

Comprehensive Secure and Responsible Drug Disposal Program

Issued by the Institute for Intergovernmental Research

With Guidance and Support From the Bureau of Justice Assistance

Responding to America's Communities: Overview of Drug Disposal Funding Opportunity

Solicitation

"Don't Be the Dealer." This stark community outreach message by the U.S. Department of Justice's (DOJ) Drug Enforcement Administration (DEA) in support of **National Prescription Drug Take Back Day** ("National Take Back Day") stresses the perils of unused or expired medication in America's homes,¹ and the warning is not overstated:

- ◀ More than 70,000 emergency room visits result from unintentional drug poisoning among children each year.²
- ◀ Approximately 60 percent of the adolescents and young adults surveyed said they either bought or received prescription stimulants for nonmedical use from friends or relatives.³
- ◀ More than 80 percent of older patients (aged 57 to 85 years) use at least one prescription medication on a daily basis, with more than 50 percent taking more than five medications or supplements daily.⁴ This can potentially lead to health issues resulting from unintentionally using a prescription medication in a manner other than how it was prescribed or from intentional nonmedical use.⁵
- ◀ Among people aged 12 or older who abused prescription pain relievers in the past year, nearly 54 percent obtained the medication from friends or relatives.⁶

Our **medicine cabinets pose serious, even fatal, risks** to both the immediate safety and long-term health of some of our most vulnerable populations: children, adolescents, seniors, and individuals suffering from substance use disorders. In 2010, to address this public safety and public health threat and provide citizens an easy way to positively engage in the response, DOJ's DEA inaugurated National Take Back Day.

The evolution and success of DOJ's National Take

Back Initiative. Since its inception, America's take-back activities have evolved and gained momentum as a result of partnerships, innovations, and—unfortunately—the exigency of the national substance abuse crisis.⁷ DEA efforts, in collaboration with the Office of National Drug Control Policy, advanced the foundational *Secure and Responsible Drug Disposal Act of 2010* and expanded take-back opportunities with the *Disposal of Controlled Substances: Final Rule*.⁸ Combined, these actions outline four general take-back mechanisms:⁹

1. Community collection events conducted in accordance with DEA guidelines
2. Permanent drop boxes in law enforcement agencies
3. Similar drop box placement in other locations
4. Mail-back programs

The U.S. Food and Drug Administration (FDA) has also provided guidelines for people who want to dispose of medications at home.¹⁰ In addition to the mechanisms listed above, **innovative new products and equipment** are now available to provide a "proven method of action against drug tamper and diversion" for the range of substance forms—tablets, capsules, liquids, creams, and transdermal patches—in an environmentally sound pouch that meets current DEA and U.S. Environmental Protection Agency requirements for drug disposal.¹¹

The statistics speak plainly to the need for and response to these events: the October 2019 Take Back Day brought in **nearly 442 tons** of unused or expired prescription medications and vape devices, bringing the total amount of prescription drugs collected by DEA since the fall of 2010 to nearly **12.7 million pounds**.¹² Given the opportunity,

we—as a nation—have embraced the chance to protect our families and our neighbors by taking our medications to authorized drop sites or correctly disposing of them at home.

Then, a pandemic hit the country. Public safety and public health leaders and practitioners were faced with the prospect of fighting two epidemics at once: the impact of the coronavirus and an ongoing substance abuse epidemic. In addition to fighting simultaneous epidemics, aspects of the pandemic—including stay-at-home orders and limited mobility/ability to congregate—also serve to exacerbate the substance abuse epidemic, reducing access to treatment and other support services and increasing potential for relapse or worse, overdose.^{13, 14} The April 25, 2020, Take Back Day was cancelled due to the pandemic, and as one source noted, **“If people can’t safely dispose of their medications, the truth is that the risk of overdose or relapse is heightened. This is especially true considering the current conditions** due to [the pandemic].”¹⁵

DOJ’s Bureau of Justice Assistance (BJA) is responding to this need from the field by supporting state, local, and tribal (SLT) communities’ take-back and disposal efforts. Through the new Comprehensive Secure and Responsible Drug Disposal Program (“Program”), BJA is enhancing and complementing (not replacing) current national take-back efforts at the SLT levels by:

- ◀ Installing or increasing the amount of take-back and disposal equipment in communities and in homes
- ◀ Supporting the expansion of take-back opportunities year-round
- ◀ Encouraging innovations developed by and for each site to meet its specific needs and leverage its particular strengths

This effort aligns with and continues many of BJA’s foundational tenets for successful programs of national scope and benefit, including:

- ◀ Supporting and guiding SLT criminal justice practitioners and leaders in building capacity to address priority issues of the field.
- ◀ Helping communities battle substance abuse by replicating evidence-based strategies through the use of demonstration projects.¹⁶
- ◀ Harnessing the power of multidisciplinary partnerships, including public safety, public health, and behavioral health collaborations, to improve substance abuse policies and practices and save lives.

Under this solicitation, up to six grantees will be selected for an award of up to \$100,000 each for a project period ending on September 30, 2021. **The Program will fund selected sites for the sole purpose of purchasing storage and disposal equipment (including traditional boxes, disposal pouches, and other innovative approaches) to allow law enforcement, first responders, and citizens to safely return and/or destroy unused medicine.**

BJA has designated the Institute for Intergovernmental Research (IIR), a training and technical assistance provider for the [Comprehensive Opioid, Stimulant, and Substance Abuse Program \(COSSAP\)](#), to issue subawards for the purchase of drug take-back and disposal equipment. IIR will provide additional support to selected project sites, including hosting an inaugural project webinar and periodic planning calls.

Applicant Eligibility

Only units of government—state agencies and departments, units of local government, and federally recognized Indian tribal entities, as determined by the U.S. Secretary of the Interior—may apply as the lead agency. These units of government may and should, in turn, coordinate with their respective communities’/jurisdictions’ multidisciplinary teams (this can include nonprofit agencies and community coalitions) to maximize awareness about and use of the new equipment and expanded take-back opportunities.

Applicant Activities

Funding for this Program will be used entirely for the purchase and/or rental of equipment. Applicants are sought that demonstrate the following:

In partnership with IIR and with an emphasis on the need for expanded opportunities for take-back activities—particularly during times of limited public mobility—**the priority Program task leverages an applicant’s ability to detail a plan to subaward funding for the purchase of equipment necessary to implement take-back and disposal mechanisms to allow law enforcement, first responders, and citizens to safely return and/or destroy unused medicine,** as described in the *Secure and Responsible Drug Disposal Act of 2010* and other guidelines.

This equipment can include, but is not limited to:

- ◀ **Recent innovations** such as at-home disposal pouches
- ◀ Equipment to support community collection events conducted in accordance with DEA guidelines
- ◀ Permanent drop boxes stationed in law enforcement agencies and other locations as allowed by all governing guidelines
- ◀ Equipment to support drug mail-back programs

The following capabilities are also important to maximize the community's awareness about, access to, and use of the new take-back equipment:

- ◀ **Capacity to facilitate development of a law enforcement- or first responder-involved project structure that ensures coordination with DEA and FDA drug take-back initiatives and oversight of the purchase of safe storage/disposal equipment.**
 - Applicants are expected to designate an SLT law enforcement agency authorized to oversee the safe storage and disposal of prescription medications in accordance with directives outlined in the *Secure and Responsible Drug Disposal Act of 2010* and other DEA and FDA guidelines, to serve as the lead partner in the project structure.
 - Designated law enforcement lead partners will be expected to accept controlled substances in the project's take-back activities as well as prescription medications, explicitly accounting for the *Controlled Substances Act* and DEA regulations that prohibit pharmacies, service providers, and hospitals from collecting controlled substances.
 - Drug take-back and mail-back initiatives undertaken by the project, under the leadership of the designated law enforcement lead partner, will align with existing federal drug take-back initiatives such as National Prescription Drug Take Back Day and other DEA- and FDA-led activities.
- ◀ **Ability to secure active involvement and collaboration of SLT public safety and criminal justice agencies and public health and behavioral health providers, as well as other community stakeholders, in the project to ensure that a multidisciplinary team maximizes local capacities and exhibits a commitment to project success.**

- Applicants are expected to detail a project structure that emphasizes active collaboration between public safety and public health project partners designed to ensure mutual commitment to the project's success by:
 - Making safe drug take-back, storage, and disposal a high public institutional priority.
 - Collecting data for performance metrics. These data should include:
 - The amount of unused or expired prescription medication gathered during the performance period (this will likely be tabulated in weight, but other units of measurements can be proposed).
 - The number of take-back boxes or equipment purchased and/or pouches distributed.
 - A comparison rate of overdoses (fatal and nonfatal) for two years prior to project implementation and during the project period.
- Applicants will designate a project group comprising members across disciplines tasked with providing strategic oversight, guiding decision making, and implementing drug take-back activities in compliance with DEA, FDA, and other federal and local guidelines. This group is recommended to meet monthly, on average.
- Competitive applications will encourage the active participation in the project of representatives from among the range of involved community stakeholders. These can include, but are not limited to:
 - Law enforcement agencies
 - Prosecutor's offices
 - Pharmacies
 - Local hospitals or clinics
 - Emergency medical services/first responders
 - Mental health or substance use treatment providers
 - Social and/or human services providers
 - Child welfare/child protective services
 - Local school systems
 - Courts
 - Jails or detention centers
 - Probation, parole and/or community corrections/supervision and reentry agencies
 - Local chambers of commerce or other business associations
 - Housing authorities
 - Community-based organizations
 - Faith-based organizations

Allowable Activities

To support the implementation of the Comprehensive Secure and Responsible Drug Disposal Program, allowable activities that may be supported by the funding include:

- ◀ 100 percent of the funds shall be used to purchase equipment necessary to implement take-back and disposal activities and efforts that enable law enforcement agencies, first responders, and/or citizens to destroy and/or return unused medicine. This equipment and associated methodologies can include traditional approaches, such as the stationing of permanent drop boxes in law enforcement agencies, but the Program also encourages innovations in leveraging new take-back equipment in a community-targeted way, such as the provision of medication disposal/deactivation pouches in conjunction with overdose response calls or substance abuse education events.
- ◀ To maximize the community's awareness about, access to, and use of the new take-back equipment, the following may be helpful complementary activities but should not be supported with Program funds:
 - Request that law enforcement or first responder project partners coordinate with DEA and FDA officials to ensure that drug take-back activities conform with federal guidelines.
 - Establish a project workgroup tasked to achieve the goals of the project, including implementation of drug take-back activities in accordance with DEA and FDA initiatives and gathering of performance metrics.
 - Establish partnerships with SLT branch locations of national pharmacy chains that have established locations nationwide to enable individuals to safely dispose of unwanted, unused, or expired prescriptions.

Selection Criteria

BJA is committed to ensuring a fair and open process for making awards. Submitting a project proposal will not guarantee project funding. All applications will undergo a peer review process coordinated by IIR staff members and peer reviewers, with final review and approval by BJA. All selection decisions are final. BJA reserves the right to make any final decisions regarding all subawards.

Applicants will be evaluated based on the following criteria:

Statement of the Problem (25 percent of score)

In this section, the applicant should describe, address, and include:

- ◀ The community to be served in this project, including data, documentation, and information that underscore the need for federal funding to support the purchase of take-back and disposal equipment. This could include rates of overdoses (fatal and nonfatal), data about prescription drug and controlled substance abuse/misuse/diversion, and other information that illustrates the importance of this opportunity to the applicant's jurisdiction.
- ◀ Whether this will be a new take-back/disposal project or an enhancement of existing activities. If the latter, the applicant should describe current efforts in its jurisdiction to ensure safe storage and disposal of prescription medications and disposal of controlled substances and how this project will advance and complement those efforts.
- ◀ Alignment between the proposed project and existing strategic plans or initiatives by the jurisdiction to prevent and reduce substance use.
- ◀ Any other information that will help reviewers understand the positive impact this program will have on the community.

Project Plan (50 percent of score)

Project plans should describe in detail the lead agency's plans to:

- ◀ **Subaward funding for the purchase of equipment necessary to implement take-back and disposal mechanisms outlined above in Applicant Activities**, which entails considering the range of available equipment, including new technologies such as safe disposal pouches, in determining the best equipment option(s) for the community.
- ◀ Collect and report on performance data, including:
 - Tracking volumes of equipment purchased, equipment distributed, and prescription medications and controlled substances collected and disposed of as a result of project activities.

- Documenting comparison data pre- and post-Program implementation, including overdose rates (fatal and nonfatal) and other applicable indicators (e.g., calls for emergency services and hospital admissions related to prescription drug abuse).
- ◀ Address tasks and requirements associated with the purchase and use of take-back and disposal equipment, including:
 - Ensuring that safe storage and disposal of drugs is undertaken in accordance with DEA and FDA guidelines.
 - Aligning project activities with existing federal initiatives such as National Prescription Drug Take Back Day, as applicable.
 - Expanding and enhancing take-back activities in SLT communities to year-round efforts and special community events or activities.
 - Maximizing awareness of, use of, access to, and/or participation in take-back equipment and activities.
 - Securing the active involvement and collaboration of local public safety and criminal justice agencies and health and behavioral health providers, as well as other community stakeholders listed above in Applicant Activities, to ensure a multidisciplinary structure that maximizes community engagement in the project.
- ◀ Include a timeline outlining specific periods during which associated activities will occur. Given the exigency of this issue, sites are encouraged to be thoughtful and ambitious in their implementation plans.

Project Budget (25 percent of score)

Budgets should be complete, cost-effective, and allowable (e.g., reasonable, allocable, and necessary for project activities). Budget narratives should demonstrate cost-effectiveness in relation to potential alternatives and the goals of the project.

Mandatory Project Narrative

Responses to the narrative questions must be included on the narrative question responses template located at <http://s.iir.com/8Rfz3dY6>. All other required documents must be submitted with the responses to the narrative questions online at <http://s.iir.com/PkmDBeFG>.

Additional Mandatory Application Requirements

Budget and Associated Documentation

The Budget Detail Worksheet is a user-friendly, fillable, Microsoft Excel-based document designed to calculate totals. All applicants should use the Excel version when completing the proposed budget in an application, except in cases where the applicant does not have access to Microsoft Excel or experiences technical difficulties. If an applicant does not have access to Microsoft Excel or experiences technical difficulties with the Excel version, the applicant should use the 508-compliant accessible PDF version. The Budget Detail Worksheet can be accessed at <http://s.iir.com/RMqe2k2G>.

The Budget Detail Worksheet should provide the detailed computation for each budget line item, listing the total cost of each and showing how it was calculated by the applicant. The Budget Detail Worksheet should present a complete itemization of all proposed costs.

For questions pertaining to the budget and examples of allowable and unallowable costs, see the DOJ Grants Financial Guide at <https://ojp.gov/financialguide/DOJ/index.htm>.

This document should be submitted with the application at <http://s.iir.com/PkmDBeFG>.

Indirect Cost Rate Agreement (if applicable)

Indirect costs may be charged to an award only if:

- The recipient has a current (unexpired), federally approved indirect cost rate; or
- The recipient is eligible to use, and elects to use, the de minimis indirect cost rate described in the Part 200 Uniform Requirements, as set out at 2 Code of Federal Regulations (CFR) 200.414(f).

An applicant with a current (unexpired) federally approved indirect cost rate must attach a copy of the indirect cost rate agreement to the application. An applicant that does not have a current federally approved rate may request one through its cognizant federal agency, which will review all

documentation and approve a rate for the applicant entity, or, if the applicant's accounting system permits, applicants may propose to allocate costs in the direct cost categories.

Certain Office of Justice Programs (OJP) recipients have the option of electing to use the de minimis indirect cost rate. An applicant that is eligible to use the de minimis rate and wishes to use the de minimis rate should attach written documentation to the application that advises OJP of both (1) the applicant's eligibility to use the de minimis rate and (2) its election to do so. If an eligible applicant elects the de minimis rate, costs must be consistently charged as either indirect or direct costs but may not be double-charged or inconsistently charged as both. The de minimis rate may no longer be used once an approved federally negotiated indirect cost rate is in place. (No entity that ever has had a federally approved negotiated indirect cost rate is eligible to use the de minimis rate.) For the de minimis rate requirements (including information on eligibility to elect to use the rate), see the Part 200 Uniform Requirements at 2 CFR 200.414(f).

This document should be submitted with the application at <http://s.iir.com/PkmDBeFG>.

Letters of Support and/or Memoranda of Understanding/Agreement (Required)

Applicants should attach letters of support from the designated law enforcement/public safety partner leadership and/or an interagency agreement between partner agencies to show commitment to participate in the project. The letters of interagency agreement should clearly articulate the level of involvement each agency will have in the proposed project.

Provide a scanned copy of a letter of commitment that is dated and signed. Each letter of commitment must identify the agency's roles and responsibilities in the project, the activities in which it will be included, how the agency's expertise is pertinent to the project, and length of commitment to the project. The letter also must include a statement indicating that each proposed or existing agency understands that:

- ◀ The funding award is to be used for the activities proposed in the project plan.

- ◀ The award is not to be used for the exclusive benefit of any one agency.

See a sample letter of support at https://www.cossapresources.org/Content/Documents/Funding/sample_letter_of_support.docx, for additional guidance.

This document/these documents should be submitted with the application at <http://s.iir.com/PkmDBeFG>.

Applicant Certification (Required)

The applicant agency must provide a statement of assurance signed by the authorized representative of the applicant organization stating that:

- ◀ Federal funds made available through this award will not be used to supplant SLT funds but will be used to increase the amounts of such funds that would, in the absence of federal funds, be made available for the activities addressed in the application.
- ◀ There has been appropriate coordination with all affected agencies.
- ◀ The project coordinator will agree to work with BJA and IIR.

This document should be submitted with the application at <http://s.iir.com/PkmDBeFG>.

Accounting System and Financial Capability Questionnaire (Required)

All applicants must download, complete, and submit this form: <http://ojp.gov/funding/Apply/forms>.

This document should be submitted with the application at <http://s.iir.com/PkmDBeFG>.

Post-Award Requirements

Bimonthly Collaborative Calls

The recipient of the funds will be required to have the project coordinator participate in bimonthly calls with BJA policy advisors and the IIR project manager. These calls will last no more than 1.5 hours. Additional staff members may choose to participate.

Financial and Programmatic Reporting

Recipients of funds under this solicitation will be required to submit monthly progress reports, quarterly financial reports, quarterly performance measures, final financial and progress reports, and, if applicable, audited financial statements in accordance with the Part 200 Uniform Requirements or specific award conditions. Future awards and fund drawdowns may be withheld if reports are delinquent.

Confidentiality and Human Subjects Protection

Any recipient of an award under this solicitation will be required to comply with DOJ regulations on confidentiality and human subjects protection. See the “Requirements Related to Research” (<https://www.ojp.gov/funding/explore/legaloverview2020/researchrelatedrequirements>) Web page of the “Overview of Legal Requirements Generally Applicable to OJP Grants and Cooperative Agreements” (<https://www.ojp.gov/funding/explore/legal-overview-fy-2020-awards>) for additional information. All funded applicants will be required to provide documentation of compliance with this requirement prior to commencing data collection.

Applicable Federal Laws and Regulations

All awards are subject to the availability of appropriated funds and to any modifications or additional requirements that may be imposed by law. Applicants selected for awards must agree to comply with additional legal requirements—including all applicable federal, state, and local laws, guidelines, and recommended practices associated with take-back days—upon acceptance of an award. Additional information for each requirement can be found at <https://ojp.gov/funding/index.htm>.

Application Process

Apply online: <http://s.iir.com/PkmDBeFG>

Applicant webinar: November 10, 2020, at 2:00 p.m., ET. Registration for the webinar is required. Please register for the webinar at <http://s.iir.com/take-back-solicitation> and submit questions in advance of the webinar to COSSAP@iir.com no later than November 6, 2020. Emails containing questions should include the name and agency of the submitter, email address, and question(s).

Applications due: November 25, 2020, 5:00 p.m., ET

Notification of awards: January 25, 2021

Projects begin: February 1, 2021

Application Checklist

- _____ Project Narrative Questions (see page 5)
- _____ Budget Detail Worksheet (see page 5)
- _____ Indirect Cost Rate Agreement (if applicable, see page 5)
- _____ Letters of Support (see page 6)
- _____ Applicant Certification (see page 6)
- _____ Accounting System and Financial Capability Questionnaire (see page 6)
- _____ Audited Financial Statements (see page 7)

The application and all supporting documents should be submitted at <http://s.iir.com/PkmDBeFG>. If you have questions, please email COSSAP@iir.com, subject: Take Back Award.

Applicant Resources

U.S. Drug Enforcement Administration, National Prescription Drug Take Back Day: https://www.deadiversion.usdoj.gov/drug_disposal/takeback/

U.S. Food and Drug Administration, Safe Disposal of Medicines: A List of Resources on How to Safely Dispose of Old or Expired Drugs: <https://www.fda.gov/drugs/ensuring-safe-use-medicine/safe-disposal-medicines>

U.S. Food and Drug Administration, Where and How to Dispose of Unused Medicines: <https://www.fda.gov/consumers/consumer-updates/where-and-how-dispose-unused-medicines>

Secure and Responsible Drug Disposal Act of 2010: <https://www.congress.gov/111/plaws/publ273/PLAW-111publ273.pdf>

National Institutes of Health National Center for Biotechnology Information, Understanding Factors That Contribute to the Disposal of Unused Opioid Medication: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6388750/>

Solicitation References

¹ <https://takebackday.dea.gov/>.

² Budnitz, D. S., & Salis, S. (2011). Preventing medication overdoses in young children: an opportunity for harm elimination. *Pediatrics*, 127(6), e1597–e1599. <https://doi.org/10.1542/peds.2011-0926>

³ McCabe, S. E., West, B. T., Teter, C. J., & Boyd, C. J. (2012). Medical and nonmedical use of prescription opioids among high school seniors in the United States. *Archives of Pediatrics & Adolescent Medicine*, 166(9), 797–802. <https://doi.org/10.1001/archpediatrics.2012.85>

⁴ Miech, R., Johnston, L., O'Malley, P. M., Keyes, K. M., & Heard, K. (2015). Prescription Opioids in Adolescence and Future Opioid Misuse. *Pediatrics*, 136(5), e1169–e1177. <https://doi.org/10.1542/peds.2015-1364>

⁵ <https://www.drugabuse.gov/publications/research-reports/misuse-prescription-drugs/what-scope-prescription-drug-misuse>.

⁶ <https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR2-2015/NSDUH-FFR2-2015.htm>.

⁷ <https://www.cdc.gov/drugoverdose/epidemic/index.html>.

⁸ https://www.deadiversion.usdoj.gov/fed_regs/rules/2014/2014-20926.pdf.

⁹ https://www.deadiversion.usdoj.gov/mtgs/medicine_takeback/labelle.pdf

¹⁰ <https://www.fda.gov/consumers/consumer-updates/where-and-how-dispose-unused-medicines>.

¹¹ <https://www.devineexpress.com/products/deterra-drug-disposal-pouches-against-drug-tamper-and-diversion?variant=13999495020587>.

¹² <https://www.getsmartaboutdrugs.gov/content/national-take-back-day#:~:text=The%20October%202019%20Take%20Back,nearly%2012.7%20million%20pounds%E2%80%8B>.

¹³ <https://drugfree.org/drug-and-alcohol-news/study-covid-19-could-greatly-increase-deaths-from-alcohol-and-drug-misuse-and-suicide/>.

¹⁴ <https://www.bmc.org/healthcity/population-health/preventing-next-wave-opioid-crisis-during-covid-19>.

¹⁵ <https://www.recoveryunplugged.com/drug-take-back-day-postponed-due-to-covid-19/>.

¹⁶ <https://www.cossapresources.org/Program/DemoProjects>.

Visit the COSSAP Resource Center at www.cossapresources.org.

About BJA

BJA provides leadership and services in grant administration and criminal justice policy development to support local, state, and tribal law enforcement in achieving safer communities. To learn more about BJA, visit www.bja.gov and follow us on Facebook (www.facebook.com/DOJBJA) and Twitter (@DOJBJA). BJA is part of the U.S. Department of Justice's Office of Justice Programs.

About IIR

IIR serves as the connecting point for COSSAP training and technical assistance (TTA) efforts and collaborates with BJA leadership and fellow TTA providers to work directly with COSSAP site-based grantees. IIR's role includes publication production and design; planning, coordination, and delivery of national-level trainings and working group meetings; COSSAP Resource Center website development and maintenance; coordination of distance learning opportunities and resource dissemination; review, distribution, and tracking of TTA requests; coordination of and provision of TTA to five categories of demonstration projects; and coordination of other complementary activities. www.iir.com

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