



National Child Traumatic Stress Network FUNDING UPDATE: April 2008

Funding Highlight: Substance Abuse and Mental Health Services Administration (SAMHSA)

This is the first in a series of quarterly funding updates to support National Child Traumatic Stress Network (NCTSN) programs and initiatives. The purposes of the Funding Updates are twofold: to provide a deeper understanding of the overall funding picture in relevant service areas and also to supplement monthly announcements by alerting Network members of currently available funding opportunities.

This quarter's update focuses on Substance Abuse and Mental Health Services Administration (SAMHSA) grants that can support NCTSN members' work in the areas of children's mental health, substance abuse prevention and treatment programs, and suicide and youth violence prevention. It is organized as follows:

Section I: Funding Highlight – This section serves as an overview of SAMHSA and its funding capacities, highlighting SAMHSA's three funding centers (Center for Mental Health Services, Center for Substance Abuse Prevention and Center for Substance Abuse Treatment) and describing funding sources that can support NCTSN programs and their work. This section also provides members with a more thorough understanding of how relevant grants administered by SAMHSA flow into states and communities.

Section II: Current Opportunities – This section provides basic information on SAMHSA funding sources that are currently available and that can potentially provide support for NCTSN programs and initiatives. The Finance Project staff has developed this list of SAMHSA funding sources by scanning and identifying federal requests for proposals or requests for applications that are aligned with the purposes and priorities of NCTSN members. Some of these may be funding sources through which Network members can apply directly to SAMHSA; others may be sources through which a partnership is required to be eligible; and finally, some others may be sources through which state or local government agencies receive funding and then distribute those funds to local community-based agencies, organizations and partnerships through sub-grants or contracts.

Because we are including sources where grants flow through multiple layers of bureaucracy (i.e., federal government to state and then state to localities), we will sometimes include funding sources where the federal deadline has recently passed or is imminent. In these cases, the sources are included because we want Network members to be aware that these funds may be flowing into states and localities in the future. Timely announcements of these and other funding opportunities are made available to the NCTSN through the monthly Federal Funding Announcements distributed by email and through postings on the NCTSN website (www.nctsn.org, under "Resources/Sustainability").

Section III: Helpful Resources – This section highlights websites and publications that provide supplemental information on the funding sources discussed in the Funding Highlight that may be helpful for NCTSN members.

**Section I:
Funding Highlight: Substance Abuse and Mental Health Services Administration (SAMHSA)**

Overview

Many NCTSN grantees experience challenges in finding funding to support children’s mental health, substance abuse prevention and treatment programs, and suicide and youth violence prevention. To help Network members overcome this obstacle, this Funding Update highlights the Substance Abuse and Mental Health Services Administration (SAMHSA), a Federal agency created in 1992 to allocate funding toward programs that improve the lives of individuals with or at risk for mental and substance use disorders. This section describes SAMHSA’s program and funding structure and describes funding sources that may be utilized by NCTSN programs and initiatives.

Funding Landscape and Trends

With a budget of approximately \$3.3 billion in Fiscal Year '07 (\$3.4 billion in FY '08, and an estimated budget of \$3.2 billion in FY '09¹), SAMHSA administers the bulk of federal funding that supports substance abuse prevention and treatment and mental health services. SAMHSA’s two largest grant programs, the **Community Mental Health Services Block Grant** and the **Substance Abuse Prevention and Treatment Block Grant Program**, comprised approximately 68 percent of SAMHSA’s FY '07 budget, helping to support a wide range of community based organizations. (For FY '08, allocated funds for these two programs will comprise 65 percent of the total SAMHSA budget; FY '09 estimates for these two programs indicate that funding levels are expected to remain relatively unchanged, hovering around 69 percent of the total SAMHSA budget.)²

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| <p style="text-align: center;">SAMHSA Principles</p> <ul style="list-style-type: none"> • Science to services/evidence-based practices • Data for performance measurement and management • Collaboration with public and private partners • Recovery/reducing stigma and barriers to services • Cultural competency/eliminating disparities • Community and faith-based approaches • Trauma and violence • Financing strategies and cost effectiveness • Rural and other specific settings • Workforce development <p style="text-align: center;">SAMHSA Priority Issues</p> <ul style="list-style-type: none"> • Co-occurring mental health and substance abuse disorders • Substance abuse treatment capacity • Seclusion and restraint • Strategic prevention framework • Children and families • Mental health system transformation • Disaster readiness and response • Homelessness • Aging • HIV/AIDS and hepatitis • Criminal justice |
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| Grant Program | Funding Levels | | |
|---------------------------------------------------------------------------|----------------|---------------|----------------------|
| | FY'07 | FY'08 | FY'09 (Estimates) |
| Community Mental Health Services Block Grant ³ | \$428 million | \$420 million | \$420 million |
| Substance Abuse Prevention and Treatment Block Grant Program ⁴ | \$1.8 billion | \$1.8 billion | \$1.8 billion |

¹ FY '09 numbers are based on the President’s budget.

² [Department of Health and Human Services, Fiscal Year 2009, Substance Abuse and Mental Health Services Administration, Justification of Estimates for Appropriations Committee](http://www.samhsa.gov/Budget/FY2009/SAMHSA_CJ2009.pdf), http://www.samhsa.gov/Budget/FY2009/SAMHSA_CJ2009.pdf, pg. 12, 14

³ Access to funding is related to state priorities

⁴ Figures rounded to nearest 100 million

Like all block grants, states have considerable flexibility to direct these dollars according to state priorities and service needs. Some states allocate funds to counties on a per capita basis, while others make awards directly to community agencies. To receive these funds, states must annually submit a plan outlining their priorities and intended uses of the block grant funds.⁵ The accessibility of these funds is linked to National Performance Outcome Measures--NOMs. NOMs allow states more flexibility in allocating their dollars in exchange for increased accountability and required reporting on outcomes. (SAMHSA's targeted outcomes are listed in the box to the right). As SAMHSA has moved forward with this effort, community-based providers with a history of and capacity to track and meet outcomes have been in a better position to access block grant funds.

- | SAMHSA's Targeted Outcomes |
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| <ul style="list-style-type: none"> • Abstinence from alcohol abuse or drug use and decreased symptoms of mental illness • Increased or retained employment and school enrollment • Decreased involvement with the criminal justice system • Increased stability in family and living conditions • Increased access to services • Increased retention in substance abuse treatment and reduced utilization of psychiatric inpatient beds • Increased social supports and social connectedness • Client perception of care • Cost effectiveness, and • Use of evidence-based practices. |

SAMHSA also provides a [Funding Forecast](#)⁶ that indicates when specific program grants are expected to be available. Generally, SAMHSA issues the majority of its requests for proposals in the winter and spring, with applications closing in April and May. On an ongoing basis, the critical time to monitor funding announcements is January through April. Some requests that are published in this quarter are highlighted in Section II, *Current Opportunities* of this update; others are disseminated through the monthly NCTSN Federal Funding Announcements.

SAMHSA is organized into three centers that administer state grants and discretionary funding.⁷ Below is a description of the three centers and programs within each of the centers that have the potential to support NCTSN initiatives:

- 1) **Center for Mental Health Services (CMHS), Budget: FY '07 \$883 million, FY '08 \$910 million, FY '09 estimate \$784 million** – CMHS seeks to improve the availability and accessibility of high-quality, community-based services for youth or adolescents with or at risk for mental illnesses. CMHS pursues this mission by helping States and various organizations improve and increase the quality and range of their treatment, rehabilitation and support services. Further, it encourages a range of programs—such as systems of care—to respond to the increasing number of mental, emotional and behavioral problems among children.

CMHS program funds are available through block grants and discretionary/competitive grants to States, political subdivisions of States, Territories, Indian Tribes or tribal organizations, non-profit organizations, institutions of higher education, and criminal justice agencies. These funds can be used to build on the existing services so that the array of services required to meet the needs of the target population is available and accessible. Below is a listing of programs that are relevant to NCTSN programs and initiatives. (For additional information, visit <http://www.mentalhealth.samhsa.gov> or visit http://www.samhsa.gov/Budget/FY2009/SAMHSA_CJ2009.pdf).

⁵ State contacts for the Community Mental Health Services Block Grant are available at: <http://www.mentalhealth.samhsa.gov/databases>. State contacts and web pages for the Substance Abuse Prevention and Treatment Block Grant Program are available at: <http://www.treatment.org>

⁶ This information is available at <http://samhsa.gov/Grants/2008/fy2008.aspx>.

⁷ Discretionary grants are catalogued under Programs of Regional and National Significance (PRNS). Within each of the three centers, PRNS is distributed through two program areas: Capacity; and Science and Service. Programs in the Capacity category provide funding to implement service improvements using evidence-based approaches and to identify and implement needed systemic changes. Programs within the Science and Service category promote the identification and increase the availability of practices thought to have potential for broad service improvement.

- Community Mental Health Services Block Grant (FY '07 Budget: \$428 Million)**
 The second biggest source of funding within SAMHSA, this block grant distributes funds to 59 eligible States and Territories through a formula based upon specified economic and demographic variables. Funding is then allocated to eligible organizations within a given State. Funding may be used to provide community mental health services for children with serious emotional disturbances. Applications for FY '08 are due September 1, 2008.
- Children's Mental Health Initiative (FY '07 Budget: \$104 Million)**
 The third biggest source of funding within SAMHSA, this grant is available through competitive, cooperative agreements to States, political subdivisions of States, Territories and Indian Tribes or tribal organizations. The program primarily supports SAMHSA's Capacity Goal, by supporting comprehensive, community based systems of care for children and adolescents with serious emotional disorders. Grants, funded for a total of 6 years, with an increasing non-Federal match requirement over the term of the award, are intended to spur collaboration across agencies, families, and youth for the purpose of improving access and expanding the array of coordinated community-based, culturally and linguistically competent services and supports for children and youth with a serious emotional disturbance.
- Safe Schools/Healthy Student Grant Program (FY '07 Budget: \$93 Million)**
 Since 1999, the [U.S. Departments of Education and Justice, and SAMHSA](#) have collaborated on the Safe Schools/Healthy Students Initiative, a discretionary grant program that provides students, schools, and communities with federal funding to implement an enhanced, coordinated, comprehensive plan of activities, programs, and services that focus on promoting healthy childhood development and preventing violence and alcohol and other drug abuse. Eligible Local Educational Agencies (LEAs) or a consortium of LEAs, in partnership with their local mental health public authority, local law enforcement agency, and local juvenile justice entity, are eligible to submit a single application for federal funds to support a variety of activities. Funds flow directly to eligible grantees or consortia of grantees. Contact the Department of Education to apply for this grant.
- Mental Health Targeted Capacity Expansion (FY '07 Budget: \$80 Million)**
 The new Mental Health Targeted Capacity Expansion Discretionary Grants program is designed to help communities to bridge gaps in treatment services. CMHS will award 14 grants to State, local governments, communities and tribal entities to expand or enhance a community's ability to provide rapid, strategic, comprehensive, integrated and creative, community-based responses to a specific, well-documented mental health capacity problem, including technical assistance. This program will foster the provision of evidence-based treatment practices and will address the emerging mental health needs identified by States and local communities. These areas could include school violence, Post-Traumatic Stress Disorder (PTSD), homelessness, older adults with mental health needs, and other mental health system capacity expansion needs.
- Suicide Prevention Grants (FY '07 Budget: \$36 Million)**
 With \$36 million allocated toward five discretionary Suicide Prevention programs, these grants aim to improve public and professional awareness of suicide and suicide prevention. The Garrett Lee Smith Memorial Act (GLS) allows SAMHSA to manage an additional two programs; one, the GLS State/Tribal Youth Suicide

Prevention and Early Intervention Grant Program, supports 31 States and 7 Tribes/tribal organizations in developing and implementing youth suicide prevention and early intervention strategies involving public-private collaborations among youth serving institutions. The second, the GLS Campus Suicide Prevention Program, provides funding to institutions of higher education to prevent suicide and suicide attempts and to enhance services for students with mental and behavioral health problems.

In addition to activities that build suicide prevention capacity, SAMHSA also supports the Garrett Lee Smith Suicide Prevention Resource Center within its Science and Service portfolio. This initiative promotes the implementation of the National Strategy for Suicide Prevention and enhances the nation's mental health infrastructure by providing States, government agencies, private organizations, colleges and universities, and suicide survivor and mental health consumer groups with access to the science and experience that can support their efforts to develop programs, implement interventions, and promote policies to prevent suicide.

- **National Child Traumatic Stress Initiative (FY '07 Budget: \$29 Million)**
In 2000, Congress authorized the National Child Traumatic Stress Initiative (NCTSI), which is designed to improve treatment and services and interventions for children, adolescents, and families exposed to traumatic events. The NCTSI funds the NCTSN, a national Network of grantees that collaborate to develop and promote effective community practices for children and adolescents exposed to a wide array of traumatic events, and its national coordinating center, the National Center for Child Traumatic Stress (NCCTS). Domestic public and private nonprofit entities are eligible to apply for grants.

- 2) The **Center for Substance Abuse Prevention (CSAP) Budget: FY '07 \$192 million, FY '08 \$194 million, FY '09 estimate \$158 million-** CSAP works with States and communities to develop comprehensive prevention systems that create healthy communities. This includes supportive work in school environments and drug- and crime-free neighborhoods, helping to enable positive connections with friends and family. Nearly half of the \$192 million budget is used for **State Incentive Grants**.

Like CMHS, funds are also available through discretionary grants awarded to States, political subdivisions of States, Territories, and Indian Tribes or tribal organizations, non-profit organizations, institutions of higher education, or criminal justice agencies. These funds are used to build on the existing services so that the array of services required to meet the needs of the target population is available and accessible. Below is a listing of programs that are relevant to NCTSN initiatives: (For more information on CSAP programs, visit <http://prevention.samhsa.gov>).

- **State Incentive Grants (FY '07 Budget: \$105 Million)**
These discretionary grants are available to state agencies to prevent the onset and reduce the progression of substance abuse, including childhood and underage drinking; reduce substance abuse-related problems in communities; and build prevention capacity and infrastructure at the state and community levels. NCTSN initiatives are well-aligned with the purposes and approach of this program and if their state is funded, site leaders may be able to take advantage of any opportunities to participate in the initiative. State Incentive Grants can be used to conduct a community needs assessment; mobilize and/or build capacity; develop a comprehensive strategic plan; implement evidence-based prevention programs and

infrastructure development activities; and monitor process and evaluate effectiveness.

- **Substance Abuse Prevention and Treatment Block Grant Program—SAPT (FY '07 Budget: \$360 Million)**

Twenty percent of SAPT funds are administered by CSAP. This prevention set-aside component helps expand substance abuse prevention and treatment services.

- 3) The **Center for Substance Abuse Treatment (CSAT) Budget: FY '07 \$2.15 billion, FY '08 \$2.16 billion, FY '09 estimate \$2.11 billion** - CSAT promotes community-based addiction treatment services for individuals and families, supporting policies and programs to broaden the range of evidence-based effective treatment services for individuals with substance use disorders. The **Substance Abuse Prevention and Treatment Block Grant Program** comprises 81 percent of CSAT funding.

Like CMHS and CSAP, funds are also available through discretionary/competitive cooperative agreements (i.e., PRNS funding) awarded to States, political subdivisions of States, Territories, and Indian Tribes or tribal organizations, non-profit organizations, institutions of higher education, or criminal justice agencies. These funds are used to build on the existing services so that the array of services required to meet the needs of the target population is available and accessible. Below is a listing of programs that are relevant to NCTSN initiatives. (For more information on CSAT programs, visit <http://csat.samhsa.gov/>.)

- **Substance Abuse Prevention and Treatment Block Grant (FY '07 Budget: \$1.8 Billion)**

In FY '07, 54 percent of SAMHSA's overall budget was allocated toward this Block Grant. These dollars support the public substance abuse prevention and treatment infrastructure and service delivery system. Much of the service delivery funds are administered to private community based organizations through the state lead agency. As stated above, accessing these dollars begins with developing an understanding of how each state administers these dollars.

- **Access to Recovery—ATR (FY '07 Budget: \$99 Million)**

The ATR program provides grants to States, Tribes, and Tribal organizations to implement voucher programs that expand substance abuse treatment capacity and promote choice among clinical treatment and recovery support providers in order to facilitate client recovery from substance use disorders. ATR also helps to provide services such as medical detoxification, residential services, peer support, case management, housing, job training and placement, daily living skills, childcare, and transportation.

- **Screening, Brief Intervention, Referral, and Treatment Programs (FY '07 Budget: \$30 Million)**

This discretionary grant/cooperative agreement adds funding for screening and brief intervention services within State, campuses, and general medical settings. A major goal of the program is to intervene early in the disease process before individuals become dependent and/or addicted, and motivate those in need to seek treatment. Funds flow first to State and Tribal organizations.

Implications for NCTSN

Given SAMHSA's current priorities on children's mental health, substance abuse programs, suicide, and youth violence prevention, there is clearly opportunity for Network program and initiative leaders to develop their capacity to access these grant programs either directly or in partnership with

stakeholders in their State and community. Following are tips that Network members can utilize to increase their chances of accessing specific grant programs:

Accessing Block or Formula Grants - Accessing these dollars begins with developing an understanding of how your State administers these dollars. By either contacting your State administrator's office and/or reviewing their web page, you can gain valuable insight as to what extent your State is issuing grants and/or contracts on a competitive basis, and you can learn more about existing grantees and contractors. If you are not already aware of and/or connected to the administrator of a particular block grant, it is a good idea to determine who the local contact is (either a regional contact from a State office or a county office depending on how the program is structured in your State). You should have a conversation with them about how and if your NCTSN program aligns with the priorities of the block grant, and you should acquire information on opportunities for funding and/or coordination with existing providers.

Accessing Discretionary Grants⁸ - Discretionary grants, sometimes called project grants because of their targeted focus, are awarded directly to applicants through a competitive proposal process. An application for a discretionary grant does not guarantee an award, and the amounts awarded are not based on a formula. It is important that NCTSN program leaders do the following:

- Get to know the various programs and deadlines by monitoring what funding is available and when (i.e., visit federal agency websites for funding "outlooks" that provide information on which grant opportunities will be open in the coming year; review the Federal Register on an ongoing basis to view notices of fund availability as posted by federal agencies; and explore NCTSN monthly funding announcements and website resources).
- Follow the guidelines and requests in SAMHSA grants application process very carefully.

Section II: Current Opportunities

This section describes current funding opportunities that have the potential to support NCTSN grantees. This section also includes funding sources where the federal deadline has recently passed or is imminent. In these cases, the sources are included because we want Network members to be aware that these funds may be flowing into States and localities in upcoming months.

- **Cooperative Agreements for State-Sponsored Youth Suicide Prevention and Early Intervention (Short Title: State/Tribal Youth Suicide Prevention Grants)**

Purpose: The purpose of the program is to build on the foundation of prior suicide prevention efforts in order to support States and tribes in developing and implementing statewide or tribal youth suicide prevention and early intervention strategies, grounded in public/private collaboration. Such efforts must involve public/private collaboration among youth-serving institutions and agencies and should include schools, educational institutions, juvenile justice systems, foster care systems, substance abuse and mental health programs, and other child and youth supporting organizations.

Eligible Applicants: States; Federally recognized Indian tribes, tribal organizations (as defined in the Indian Self-Determination and Educational Assistance Act), or urban Indian organizations (as defined in the Indian Health Care Improvement Act) that are actively involved in the development and continuation of a tribal youth suicide early intervention and prevention strategy; and Public or private non-profit organizations designated by a State,

⁸ Access to funds is related to state priorities

federally recognized Indian tribe, tribal organization, or urban Indian organization, to develop or direct the State/tribal-sponsored youth suicide prevention and early intervention strategy.

Available Funds: \$5 million for 10 grants for a term of up to 3 years

Deadline: January 11, 2008 **** NOTE:** Because we are including sources where grants flow through multiple layers of bureaucracy (i.e., federal government to state and then state to localities), we will sometimes include funding sources where the federal deadline has recently passed or is imminent. In these cases, the sources are included because we want Network members to be aware that these funds may be flowing into states and localities in upcoming months. See NCTSN Federal Funding Announcements, emailed monthly, and the NCTSN website for further information about relevant funding opportunities. ******

For More Information: http://samhsa.gov/Grants/2008/sm_08_001.aspx

NCTSN Relevancy: This program's goals closely align with NCTSN goals of promoting suicide prevention initiatives.

- **Child Mental Health Initiative**

Purpose: The purpose of this program is to support States, political subdivisions within States, the District of Columbia, Territories, Native American tribes and tribal organizations, in developing integrated home and community-based services and supports for children and youth with serious emotional disturbances and their families by encouraging the development and expansion of effective and enduring systems of care. A "system of care" is an organizational philosophy and framework that involves collaboration across agencies, families, and youth for the purpose of improving access and expanding the array of coordinated community-based, culturally and linguistically competent services and supports for children and youth with a serious emotional disturbance and their families.

Eligible Applicants: State governments; Indian tribes or tribal organizations (as defined in Section 4[b] and Section 4[c] of the Indian Self-Determination and Education Assistance Act); Governmental units within political subdivisions of a State, such as a county, city or town; District of Columbia government; and Commonwealth of Puerto Rico, Northern Mariana Islands, Virgin Islands, American Samoa and Trust Territory of the Pacific Islands (now Palau, Micronesia and the Marshall Islands).

Available Funds: \$19 million for 19 awards for a term of up to 6 years

Deadline: February 1, 2008 **** NOTE:** Because we are including sources where grants flow through multiple layers of bureaucracy (i.e.: federal government to state and then state to localities), we will sometimes include funding sources where the federal deadline has recently passed or is imminent. In these cases, the sources are included because we want Network members to be aware that these funds will be flowing into states and localities in upcoming months. See NCTSN Federal Funding Announcements, emailed monthly, and the NCTSN website for further information about relevant funding opportunities. ******

For More Information: http://samhsa.gov/Grants/2008/sm_08_004.aspx

NCTSN Relevancy: This program's goals closely align with NCTSN goals of promoting coordination among different groups to support children and youth with serious emotional disturbances.

- **Drug Free Communities Support Program**
Purpose: The Drug Free Communities Support Program is designed to establish and strengthen collaboration among communities, private nonprofit agencies, and Federal, State, local, and tribal governments to support the efforts of community coalitions to prevent and reduce substance abuse among youth and, over time, among adults by addressing the factors in a community that increase the risk of substance abuse and promoting the factors that minimize the risk of substance abuse.

Eligible Applicants: Community based coalitions that have worked on addressing substance abuse prevention for at least six months.

Available Funds: Up to \$19 million for 150 grants for a term of 5 years

Deadline: March 21, 2008** **NOTE:** Because we are including sources where grants flow through multiple layers of bureaucracy (i.e.: federal government to state and then state to localities), we will sometimes include funding sources where the federal deadline has recently passed or is imminent. In these cases, the sources are included because we want Network members to be aware that these funds will be flowing into states and localities in upcoming months. See NCTSN Federal Funding Announcements, emailed monthly, and the NCTSN website for further information about relevant funding opportunities.**

For More Information: http://samhsa.gov/Grants/2008/sp_08_002.aspx

NCTSN Relevancy: This program's goals closely align with NCTSN goals of preventing and reducing substance use disorders among youth affected by trauma.

Section III. Helpful Resources

Websites:

The **Substance Abuse and Mental Health Services Administration (SAMHSA)** provides a forecast of future funding opportunities at http://alt.samhsa.gov/grants/2004/snapshots_menu.asp.

National Center on Substance Abuse and Child Welfare (NCSACW), a service of the Substance Abuse and Mental Health Services Administration's (**SAMHSA**) Center for Substance Abuse Treatment (**CSAT**) and the Administration on Children, Youth and Families (**ACYF**), Children's Bureau's Office on Child Abuse and Neglect (**OCAN**) : <http://www.ncsacw.samhsa.gov/>. The NCSACW provides ways to develop and implement comprehensive programs of information-gathering and dissemination, provides technical assistance, and helps organizations develop knowledge about substance use disorders and child welfare that promotes effective practice, organizational, and system changes at the local, state, and national levels.

Join Together provides information on funding opportunities related to substance abuse prevention at <http://www.jointogether.org/>.

The **Community Anti-Drug Coalitions of America** offers grant-writing tips at <http://cadca.org/CoalitionResources/Funding.asp>.

Grants.gov is a valuable source to find and apply for federal government grants

Publications

Developing Competitive SAMHSA Grant Applications is a manual developed by SAMHSA to provide guidance on understanding funding opportunities, writing grants, and navigating the grant review process. Available online at <http://alt.samhsa.gov/grants/TAManual/toc.htm>

Partners, a clearinghouse sponsored by SAMHSA, has published **Focus on Funding**, available at http://www.preventionpartners.samhsa.gov/foc_sustain_p1.asp to encourage sustainable substance abuse prevention programs.

A Guide to Private Funding to Support Child Traumatic Stress and Other Trauma-Focused Initiatives provides practical information and guidance on how child traumatic stress initiative leaders can attract and access private funding to address their financing challenges and support the development, implementation and dissemination of trauma-informed interventions. Available online at http://www.nctsn.org/nctsn_assets/pdfs/Private_Funding_Guide_Final.pdf

Thinking Broadly: Financing Strategies for Child Traumatic Stress Initiatives presents a conceptual framework for financing child traumatic stress initiatives' work and a set of approaches that initiative leaders can implement to provide comprehensive and coordinated trauma supports and services. Available on line at: http://www.nctsn.org/nctsn_assets/pdfs/ThinkingBroadlyCTS_final.pdf

Finding Funding: A Guide to Federal Sources for Child Traumatic Stress and Other Trauma Focused Initiatives catalogs 69 federal funding sources that can potentially support child trauma services. Available at: http://www.nctsn.org/nctsn_assets/pdfs/CTS_FFG_finalRev.pdf

About the National Child Traumatic Stress Network

Established by Congress in 2000, the National Child Traumatic Stress Network (NCTSN) is a unique collaboration of academic and community-based service centers whose mission is to raise the standard of care and increase access to services for traumatized children and their families across the United States. Combining knowledge of child development, expertise in the full range of child traumatic experiences, and attention to cultural perspectives, the NCTSN serves as a national resource for developing and disseminating evidence-based interventions, trauma-informed services, and public and professional education.

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