



ISAP-Led Pacific Coast Research Center to Test Integrated Treatment Models for Offenders, Parolees

By Elizabeth Hall, Ph.D., Project Director (ehall@ucla.edu)

Drug abuse and crime are often closely linked. Surveys of state prison inmates have found that as many as two-thirds of inmates report a history of regular drug use and that one-half report using drugs daily in the month before their arrest.

About two-thirds of offenders who have a history of heavy use return to drug use and crime within three months of their release from prison. How can this downward spiral of substance abuse, crime, and incarceration be stopped?

The National Institute on Drug Abuse (NIDA) has begun a nationwide effort to find ways to address this massive problem. The project, NIDA's Criminal Justice Drug Abuse Treatment Research Studies (CJ-DATS), brings together researchers from the country's preeminent substance abuse research centers.

ISAP has been chosen to be one of seven CJ-DATS research centers. ISAP's center is led by Dr. Michael Prendergast, who has extensive experience in substance abuse research among criminal justice populations.

The goal of this significant research initiative is to establish a research infrastructure to test the effectiveness of integrated treatment models within criminal justice settings. A key feature of the project will be to promote collaboration among researchers, clinicians, and correctional staff/administrators.

To do this, ISAP created the Pacific Coast Research Center (PCRC), which encompasses research partners in California, Oregon, and Washington. The corrections department partners are the California Department of Corrections, Office of Substance Abuse Programs, which currently offers prison-based therapeutic community treatment to nearly 8,000 inmates; the Oregon Department of Corrections, which provides treatment to approximately 500 prisoners; and the Washington Department of Corrections, which treats approximately 1,000 prisoners.

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Web Site: www.uclapcrc.org

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By Albert Hasson, M.S.W., Node Coordinator
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Does kicking the cigarette habit affect substance abuse recovery?

To help find out, the Clinical Trials Network (CTN) of the National Institute on Drug Abuse is preparing to launch a smoking cessation clinical trial within two Community Treatment Programs (CTPs) of the CTN's Pacific Node (which primarily covers Southern California).

Led by Drs. John Rotrosen and Malcolm Reid of the New York Node, this multisite study will compare smoking cessation treatment in combination with standard substance abuse treatment to substance abuse treatment alone.

It has been well documented that a high proportion of substance abusers who smoke cigarettes have longer histories of drug use and tend to have heavier abuse patterns for cocaine, alcohol, and marijuana.

In this study, 864 male and female patients will be enrolled into 12 participating CTPs nationwide. Within the Pacific Node, two programs, the Matrix Institute, under the direction of Michael McCann, and the Tarzana Treatment

Center, under the direction of Dr. Ken Bachrach, are gearing up to implement this exciting eight-week program. Seventy-two patients will be enrolled into each of these two programs.

Eligible patients will receive either (a) substance abuse treatment plus smoking cessation counseling with transdermal (skin patch) nicotine replacement therapy or (b) substance abuse treatment alone. Those patients receiving substance abuse treatment alone will have the option to participate in the smoking cessation treatment six months following their participation in the study.

Once completed, this work should help determine whether it is advisable for clinicians to encourage people in substance abuse treatment to quit smoking, and it will help ascertain the impact of smoking cessation on substance abuse treatment outcomes.

The Community Treatment Programs partnering with ISAP in the CTN are:

- **Aegis Medical Systems, Inc.**
www.aegismed.com
- **Betty Ford Center**
www.bettyfordcenter.org
- **Haight Ashbury Free Clinics, Inc.**
www.hafci.org
- **Matrix Institute on Addictions**
www.matrixinstitute.org
- **Tarzana Treatment Center**
www.tarzanatc.org

For general information on NIDA's Clinical Trials Network, see www.nida.nih.gov/CTN/Index.htm.

For more information on smoking cessation and substance abuse treatments, please see:

Bobo, J.K., McIlvain, H.E., Lando, H.A., Walker, R.D., & Leed-Kelly, A. (1998). Effect of smoking cessation counseling on recovery from alcoholism: Findings from a randomized community intervention trial. *Addiction*, 93(6), 877-887.

Hahn, E.J., Warnick, T.A., & Plemmons, S. (1999). Smoking cessation in drug treatment programs. *Journal of Addictive Diseases*, 18(4), 89-101.

Joseph, A.M., Nichol, K.L., & Andersen, H. (1993). Effect of treatment for nicotine dependence on alcohol and drug treatment outcomes. *Addictive Behaviors*, 18(6), 635-644.

Sees, K.L., & Clark, H.W. (1993). When to begin smoking cessation in substance abusers. *Journal of Substance Abuse Treatment*, 10(2), 189-195.

Shoptaw, S., Rotheram-Fuller, E., Yang, X., Frosch, D., Nahom, D., Jarvik, M.E., Rawson, R.A., & Ling, W. (2002). Smoking cessation in methadone maintenance. *Addiction*, 97(10), 1317-1328.

By Sherry Larkins, Ph.D., NIDA Liaison
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On June 2 and 3, the Pacific Southwest Addiction Technology Transfer Center (PSATTC) co-sponsored the Second Annual Conference on Co-occurring Disorders in Long Beach, CA.

In the past 20 years, treatment providers and mental health specialists have increasingly recognized that a substantial number of individuals accessing services have co-occurring substance abuse and mental health problems.

According to a study published in *JAMA* in 1990 by Dr. Darrel A. Regier and colleagues, more than 50% of those with a drug disorder and 37% of those with an alcohol disorder also have a mental disorder. The link between mental health disorders and substance use has become a priority of the state and federal agencies that contributed supplemental funds to expand the conference, which was a local event last year, to a statewide event.

The 800 individuals participating in the conference included researchers, policymakers, treatment providers, social workers, mental health specialists, therapists, and educators.

The conference featured nationally recognized experts in the areas of substance abuse and mental health. Topics highlighted at the conference included: adolescent neurobiology and co-occurring issues, challenges to treating the multi-diagnosed, and interactions between mental illness, substance abuse, and HIV.

Several ISAP researchers presented their work at the conference. Dr. Edythe London presented her recent research on brain images of substance abusers, many of whom also suffer from mental

illness. Dr. Richard Rawson presented his work on the impact of substance use on the brain, focusing specifically on substance users who also suffer from mental illness. Dr. Thomas Freese spoke about the Addiction Severity Index (ASI) and how this assessment can be used for patient treatment planning. Finally, Suzanne Spear moderated a panel on research and community partnerships, with representatives from the University of Arizona, L.A. County Department of Mental

Health, and Adult Dual Diagnosis Recovery Services.

The PSATTC collaborated with the L.A. County Alcohol and Drug Programs, PROTOTYPES, the L.A. County Department of Mental Health, the California Department of Alcohol and Drug Programs, the Substance Abuse and

Mental Health Services Agency, the Center for Substance Abuse Treatment, and the L.A. Practice Improvement Collaborative (see Page 4) to put on the two-day conference.

The Staff Development Committee, which was created to improve services for those with co-occurring disorders, spearheaded the conference planning. The committee consists of more than a dozen representatives from several non-profit and L.A. County agencies.

Amber Setrakian and Dr. Thomas Freese of PSATTC played a central role in securing the conference space, acquiring speakers, developing the agenda, and compiling conference materials. Additionally, ISAPians Derrick Brown, Desirée Crèvecoeur, Beth Finnerty, Mark Oyama, Bethany Plain, Jackie Stinnett, and Ed Trejo assisted in event set-up, logistics, and audio-visual preparation.



Several members of the conference planning committee and support staff pose at the Conference on Co-occurring Disorders. From l-r, Joan Hirose, California Department of Alcohol and Drug Programs; Leeann Thacker, Judy T. DeCharbert, and Sylvia DeGraff, PROTOTYPES; Verda Bradley, L.A. County Department of Mental Health; Vivian Brown, PROTOTYPES; Amber Setrakian, Jackie Stinnett, Dr. Thomas Freese, and Beth Finnerty, ISAP; and Araceli Matamoros, PROTOTYPES.

LAPIC

LAPIC Initiates Service Exchange Project in South Los Angeles



www.lapic.net

By Craig Kelley, Project Coordinator, Special Services for Groups, and Suzanne Spear, M.A., LAPIC Project Director (sspear@ucla.edu)

South Los Angeles may be one of the poorest sections of Los Angeles County, but the area is rich in local resources.

Many providers of social services in South Los Angeles have resources that could be shared with other providers, such as substance abuse counseling, mental health counseling, case management, and vocational services.

The goal of the Service Exchange Project is to facilitate such sharing and thus help substance abuse providers in South Los Angeles (Service Planning Area 6) increase the range of services for their clients without additional staff time or money. The agencies providing free services to other agencies benefit by serving more clients, which helps agencies meet their grant requirements.

Key collaborators on the project are Kathryn Icenhower, Ph.D., Executive Director of SHIELDS for Families, a substance abuse treatment agency for women and children, Cheryl Branch, Project Director at Special Services for Groups, a social service agency that serves ethnic minorities, Craig Kelley, Project Coordinator with Special Services for Groups, and Suzanne Spear, LAPIC Project Director.

“This mechanism of bartering [services] is truly based on relationship building and not formal agreements...,” states Dr. Icenhower, who brought the service exchange idea to LAPIC. “Relationships last if they are nourished. That is what is important in this project, not just the actual service exchange that is occurring, but the relationship that is built that will continue to expand.”

To get the project started, LAPIC sent a Service Exchange Checklist to all county-funded agencies in South Los Angeles. The checklist contains an array of substance abuse treatment services and supportive services, and asks the agency directors to check off those services that their



Craig Kelley

agencies could offer and those that they would like to access.

To move the process forward, Craig Kelley, as the project coordinator, meets with agency directors to explain the project and explore ideas for service exchange. The information collected through the checklists and these face-to-face meetings facilitates the exchanges between agencies.

Informal exchanges between agencies are already taking place. The South Central Health and Rehabilitation Programs (SCHARP), a mental health provider in South Los Angeles, has agreed to provide mental health services to clients of the Mt. Carmel Treatment Center, a residential substance abuse treatment facility. Mt. Carmel Treatment Center helps SCHARP by providing space for SCHARP clients with drug-dependence problems.

The faith-based agency Free ‘N’ One can now send clients to SHIELDS for Families to receive vocational assessments, basic education classes, computer training, and community college information. In exchange, Free ‘N’ One helps SHIELDS find housing for drug-dependent men.

For more information, contact Craig Kelley at 213-553-1883 or visit www.lapic.net.

“Relationships last if they are nourished. That is what is important in this project, not just the actual service exchange... but the relationship that is built that will continue to expand.”

- Kathryn Icenhower, Ph.D.

'Lessons Learned' From the LACES Countywide Evaluation



www.laces-ucla.org

By Desirée Crèvecoeur, M.A., Project Director
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There are times when, in the midst of training, data collection and analysis, site visits, and meetings, one forgets the scale of the implementation process of the Los Angeles County Evaluation System (LACES) and the numerous steps that have been taken to ensure its scientifically valid evaluation of substance abuse treatment services and client outcomes.

In order to make sure that this process is not forgotten and to help others embarking on large-scale evaluations of substance abuse treatment programs, an article was written for the *Journal of Drug Issues** detailing the salient "lessons learned" from the LACES implementation. Below are highlights from that article.

Los Angeles County is home to more than 20 ethnic and racial groups. Over 37,000 of the county's 9.5 million residents sought treatment at one of the alcohol and drug abuse treatment/recovery programs that contracted with the Los Angeles County Alcohol and Drug Program Administration (ADPA) during the 1999-2000 fiscal year.

Treating such a large and diverse population is difficult. Evaluating that treatment system is equally challenging. To establish an effective and scientifically grounded evaluation system, four major issues had to be addressed: training, technology, institutional support, and feedback.

Training

One of the major coups of the evaluation was the countywide implementation of a standardized assessment tool—the Addiction Severity Index (ASI), which is administered via computer. However, approximately 14 hours of training is needed before a person can competently conduct an ASI assessment, and so a substantial amount of time was dedicated to training providers.

Technology

All treatment sites had to have up-to-date

computer systems in order to administer the ASI. LACES found that approximately one-third of the county programs functioned with no computers or owned systems that were incompatible with the new software. To remedy this, treatment programs worked with ADPA to find ways to either update or obtain new computer systems.

Institutional Support

Buy-in and support from agency executive directors, county officials, and other higher-ups greatly assisted in the implementation of LACES. In those organizations where the executive and program directors understood the purpose and necessity of the evaluation, the implementation of LACES progressed much more quickly and smoothly than it did in those organizations where there was little or no support.

Feedback

Feedback from all parties involved in the evaluation was essential. Feedback from the treatment providers to the LACES evaluation team led to modifications that reduced burdens on the providers. Feedback from the LACES evaluation team to the providers ensured that agencies provided the information necessary to yield valid outcomes.

The combination of training, technology, institutional support, and feedback led to faster solutions to problems, the sharing of greater amounts of information, and, overall, a better evaluation system. As a result of this successful partnership between UCLA, Los Angeles County, and Los Angeles service providers, LACES is one of the largest and most comprehensive evaluation systems in the United States.

* Crèvecoeur, D.A., Finnerty, B., & Rawson, R.A. (2002). Los Angeles County Evaluation System (LACES): Bringing accountability to alcohol and drug abuse treatment through a collaboration between providers, payers, and researchers. *Journal of Drug Issues*, 32(3), 865-879.

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Chung, T., Martin, C.S., Grella, C.E., Winters, K. C., Abrantes, A.M., & Brown, S.A. (2003). **Course of alcohol problems in treated adolescents.** *Alcoholism: Clinical and Experimental Research*, 27(2), 253-261.

Collins, C.C., Grella, C.E., & Hser, Y.I. (2003). **Effects of gender and level of parental involvement among parents in drug treatment.** *American Journal of Drug and Alcohol Abuse*, 29(2), 237-261.

Ernst, M., Grant, S.J., London, E.D., Contoreggi, C.S., Kimes, A.S., & Spurgeon, L. (2003). **Decision making in adolescents with behavior disorders and adults with substance abuse.** *American Journal of Psychiatry*, 160(1), 33-40.

Evangelista, L.S., Sarna, L., Brecht, M.L., Padilla, G., & Chen, J. (2003). **Health perceptions and risk behaviors of lung cancer survivors.** *Heart & Lung*, 32(2), 131-139.

Finnerty, B.A. (2003). **Monitoring and reporting alcohol and drug use trends in California: The California Substance Abuse Research Consortium Meetings.** *Journal of Psychoactive Drugs, SARC Supplement No.1, May*, 119-125.

Frosch, D.L., Nahom, D., & Shoptaw, S. (2002). **Optimizing smoking cessation outcomes among the methadone maintained.** *Journal of Substance Abuse Treatment* 23(4), 425-430.

Frosch, D.L., Stein, J.A., & Shoptaw, S. (2002). **Using latent-variable models to analyze smoking cessation clinical trial data: An example among the methadone maintained.** *Experimental and Clinical Psychopharmacology* 10(3), 258-267.

Greenwell, L., & Brecht, M.L. (2003). **Self-reported health status among treated methamphetamine users.** *American Journal of Alcohol and Drug Abuse*, 29(1), 75-104.

Grella, C.E., Joshi, V., & Anglin, M.D. (2003). **Gender differences and treatment outcomes among methadone patients in the Drug Abuse Treatment Outcome Study.** *Journal of Maintenance in the Addictions*, 2(1/2), 103-128.

Hamilton Brown, A., Grella, C.E., & Cooper, L. (2002). **Living it or learning it: Attitudes and beliefs about experience and expertise in treatment for the dually diagnosed.** *Contemporary Drug Problems*, 29(4), 687-710.

Hser, Y.I., Grella, C.E., Collins, C., & Teruya, C. (2003). **Drug-use initiation and conduct disorder among adolescents in drug treatment.** *Journal of Adolescence*, 26(3), 331-345.

Ling, W., Compton, P., Rawson, R., & Wesson, D.R. (2003). **Neuropsychiatry of alcohol and drug abuse.** In R.B. Schiffer, S.M. Rao, & B.S. Fogel (Eds.), *Neuropsychiatry* (2nd ed., pp. 893-933). Baltimore, MD: Lippincott Williams & Wilkins.

Messina, N., Burdon, W., & Prendergast, M. (2003). **Assessing the needs of women in institutional therapeutic communities.** *Journal of Offender Rehabilitation*, 37(2), 89-106.

Messina, N., Farabee, D., & Rawson, R. (2003). **Treatment responsivity of cocaine-dependent patients with antisocial personality disorder to cognitive-behavioral and contingency management interventions.** *Journal of Consulting and Clinical Psychology*, 71(2), 320-329.

Murphy, D.A., Roberts, K.J., Hoffman, D., Molina, A., & Lu, M.C. (2003). **Barriers and successful strategies to antiretroviral adherence among HIV-infected monolingual Spanish-speaking patients.** *AIDS Care*, 15(2), 217-230.

Murphy, D.A., Sarr, M., Durako, S.J., Moscicki, A.B., Wilson, C.M., & Muenz, L.R. (2003). **Barriers to HAART adherence among human immunodeficiency virus-infected adolescents.** *Archives of Pediatrics and Adolescent Medicine*, 157(3), 249-255.

Newton, T.F., Cook, I.A., Kalechstein, A.D., Duran, S., Monroy, F., Ling, W., & Leuchter, A.F. (2003). **Quantitative EEG abnormalities in recently abstinent methamphetamine dependent individuals.** *Clinical Neurophysiology*, 114(3), 410-415.

Rose, J.E., Behm, F.M., Westman, E.C., Mathew, R.J., London, E.D., Hawk, T.C., Turkington, T.G., & Coleman, R.E. (2003). **PET studies of the influences of nicotine on neural systems in cigarette smokers.** *American Journal of Psychiatry*, 160(2), 323-333.

Wong, M.M., Hser, Y.I., & Grella, C.E. (2002). **Compliance among adolescents during drug treatment.** *Journal of Child & Adolescent Substance Abuse*, 12(2), 13-31.

ISAP Offers Research Staff Trainings, Pre- and Postdoctoral Fellowships



www.uclaisap.org

By Sherry Larkins, Ph.D. (slarkins@mindspring.com)

In early 2000, as the ISAP staff swelled to almost 300 employees, the need for an internal training department became apparent.

The initial charge of the training department was to ensure the competency of ISAP research staff in assessment administration, documentation, protections for participants, patient relations, and clinical management.

Trainings conducted to meet these needs included: "Learning to Administer the Addiction Severity Index and Structured Clinical Interview" (for diagnoses of mental disorders), and "Good Research Practices."

Demands on the training department grew as several new ISAP projects included training components and collaborations with community partners. The training department expanded to provide trainings on administration of assessments and implementation of specific protocols at several agencies, including community treatment providers in the Clinical Trials Network (see Page 2), the Methamphetamine Clinical Trials Group, and the Methamphetamine Treatment Project (www.methamphetamine.org). Such trainings have been conducted in more than 15 states across the country.

The training department also oversees the Drug Abuse Research Training Center (DARTC). This research training program is funded by a NIDA Institutional Training Grant. The program combines a core research methodology curriculum with hands-on training opportunities in a diverse group of research and clinical settings for three predoctoral and eight postdoctoral Ph.D. and M.D. fellows. Fellows in the program have access to more than 50 faculty members and can choose a training emphasis in basic research, brain imaging, epidemiology, criminal justice, or pharmacologic or behavioral clinical trials.

More recently, trainings have been provided through the Pacific Southwest Addiction Technology Transfer Center (PSATTC; see Page 3).

ISAP's Training Staff

Dr. Thomas Freese, Director

Dr. Sherry Larkins, NIDA Liaison

Jackie Stinnett, Associate Director

Amber Setrakian, Training Coordinator

Through the PSATTC, the ISAP training department has provided trainings to health care workers, treatment providers, mental health specialists, therapists, law enforcement personnel, child protective service workers, medical professionals, and educators in several California counties.

Trainings have covered such topics as "Methamphetamine 101," "Motivational Interviewing," and "Adolescent Treatment."

For information on DARTC, visit the ISAP Web site (www.uclaisap.org). For information on trainings or to make a training request, see the ISAP Web site or the PSATTC Web site (www.psattc.org), or contact Jackie Stinnett, at 310-312-0500, ext. 521.

Calendar of Events

August

August 8, 8:30 a.m.-11 a.m.

"Psychiatric Consequences of Addiction"

By Drs. Thomas Newton and John Tsuang

Sierra Tucson/Matrix Professional Series

Crowne Plaza Beverly Hills (CA)

\$10 admission; 2 CEU hours

To register, contact Sierra Tucson (800-624-5858, ext. 2303)

October

October 10, 8:30 a.m.-11 a.m.

"Co-occurrence of Psychological Trauma and Addiction"

By Dr. Leslie Cooper

Sierra Tucson/Matrix Professional Series

(See August 8 event for location/contact information.)

October 24 & 25, 9 a.m.-4 p.m.

Matrix Model Training

Best Western Gateway, Santa Monica, CA

Contact: Leana M. Gadbois-Sills (800-310-7700, ext. 272)

Pacific Coast Research Center

(Continued from Page 1)

Additional PCRC partners include community-based treatment agencies that provide services to parolees: Phoenix House, Walden House, and Mental Health Systems in California, CiviGenics in Washington and California, and New Directions Northwest in Oregon.

The CJ-DATS research system is designed to evaluate interventions in multisite studies that address systems-level issues related to integrating public health and public safety approaches for drug-using offenders. Studies on the drawing board include: testing procedures designed to improve offenders' transition from prison to the community, testing a model designed to improve parole treatment engagement by integrating parole officers into the process, and testing a prison exit survey designed to determine what level of care is needed during parole.

ISAP brings to the CJ-DATS initiative three decades of experience in research on the relationship between drugs and crime and on interventions for drug-using offenders.

Dr. Michael Prendergast, PCRC's principal investigator (PI), is involved in several evaluations of treatment programs in correctional settings in California, including the Forever Free Substance Abuse Treatment Program at the California Institution for Women and the California Substance Abuse Treatment Facility at Corcoran.

In addition, Dr. Prendergast is PI of two NIDA-funded studies of treatment within criminal justice settings: a five-year follow-up study of inmates who had participated in the evaluation of the Amity Treatment Program at the R.J. Donovan Correctional Facility in California, and an evaluation of the use of voucher rewards within a drug court treatment program. He is also co-PI of the statewide evaluation of California's Substance Abuse and Crime Prevention Act (Proposition 36), which allows some nonviolent drug-involved offenders to choose treatment in lieu of incarceration.

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