



5th Sino-American Training on Substance Abuse Treatment

By Albert Hasson, Project Director (alhasson@ucla.edu)

The 5th Sino-American Training on Substance Abuse Treatment was held April 26 through May 1 at the Wuhan Department of Mental Health in Wuhan, China.

Wuhan, a port city bisected by the Yangtze River, is the capital of Hubei Province. Located in Central China, Wuhan was at the center of China's early industrialization through the development of iron and steel works and continues to be a major population center with the all-too-familiar attendant issues a city of this size faces, including drug, alcohol, and tobacco dependence.

Methamphetamine and heroin use are at the center of the substance abuse problems that practitioners in China confront. Recently, the government of China opened more than 600 opiate treatment programs to provide medication-assisted therapy for heroin-dependent individuals.

The infusion and dissemination of behavioral therapies, including but not limited to cognitive behavioral therapy, has been facilitated through the participation of Drs. Min Zhao and Hanhui Chen in the ISAP-directed Treatnet Project, sponsored by the United Nations Office on Drugs and Crime.

As a continuation of this effort, ISAP Director Walter Ling and Associate Director Richard Rawson have been

active participants in each of the Sino-American Substance Abuse Training Seminars.

On April 26, Dr. Ling and I, along with Jeanne Obert, Executive Director of the Matrix Institute on Addictions, were among the invited speakers. Dr. Ling opened the weeklong training, which was

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ISAP Tests MMT Interventions in China



China, facing the challenge of dual epidemics of drug use and HIV/AIDS, recently implemented methadone maintenance treatment (MMT) programs nationwide. This rapid expansion of treatment has been hampered by underutilization of MMT and high MMT drop-out rates.

To enhance understanding of these issues, ISAP Principal Investigator Yih-Ing Hser is leading two NIDA-funded projects, one that pilot-tests a motivational incentives intervention in MMT clinics and explores factors that influence treatment outcomes, and another that is a pilot trial comparing enhanced standard care to an adapted recovery intervention for heroin addicts released from compulsory rehabilitation.

Pictured is Dr. Hser (lower center), four UCLA graduate students, and local collaborators in Shanghai, China, in March.

Photo by Liz Evans, Project Director

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ISAP Provides Training on Substance Abuse Treatment in Malé, Maldives

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ISAP Training Program Director Sherry Larkins and I were contracted by Alvarez & Associates, LLC, to develop and deliver substance abuse treatment training in Malé, Maldives, through the U.S. Department of State's Demand Reduction Support Services.

The Maldives is a small country made up 1,190 coral islands located in the Indian Ocean, southwest of Sri Lanka, and has a population of approximately 300,000 people.

Local epidemiology shows that heroin and benzodiazepines are the primary substances used in the country. We were asked to provide training for local providers to help them understand basic drug pharmacology and pharmacokinetics, associated mental health diagnoses, and treatment strategies for clients with co-occurring mental health and substance use disorders. Local contacts also requested a specific focus on dealing with clients in crisis, especially those exhibiting suicidal ideation or actions.

The training, which occurred April 13–17, included instruction and field trips to the Villingili Detoxification Center and Himmafushi Rehabilitation Program. The training was attended by 39 participants from the Maldives. Additionally, three staff from the Colombo Plan in Sri Lanka who oversee demand reduction services for the area provided ongoing support throughout the training.

Addiction services in the Maldives are fairly new, and many cultural and social stigma related issues must be addressed in order to provide these services. While a great deal of additional training and development is needed in the area, many services are in place.

These services include a pilot methadone program, inpatient detoxification services in a free-standing program and through a local hospital, and a residential therapeutic community program. Additionally, nongovernment organizations provide additional drop-in and counseling services. Plans are also underway to open two drop-in centers to provide outpatient harm-reduction services.

Treatment of clients with co-occurring substance abuse and mental health problems is an ongoing challenge. While there are several psychiatrists working in the area, there is no psychiatric inpatient unit to provide containment and specialty services. Additionally, while suicide itself is illegal, there are no statutes allowing for involuntary commitment if a client is in imminent danger of such. A significant portion of the training was therefore dedicated to identifying local resources and working with providers to develop plans for coordinating services for clients in crisis.

Plans are underway for the National Association of Alcoholism & Drug Abuse Counselors (NAADAC) to provide additional counselor training and standardization through the development of a counselor certification program in collaboration with the Colombo plan. Additional training on providing methadone will also be important for ongoing service development, including strategies for incorporating methadone into their detoxification services.

White House ONDCP Deputy Director Thomas McLellan Visits UCLA ISAP

Thomas McLellan, Deputy Director of the White House Office of National Drug Control Policy (ONDCP) visited UCLA ISAP Feb. 10. for a question-and-answer session before speaking on campus.

Dr. McLellan, who has 35 years of addiction treatment research experience, is the primary advisor to the ONDCP director and assists in the formulation and implementation of President Obama's national drug control strategy.

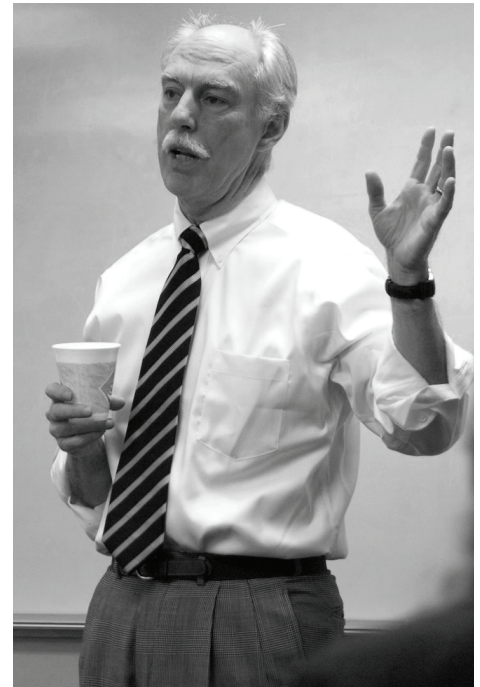


Photo by Joy Yang

Clinical Trials Network Celebrates 10 Years of Improving Addiction Treatment



Clinical Trials Network

www.uclaisap.org/ctn

By Christie Thomas, Project Director
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CTN staff from around the nation met April 21 in Albuquerque, NM, for the *Celebration and Symposium in Honor of the 10th Anniversary of the National Drug Abuse Treatment Clinical Trials Network (CTN)*.

Established in 1999 to improve the quality of addiction treatment using science as the vehicle, the CTN has afforded researchers and treatment providers a unique opportunity to collaboratively test and implement evidence-based treatments in community-based settings.

The CTN Pacific Region Node, led by ISAP Director Walter Ling, has been an important contributor to the CTN effort. Over the past 10 years, Pacific Region node community treatment programs have enrolled over 850 participants in 11 studies evaluating various pharmacological and behavioral treatments for addiction disorders.

These studies have included evaluations of buprenorphine, motivational incentives, Motivational Enhancement Therapy, family therapy, two HIV risk reduction protocols, and 12-step facilitation. In addition, the Pacific Region Node's Regional Research and Training Center (RRTC) has led or co-led at least five of the first 25 randomized, controlled clinical trials conducted in the CTN, the most recent of which enrolled over 10% of all participants enrolled into CTN trials to date.

It has been a busy and rewarding time. To recognize these accomplishments, we are pleased to have had 10 Pacific Node staff in attendance at the anniversary celebration and symposium, including Allan Cohen (Bay Area Addiction Research and Treatment [BAART], San Francisco), who was among the distinguished panelists on the program; Marie Hughes and Charmagne Kimhan (Hina Mauka, Hawaii); Dan George (Matrix Institute on Addictions, Los Angeles); Ken Bachrach and Zel Zainoor (Tarzana Treatment Centers, Los Angeles); and Walter Ling, Larissa Mooney, Albert Hasson, and Christie Thomas (UCLA ISAP).

Thanks to a bi-directional and valuable partnership between community-based treatment experts at the Betty Ford Center, Tarzana Treatment Centers, Matrix, BAART, Aegis Medical Systems, Haight Asbury Free Clinics, Alcoholic Rehabilitation Services of Hawaii, and the UCLA RRTC, the Pacific Region Node has contributed significantly to the overall CTN enterprise and is well positioned to play an integral role in CTN's future.

JSAT Special Issue!

The *Journal of Substance Abuse Treatment (JSAT)* presented a special CTN-themed edition in June highlighting "A Decade of Research by the National Drug Abuse Treatment Clinical Trials Network" (Volume 38, Supplement 1). An electronic copy is available on the CTN Dissemination Library site at <http://ctndisseminationlibrary.org/display/jsatsuppl.htm>.

Interested in Earning Free CEUs?

Watch the 2-hour online video, "Methods for Disseminating Evidence-Based Treatments from the Frontlines of Community Treatment Programs," highlighting methods used by CTN substance abuse treatment providers to incorporate evidence-based treatment into their practice settings. The video can be viewed at the CTN Dissemination Library site (<http://ctndisseminationlibrary.org/display/402.htm>). After viewing the video, take a quick 10-item quiz, and then apply to receive three National Association of Alcoholism & Drug Abuse Counselors (NAADAC) credit hours from the National Office of the Addiction Technology Transfer Center (ATTC). These credits are being offered at no cost for a limited time by the ATTC!

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ISAP Collaborations with Washington State Test Prison-Based Substance Abuse Interventions

www.uclaisap.org/CJS

By Jef St. De Lore, Project Director
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ISAP Principal Investigator William Burdon leads two collaborative research projects with Washington State Department of Corrections (WSDOC) – Project BRITE and The NOBLE Study.

Project BRITE

Project BRITE (*Behavioral Reinforcement to Increase Treatment Engagement*) is a study testing the impact of a behavioral reinforcement intervention on inmate engagement in intensive outpatient prison-based substance abuse treatment. The 12-week intervention was implemented with 224 male inmates at Airway Heights Corrections Center in Spokane, WA, and 159 female inmates at Mission Creek Corrections Center in Belfair, WA.

The program was well received by inmates, substance abuse treatment staff, and WSDOC staff. Two key factors that paved the way to a successful experience were the inclusion of all parties (inmates, treatment staff, and WSDOC staff) in the development and implementation of the incentive program and the strong support and involvement from WSDOC leadership.

Preliminary analyses are focusing on differences between pre- and post-treatment dynamic psychosocial measures (i.e., measures of psychological functioning, social functioning, and criminal thinking). Overall, these analyses indicate trends favoring the experimental group over the control. The first manuscript detailing these findings is nearing completion.

The NOBLE Study

The NOBLE Study was designed to assess the differential clinical- and cost-effectiveness of long-term

residential (LTR) versus intensive outpatient (IOP) substance abuse treatment in a prison-based treatment setting.

Inmates who were referred for substance abuse treatment while incarcerated and had at least nine months remaining on their sentence were eligible to participate.



The ISAP Washington State research team: (from left) William Burdon, DeAnn Crompt, Jennifer Long, Erica Wasmund, Jef St. De Lore, and Meghan Lynch.

Inmates were recruited from the two WSDOC reception centers (men from Washington Corrections Center in Shelton, WA, and women from Washington Corrections Center

for Women in Gig Harbor, WA), randomized to IOP or LTR treatment, and then transferred to a facility that offered their treatment assignment. Recruitment efforts were initiated at other WSDOC facilities but were not as well received.

The study recruited 545 men and 149 women. In general, recruitment efforts were very successful; study staff did a great job of communicating to inmates the benefits of the study, its impact on substance abuse treatment, and how participation would impact them (i.e., program participation, potential transfers, etc.).

The two barriers to recruitment were inmates' desire to avoid LTR treatment (often due to misconceptions about the program) and possible transfers associated with study participation. As with Project BRITE, the strong support of WSDOC leadership has greatly helped with the successful implementation of the study, especially as it related to ensuring that study participants were transferred to a facility that offered their assigned treatment modality.

Recruitment for the NOBLE Study ended in March. The research team is currently tracking treatment participation, administering follow-up interviews, and collecting records-based data.

ISAP Evaluates SBIRT Services for Short-Term Detainees in Los Angeles County and City Jails

www.uclaisap.org/evaluation

By Anne Bellows, Project Director
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Evaluation Coordinator

ISAP's Evaluation Center, under a two-year contract with the California Department of Alcohol and Drug Programs and SAMHSA, and in conjunction with the County of Los Angeles Substance Abuse Prevention and Control (SAPC), is evaluating the county's screening, brief intervention, referral, and treatment (SBIRT) demonstration project within county and city jails.

The project uses the Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST) to assess diverse, potentially high-risk short-term detainees for alcohol and other drug (AOD) risk factors and get them into appropriate treatment.

The project also uses the Government Performance and Results Act (GPRA) tool to measure changes from intake to a six-month follow-up interview. Initial results indicate the project is reaching its goal of providing a public health intervention for short-term detainees in order to inform them of their risk level, reduce the prevalence of their AOD use, and increase their access to treatment.

Through the SBIRT program, a diverse segment of detainees have been screened using the ASSIST and, when needed, have been given information and warned about their risk of developing problems related to substance use.

Among detainees identified as currently using substances, the ASSIST provides an opportunity to discuss their substance abuse. The ASSIST is linked to a brief intervention to help moderate- to high-risk substance users reduce or stop their drug use, thus avoiding further legal consequences and potential health problems. Baseline results of the ASSIST indicate that this population is at greater risk for problems related to their substance use compared to a sample clinic population.

Six-Month Follow-Up

Initial follow-up results look promising. On the GPRA tool, fewer clients reported using any substances at follow-up than at baseline. Of those who used substances, on average, clients reported using all substances (except marijuana) on fewer days.

Also, clients reported less involvement with the criminal justice system and more clients reported being "housed" at follow-up than at intake. Clients also reported receiving more outpatient services at follow-up than at intake.

However, self-reported health status and employment status did not change appreciably. At present we are collecting data from our latest participants and performing final data entry and quality assurance. When this step is completed, we hope to show statistical significance in our results.

The project will finish at the end of August, but its success has spurred interest in continuing SBIRT in other criminal justice settings.

Visiting Professors Address 'Adaptive Treatment' and 'Expanding, Mainstreaming Treatment'



Susan A. Murphy, H.E. Robbins Professor of Statistics, Research Professor at the Institute for Social Research, and Professor of Psychiatry at the University of Michigan Medical School, visited ISAP Jan. 29 and presented a talk on "Developing Evidence-Based Adaptive Treatment Strategies" on campus.

Dr. Murphy's research primarily concerns individually tailored treatments, or as they are sometimes called, "adaptive treatment strategies" or "dynamic treatment regimes." In particular, she works on experimental designs and analysis methods with the goal of constructing adaptive treatment strategies in substance abuse and mental health, specifically in the areas of ADHD, autism, drug dependence in pregnant women, and treatment for alcohol dependence. Dr. Murphy's Web site is at <http://www.stat.lsa.umich.edu/~samurphy/>. *Photo by Liz Evans*

Paul Roman, Distinguished Research Professor, University of Georgia, is a nationally recognized expert in the field of organizational change and adaptation in national samples of public and private substance abuse treatment organizations. Dr. Roman (third from right in photo) visited ISAP April 9, presenting on "Expanding and Mainstreaming Treatment for Substance Use Disorders: Barriers and Challenges Identified through Health Services Research." In addition, Dr. Roman provided consultation services for the ISAP project "Evaluation Services to Enhance the Data Management System in California (EnCal)." *Photo by Jeffrey Annon*





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Understanding the Generational Cycle of Substance Abuse

By Betsy Hall, Principal Investigator
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Substance abuse treatment counselors, clinicians, and researchers have noted that many of their adult clients come from families of substance abusers. Understanding the extent of multi-generational substance abuse and the reasons why it occurs can assist us in providing effective treatment to the entire family.

Substance-Abusing Parents: It's Not Just That They Are Using Drugs

It is not surprising that substance-abusing mothers are often less able to provide adequate shelter, basic care, and economic stability for their children. But, in addition, substance-abusing mothers are more likely to engage in unresponsive and negative parenting than women of similar backgrounds not involved in substance abuse.

They lack important parenting concepts such as empathy for children and hold misconceptions about basic parenting practices, instead relying on corporal punishment and expectations of strict obedience.

Expectations involving reversed family roles, in which children provide emotional support and comfort to parents, are common in families with substance-abusing mothers. Poor parenting among substance abusers has been linked to higher rates of internalizing (e.g., withdrawal, inhibition, anxiety, and depression) and externalizing (e.g., aggression, hostility, and delinquency) behaviors in their children.

Certainly, there are genetic influences underlying such complex personality traits as impulsivity, risk taking, and addiction. However, research shows that childhood trauma is a strong predictor as well, and extremely high proportions of substance-abusing women have experienced childhood trauma.

Childhood Trauma and Later Outcomes

Recent research on childhood trauma suggests that risk from traumatic events is cumulative and as the number of categories of traumatic events in childhood accumulate, the likelihood of later substance abuse and other negative health outcomes increases.

Robert Anda and his colleagues conducted a study with 9,000 subjects in a health maintenance organization who answered a questionnaire about adverse childhood experiences (childhood emotional, physical, or sexual abuse; witnessing domestic violence; parental separation or divorce; and growing up with substance-abusing, mentally ill, suicidal, or criminal household members).

They found that as the number of adverse experiences in childhood accumulates, the risk of adult alcoholism and depression increases, and that being in a household with an adult alcoholic increases the number of adverse events a child experiences. In addition, as the number of childhood adverse events accumulates, not only does the likelihood of substance abuse problems in adulthood increase, but so does the early initiation of substance use. Moreover, they found that adverse events are interrelated, with the presence of one adverse event predicting the presence of additional adverse events.

Addressing the issue of trauma in substance abuse treatment is clearly an important component of treatment for substance-abusing parents, and several evidence-based interventions exist.

Promoting Resilience

Fortunately, in addition to risk factors, there are also protective factors that promote resilience, or the ability to cope or "bounce back" from significant adverse life situations. Promoting a better understanding of risk and protective factors is a first step that treatment programs can take to promote resiliency in families affected by substance abuse.

In addition, we can provide families with specific assistance in improving areas known to be associated with resilience. These include: helping parents to understand the developmental needs of their children; teaching parents warm, structured, and positive discipline practices; teaching children effective and appropriate problem-solving skills; and providing opportunities for social support from extended families or friends.



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attended by more than 60 participants from throughout China, by presenting on the neurobiology of addiction. Ms. Jeanne Obert presented an overview on brief couples therapy (BCT) and I presented on aspects of group therapy, with a focus on cognitive behavioral therapy.

Six separate didactic presentations were made on three separate days, with each followed by breakout sessions focused on the experiential use of the materials. Louise Haynes, from the Medical University of South Carolina, assisted in leading some of the experiential group activities.

The participants varied in their experience and included representatives from the criminal justice system, graduate programs, treatment programs, and university faculties. The group included nurses, social workers, psychologists, and psychiatrists, who actively participated in the process while providing candid constructive feedback as to how the training could be improved in the future.

The long training days were interspersed with abundant amounts of local culinary delights, incredible hospitality, and amazingly wonderful social experiences. The ISAP/Matrix team is grateful to Dr. Zhao and her team, Drs. Chen, Dui Wang, Yi Li, and Shujun Pan for the invitation, their impeccable organization, and for affording us the opportunity to share our experiences with treatment professionals throughout China.

ISAP Publications

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