most widely cited club drugs and seven
20	sources reporting that powder cocaine is
21	being used as a club drug by young adults;
22	(v) ecstasy abuse and trafficking is
23	expanding, no longer confined to the
24	"rave" scene;

1	(vi) the sale and use of club drugs has
2	grown from nightclubs and raves to high
3	schools, the streets, neighborhoods, open
4	venues, and younger ages;
5	(vii) ecstasy users often are unknow-
6	ingly purchasing adulterated tablets or
7	some other substance sold as MDMA; and
8	(viii) along with reports of increased
9	heroin snorting as a route of administra-
10	tion for initiates, there is also an increase
11	in injecting initiates and the negative
12	health consequences associated with injec-
13	tion (for example, increases in HIV/AIDS
14	and Hepatitis C) suggesting that there is
15	a generational forgetting of the dangers of
16	injection of the drug.
17	(B) The 2000 Parent's Resource Institute
18	for Drug Education study reported that 23.6
19	percent of children in the sixth through twelfth
20	grades used illicit drugs in the past year. The
21	same study found that monthly usage among
22	this group was 15.3 percent.
23	(C) According to the 2000 Monitoring the
24	Future study, the use of ecstasy among eighth
25	graders increased from 1.7 percent in 1999 to

1	3.1 percent in 2000, among tenth graders from
2	4.4 percent to 5.4 percent, and from 5.6 per-
3	cent to 8.2 percent among twelfth graders.
4	(D) A 1999 Mellman Group study found
5	that—
6	(i) 56 percent of the population in the
7	United States believed that drug use was
8	increasing in 1999;
9	(ii) 92 percent of the population
10	viewed illegal drug use as a serious prob-
11	lem in the United States; and
12	(iii) 73 percent of the population
13	viewed illegal drug use as a serious prob-
14	lem in their communities.
15	(7) According to the 2001 report of the Na-
16	tional Center on Addiction and Substance Abuse at
17	Columbia University entitled "Shoveling Up: The
18	Impact of Substance Abuse on State Budgets",
19	using the most conservative assumption, in 1998
20	States spent \$77,900,000,000 to shovel up the
21	wreckage of substance abuse, only \$3,000,000,000
22	to prevent and treat the problem and \$433,000,000
23	for alcohol and tobacco regulation and compliance.
24	This \$77,900,000,000 burden was distributed as fol-
25	lows:

1	(A) \$30,700,000,000 in the justice system
2	(77 percent of justice spending).
3	(B) \$16,500,000,000 in education costs
4	(10 percent of education spending).
5	(C) \$15,200,000,000 in health costs (25
6	percent of health spending).
7	(D) \$7,700,000,000 in child and family as-
8	sistance (32 percent of child and family assist-
9	ance spending).
10	(E) \$5,900,000,000 in mental health and
11	developmental disabilities (31 percent of mental
12	health spending).
13	(F) $$1,500,000,000$ in public safety (26)
14	percent of public safety spending) and
15	\$400,000,000 for the state workforce.
16	(8) Intergovernmental cooperation and coordi-
17	nation through national, State, and local or tribal
18	leadership and partnerships are critical to facilitate
19	the reduction of substance abuse among youth in
20	communities across the United States.
21	(9) Substance abuse is perceived as a much
22	greater problem nationally than at the community
23	level. According to a 2001 study sponsored by The
24	Pew Charitable Trusts, between 1994 and 2000—

1	(A) there was a 43 percent increase in the
2	percentage of Americans who felt progress was
3	being made in the war on drugs at the commu-
4	nity level;
5	(B) only 9 percent of Americans say drug
6	abuse is a "crisis" in their neighborhood, com-
7	pared to 27 percent who say this about the na-
8	tion; and
9	(C) the percentage of those who felt we
10	lost ground in the war on drugs on a commu-
11	nity level fell by more than a quarter, from 51
12	percent in 1994 to 37 percent in 2000.
13	(b) Extension and Increase of Program.—Sec-
14	tion 1024(a) of the National Narcotics Leadership Act of
15	1988 (21 U.S.C. 1524(a)) is amended—
16	(1) by striking "and" at the end of paragraph
17	(4); and
18	(2) by striking paragraph (5) and inserting the
19	following new paragraphs:
20	"(5) \$50,600,000 for fiscal year 2002;
21	"(6) \$60,000,000 for fiscal year 2003;
22	((7) \$70,000,000 for fiscal year 2004;
23	"(8) \$70,000,000 for fiscal year 2005;
24	"(9) $$75,000,000$ for fiscal year 2006; and
25	" (10) \$75,000,000 for fiscal year 2007.".

1	(c) Extension of Limitation on Administrative
2	Costs.—Section 1024(b) of that Act (21 U.S.C. 1524(b))
3	is amended by striking paragraph (5) and inserting the
4	following new paragraph (5):
5	"(5) 8 percent for each of fiscal years 2002
6	through 2007.".
7	(d) Additional Grants.—Section 1032(b) of that
8	Act (21 U.S.C. 1533(b)) is amended by adding at the end
9	the following new paragraph (3):
10	"(3) Additional grants.—
11	"(A) In general.—Subject to subpara-
12	graph (F), the Administrator may award an ad-
13	ditional grant under this paragraph to an eligi-
14	ble coalition awarded a grant under paragraph
15	(1) or (2) for any first fiscal year after the end
16	of the 4-year period following the period of the
17	initial grant under paragraph (1) or (2), as the
18	case may be.
19	"(B) Scope of Grants.—A coalition
20	awarded a grant under paragraph (1) or (2),
21	including a renewal grant under such para-
22	graph, may not be awarded another grant
23	under such paragraph, and is eligible for an ad-
24	ditional grant under this section only under this
25	paragraph.

13 1 "(C) NO PRIORITY FOR APPLICATIONS.— 2 The Administrator may not afford a higher pri-3 ority in the award of an additional grant under 4 this paragraph than the Administrator would 5 afford the applicant for the grant if the appli-6 cant were submitting an application for an ini-7 tial grant under paragraph (1) or (2) rather 8 than an application for a grant under this para-9 graph. "(D) RENEWAL GRANTS.—Subject to sub-10 11 paragraph (F), the Administrator may award a 12 renewal grant to a grant recipient under this 13 paragraph for each of the fiscal years of the 4-14 fiscal year period following the fiscal year for 15 which the initial additional grant under sub-16 paragraph (A) is awarded in an amount not to 17

exceed amounts as follows:

"(i) For the first and second fiscal years of that 4-fiscal year period, the amount equal to 80 percent of the non-Federal funds, including in-kind contributions, raised by the coalition for the applicable fiscal year.

"(ii) For the second, third, and fourth fiscal years of that 4-fiscal year period, the

18

19

20

21

22

23

24

25

- 1 amount equal to 67 percent of the non-2 Federal funds, including in-kind contribu-3 tions, raised by the coalition for the appli-4 cable fiscal year. "(E) Suspension.—If a grant recipient 6 under this paragraph fails to continue to meet 7 the criteria specified in subsection (a), the Ad-8 ministrator may suspend the grant, after pro-9 viding written notice to the grant recipient and 10 an opportunity to appeal. 11 "(F) LIMITATION.—The amount of a grant 12 award under this paragraph may not exceed 13 \$100,000 for a fiscal year.". 14 (e) Data Collection and Dissemination.—Sec-15 tion 1033(b) of that Act (21 U.S.C. 1533(b)) is amended by adding at the end the following new paragraph: 16 17 "(3) Consultation.—The Administrator shall
- "(3) Consultation.—The Administrator shall
 carry out activities under this subsection in consultation with the Advisory Commission and the National
 Community Antidrug Coalition Institute.".
- 21 (f) Limitation on Use of Certain Funds for 22 Evaluation of Program.—Section 1033(b) of that Act, 23 as amended by subsection (e) of this section, is further 24 is amended by adding at the end the following new para-25 graph:

1	"(4) Limitation on use of certain funds
2	FOR EVALUATION OF PROGRAM.—Amounts for ac-
3	tivities under paragraph (2)(B) may not be derived
4	from amounts under section 1024(a) except for
5	amounts that are available under section 1024(b) for
6	administrative costs.".
7	SEC. 2. SUPPLEMENTAL GRANTS FOR COALITION MEN-
8	TORING ACTIVITIES UNDER DRUG-FREE COM-
9	MUNITIES SUPPORT PROGRAM.
10	Subchapter I of chapter 2 of the National Narcotics
11	Leadership Act of 1988 (21 U.S.C. 1531 et seq.) is
12	amended by adding at the end the following new section:
13	"SEC. 1035. SUPPLEMENTAL GRANTS FOR COALITION MEN-
14	TORING ACTIVITIES.
15	"(a) AUTHORITY TO MAKE GRANTS.—As part of the
16	program established under section 1031, the Director may
17	award an initial grant under this subsection, and renewal
18	grants under subsection (f), to any coalition awarded a
19	grant under section 1032 that meets the criteria specified
20	in subsection (d) in order to fund coalition mentoring ac-
21	tivities by such coalition in support of the program.
22	"(b) Treatment With Other Grants.—
23	"(1) Supplement.—A grant awarded to a coa-
24	lition under this section is in addition to any grant
25	awarded to the coalition under section 1032.

1	"(2) Requirement for basic grant.—A coa-
2	lition may not be awarded a grant under this section
3	for a fiscal year unless the coalition was awarded a
4	grant or renewal grant under section 1032(b) for
5	that fiscal year.
6	"(c) APPLICATION.—A coalition seeking a grant
7	under this section shall submit to the Administrator ar
8	application for the grant in such form and manner as the
9	Administrator may require.
10	"(d) Criteria.—A coalition meets the criteria speci-
11	fied in this subsection if the coalition—
12	"(1) has been in existence for at least 5 years
13	"(2) has achieved, by or through its own ef-
14	forts, measurable results in the prevention and treat-
15	ment of substance abuse among youth;
16	"(3) has staff or members willing to serve as
17	mentors for persons seeking to start or expand the
18	activities of other coalitions in the prevention and
19	treatment of substance abuse;
20	"(4) has demonstrable support from some mem-
21	bers of the community in which the coalition men-
22	toring activities to be supported by the grant under
23	this section are to be carried out; and

1	"(5) submits to the Administrator a detailed
2	plan for the coalition mentoring activities to be sup-
3	ported by the grant under this section.
4	"(e) Use of Grant Funds.—A coalition awarded
5	a grant under this section shall use the grant amount for
6	mentoring activities to support and encourage the develop-
7	ment of new, self-supporting community coalitions that
8	are focused on the prevention and treatment of substance
9	abuse in such new coalitions' communities. The mentoring
10	coalition shall encourage such development in accordance
11	with the plan submitted by the mentoring coalition under
12	subsection $(d)(5)$.
13	"(f) Renewal Grants.—The Administrator may
14	make a renewal grant to any coalition awarded a grant
15	under subsection (a), or a previous renewal grant under
16	this subsection, if the coalition, at the time of application
17	for such renewal grant—
18	"(1) continues to meet the criteria specified in
19	subsection (d); and
20	"(2) has made demonstrable progress in the de-
21	velopment of one or more new, self-supporting com-
22	
	munity coalitions that are focused on the prevention
23	and treatment of substance abuse.

- 1 "(1) IN GENERAL.—Subject to paragraphs (2) 2 and (3), the total amount of grants awarded to a co-
- 3 alition under this section for a fiscal year may not
- 4 exceed the amount of non-Federal funds raised by
- 5 the coalition, including in-kind contributions, for
- 6 that fiscal year.
- 7 "(2) Initial grants.—The amount of the ini-
- 8 tial grant awarded to a coalition under subsection
- 9 (a) may not exceed \$75,000.
- 10 "(3) Renewal grants.—The total amount of
- 11 renewal grants awarded to a coalition under sub-
- section (f) for any fiscal year may not exceed
- 13 \$75,000.
- 14 "(h) FISCAL YEAR LIMITATION ON AMOUNT AVAIL-
- 15 ABLE FOR GRANTS.—The total amount available for
- 16 grants under this section, including renewal grants under
- 17 subsection (f), in any fiscal year may not exceed the
- 18 amount equal to five percent of the amount authorized to
- 19 be appropriated by section 1024(a) for that fiscal year.".
- 20 SEC. 3. FIVE-YEAR EXTENSION OF ADVISORY COMMISSION
- 21 ON DRUG-FREE COMMUNITIES.
- Section 1048 of the National Narcotics Leadership
- 23 Act of 1988 (21 U.S.C. 1548) is amended by striking
- 24 "2002" and inserting "2007".

1 SEC. 4. AUTHORIZATION FOR NATIONAL COMMUNITY ANTI-

2	DRUG COALITION INSTITUTE.
3	(a) In General.—The Director of the Office of Na-
4	tional Drug Control Policy may, using amounts authorized
5	to be appropriated by subsection (d), make a grant to an
6	eligible organization to provide for the establishment of
7	a National Community Antidrug Coalition Institute.
8	(b) Eligible Organizations.—An organization eli-
9	gible for the grant under subsection (a) is any national
10	nonprofit organization that represents, provides technical
11	assistance and training to, and has special expertise and
12	broad, national-level experience in community antidrug
13	coalitions under section 1032 of the National Narcotics
14	Leadership Act of 1988 (21 U.S.C. 1532).
15	(c) Use of Grant Amount.—The organization re-
16	ceiving the grant under subsection (a) shall establish a
17	National Community Antidrug Coalition Institute to—
18	(1) provide education, training, and technical
19	assistance for coalition leaders and community
20	teams;
21	(2) develop and disseminate evaluation tools,
22	mechanisms, and measures to better assess and doc-
23	ument coalition performance measures and out-
24	comes; and

1	(3) bridge the gap between research and prac-
2	tice by translating knowledge from research into
3	practical information.
4	(d) Authorization of Appropriations.—There is
5	authorized to be appropriated for purposes of activities
6	under this section, including the grant under subsection
7	(a), amounts as follows:
8	(1) For each of fiscal years 2002 and 2003,
9	\$2,000,000.
10	(2) For each of fiscal years 2004 through 2007,
11	such sums as may be necessary for such activities.

 \bigcirc