



Welcome to the ISAP News

What do the following have in common: prisons in California; medical clinics in the Gaza Strip; the UCLA Neuropsychiatric Institute and Hospital; a substance abuse treatment center in South Los Angeles; and hospital obstetrics units in Oklahoma City, Des Moines, and Honolulu?

Answer: All of these settings are involved with work being done by UCLA Integrated Substance Abuse Programs (ISAP), a substance abuse research and treatment group.

ISAP is working with more than 400 sites in Los Angeles County, throughout California, across the United States, and in numerous countries around the world. Few other organizations are involved in as many diverse initiatives addressing substance abuse issues.

The *ISAP News* will inform you of the work being done by ISAP. We plan to provide quarterly updates on our ongoing projects, announce trainings, and highlight specific topics being addressed by ISAP.

ISAP is a collection of more than 40 researchers, clinicians, and teachers who are part of the Department of Psychiatry and Biobehavioral Sciences in the David Geffen School of Medicine at UCLA.

Walter Ling, M.D., is the Director of ISAP, and M. Douglas Anglin, Ph.D., and I, Richard A. Rawson, Ph.D., are the Associate Directors.

ISAP-affiliated clinical services include inpatient services at UCLA Substance Abuse Services at the UCLA Neuropsychiatric Hospital and outpatient services provided by the Matrix Institute on Addictions.

Training activities include community training by the Pacific Southwest Addiction Technology Transfer Center (see Page 3) and professional training provided through UCLA-based training programs supported by the National Institute on Drug Abuse and National Institute of Mental Health.

We look forward to updating you on ISAP's endeavors through the *ISAP News*, and we hope you find the information useful.

Richard A. Rawson, Ph.D., ISAP Associate Director

ISAP's Major Research Areas

- Basic science/neurophysiology/imaging
- Behavioral pharmacology
- Clinical and behavioral trials
- Criminal justice
- HIV
- Medication development
- Natural history/treatment processes and outcomes
- Science to service
- Special populations and topics
- Training
- Treatment services

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By Frank Flammino, Ph.D.

After three decades of research in drug and alcohol treatment, there is widespread unease with how slowly research findings are applied to treatment services. One reason for this slow rate of dissemination is that the effectiveness of new treatments for drug addiction has been demonstrated primarily in specialized research settings, with somewhat restricted patient populations.

Very little of the work has been conducted in real-life treatment centers with a broad range of patients. To address this problem, the National Institute on Drug Abuse (NIDA) has established the National Drug Abuse Treatment Clinical Trials Network (CTN).

CTN Mission and Organization

The mission of the CTN is to conduct rigorous, multisite clinical trials of behavioral, pharmacological, and integrated behavioral and pharmacological treatment interventions across a broad range of community-based treatment settings and diverse patient populations.

The results of this research are then provided to physicians, providers, other researchers, and patients to improve the quality of drug abuse treatment throughout the country.

The CTN is organized into 17 diverse regions, or nodes. Each node consists of a Regional Research and Training Center (RRTC) and allied Community Treatment Programs (CTP).

The primary function of the RRTC is to design and implement research studies and train the staff in the CTPs to conduct these studies according to good research practice.

ISAP's Role in the CTN Pacific Node

ISAP is the RRTC for the CTN Pacific (California) Node. ISAP has five partner CTPs:

- **Aegis Medical Systems**, which manages 30 narcotic treatment programs throughout California;
- **Betty Ford Center** in Rancho Mirage, which is a world-renowned drug-free (non-methadone) treatment program;
- **Haight Ashbury Free Clinics, Inc.**, in San Francisco, which is a leader in providing drug treatment services to a community ravaged by drugs;
- **Matrix Institute on Addictions**, which is associated with ISAP and runs five treatment sites in the Los Angeles region, providing services such as intensive outpatient drug-free programs for adults and adolescents and a methadone clinic;
- **Tarzana Treatment Center**, which provides a full range of drug treatment interventions, including detoxification, residential, and outpatient programs, at several sites throughout Southern California.

This mix of CTPs provides an excellent diversity of treatment philosophies, treatment modalities, and patient populations.

For more information, contact Albert Hasson, ISAP CTN Project Director, at alberthasson@earthlink.net, or visit:

- **NIDA Clinical Trials Network**
www.nida.nih.gov/CTN/Index.htm
- **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

By Thomas Freese, Ph.D., Director,
(tefreese@ix.netcom.com) and Sherry
Larkins, Ph.D. (slarkins@mindspring.com)

UCLA ISAP became the new home of the Pacific Southwest Addiction Technology Transfer Center (PSATTC) in April of 2002.

The PSATTC is jointly operated by ISAP and the University of Arizona Applied Behavioral Health Policy Division.

The mission of the PSATTC is to support the sharing of addiction treatment technology based on sound science.

By encouraging knowledge sharing, training, and enhanced professional standards and practices, the PSATTC will expand the availability of effective treatment and recovery services for individuals with alcohol and drug problems.

It will also encourage the delivery of these services in a culturally competent manner—in other words with consideration to people's ethnicity, gender, sexual orientation, and language.

Additionally, the PSATTC hopes to assist local treatment agencies, other health care providers, and government officials in their treatment and policy decisions throughout the PSATTC region (Arizona, California, and New Mexico).

The PSATTC has been involved in a wide variety of activities in its first year. Many of these activities have centered on network building and infrastructure development. Local advisory board meetings have been convened around the region to gain input on the PSATTC agenda, and the PSATTC has provided information to participants at a variety of conferences and trainings.

Other PSATTC activities include work with the California Department of Alcohol and Drug Programs on issues of counselor certification and workforce development.

Please Return Workforce Survey

The PSATTC is launching a workforce development survey of community-based treatment providers in Arizona, California, and New Mexico.

The survey instruments provide critical information regarding workplace characteristics, turnover, and needs for training and technical assistance.

If you receive one of these surveys in the mail, please complete it and return it to us as quickly as you can.

Thanks!

PSATTC is also co-sponsoring a statewide conference on co-occurring disorders (mental health and substance use disorders) that will occur June 2 and 3 in Long Beach, CA (contact Sylvia DeGraff at 310-641-7795, ext. 147 for information).

Trainings are also being developed on buprenorphine for the treatment of heroin and other opiate use, as well as relapse prevention strategies for persons with co-occurring disorders.

ISAP News by E-mail?

To receive your copy of the *ISAP News* by e-mail, or to make other subscription changes, please visit our Web site at www.uclaisap.org and click on *ISAP News*.

By Suzanne Spear, M.A., Project Director
(sspear@ucla.edu)

The Los Angeles Practice Improvement Collaborative (LAPIC) is a network of community substance abuse treatment providers and researchers committed to improving the quality of interaction and exchange between service providers, policymakers, researchers, and members of the recovery community.

Funded by the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Treatment (www.samhsa.gov), LAPIC is a three-year program (2001-2004) that helps service providers learn science-based techniques for addiction treatment.

Headed by researchers Richard A. Rawson, Ph.D., and Suzanne Spear, M.A., of ISAP, LAPIC works with a community-based steering committee to organize training activities for service providers, evaluate the use of new techniques in treatment settings, and host regular planning meetings for service providers, policymakers, and researchers.

LAPIC is one of 14 projects across the country participating in SAMHSA's Practice Improvement Collaboratives Program.

LAPIC's projects are grassroots efforts organized by UCLA researchers and service providers in South Los Angeles. Here are some of the projects currently underway:

Service Exchange Initiative

In an effort to make better use of existing community resources, LAPIC will organize a service exchange network among 26 substance abuse treatment providers in South

Los Angeles. The goal is to help these treatment providers access free resources and services by matching service providers who need resources with those who have resources to offer.

Integrating Science into Church-based Addiction Programs

UCLA ISAP researchers are working with Free 'N' One, a local faith-based recovery program operating in 25 churches in Los Angeles, to develop an innovative model based on the

Free 'N' One program and elements of the Matrix Model (www.matrixinstitute.org) of outpatient treatment.

Addiction Severity Index (ASI) Training

The ASI is a computer-based assessment tool that treatment providers can use to better understand their clients' addiction disorders and to identify medical, psychiatric, legal, and family-related

problems that their clients may have. ASI training and the ASI software are provided free of charge through the joint efforts of LAPIC and the Los Angeles County Evaluation System (LACES) program (see Page 5). For more information, contact Derrick Brown at derk30@ucla.edu or 310-312-0500, ext. 307.

LAPIC Partners Include:

- African American Alcohol and Other Drug Council of Los Angeles
- His Sheltering Arms, Inc.
- Free 'N' One: Drug and Alcohol Free Program
- Mt. Carmel Treatment Center
- Palms Residential Care Facility
- Shields for Families
- Los Angeles County Alcohol & Drug Program Administration
- West Central Family Mental Health Center
- Consumer representatives

As part of a quarterly lecture series, *The LA County Alcohol and Drug Program Administration, LAPIC, and the Pacific Southwest Addiction Technology Transfer Center* present:

Using the Addiction Severity Index for Treatment Planning

by Deni Carise, Ph.D., Treatment Research Institute
May 29, 9 a.m. to noon
1000 S. Fremont Ave.
Alhambra, CA

For information, contact Lisa Guzman at
lguzman@ucla.edu or 310-312-0500, ext. 302.

By Desirée Crèvecoeur, M.A., Project Director
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The Los Angeles County Alcohol and Drug Program Administration (ADPA) selected UCLA ISAP to design and implement an ongoing evaluation program that will:

- assess the overall effectiveness of services provided by ADPA-funded alcohol and drug service providers;
- assess client outcomes and the effectiveness of specific service modalities (for example, residential or outpatient) and components (group counseling, individual counseling, medication, etc.); and
- review programs for efficiency and effectiveness.

The Los Angeles County Evaluation System (LACES) will provide countywide alcohol and drug treatment/recovery outcomes at the client, program, modality, system, cross-system, and community levels.

Addiction Severity Index

ISAP will (1) provide the initial training of providers in the use of the Addiction Severity Index (ASI), which measures history of drug use/abuse, medical and employment status, family and social relationships, and legal and psychiatric concerns, and (2) assure that providers have ongoing training and technical assistance in the use of the ASI.

The ASI will be administered during or shortly after (within seven days of) intake. A follow-up ASI will be conducted one year later on a sample of approximately 1,200 clients.

The use of this standardized instrument allows for comparisons of client outcomes across modalities, programs, and the entire substance abuse treatment system.

Because the ASI is a self-report measure, a subgroup of individuals from the 1,200 clients will be asked to provide urine samples that will be tested for the presence of illicit drugs. The

results of the urine tests will then be compared to the clients' responses on the ASI.

Program Evaluation

In addition to collecting client information through the ASI, LACES will collect information at the program level. This information will include counselor turnover, training, treatment services, and additional services (for example, transportation and housing assistance). The results of this information will be related back to the client outcomes data obtained from the follow-up ASI interviews.

As of December 2002, the ASI trainings have been cosponsored by the Los Angeles Practice Improvement Collaborative (see Page 4).

Thus far, LACES has trained over 700 staff to administer the ASI. LACES has also distributed a newsletter and a publication on drug trends (see Page 8). Currently, data are being received and analyzed with the expectation that the first outcomes report will be available in May 2003.

LACES Personnel

M. Douglas Anglin, Ph.D., Richard Rawson, Ph.D., Yih-Ing Hser, Ph.D.—
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Ed Trejo—Computer Analyst

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John Bacon—Head of Research and Evaluation

Community Review Committee

Cheryl Branch—Commission on Alcoholism

Carrie Broadus—Advocate

Mark Casanova—Homeless Health Care Los Angeles

Bill Dombrowski, Ph.D.—Didi Hirsch Community Mental Health Center

Larry Gentile—Behavioral Health Services, Inc.

James Z. Hernandez—California Hispanic Commission on Alcohol and Drug Abuse

Kathryn Icenhower, Ph.D.—Shields for Families Project, Inc.

Jack Kearney—Commission on Alcoholism

Michael Neely—Homeless Outreach Program

James L. O'Connell—Social Model Recovery Systems

David Rambeau—United American Indian Involvement, Inc.

Al Senella—Tarzana Treatment Center

Paul Simon, M.D., M.P.—Health Assessment and Epidemiology Office

Elizabeth Stanley-Salazar—Phoenix House of Los Angeles, Inc.

Mimi West, M.S.W.—Narcotics and Dangerous Drugs Commission

Bill Wilson—Western Pacific Med/Corp



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By Richard Rawson, Ph.D., ISAP Associate
Director (rickrawson@earthlink.net)

The Kingdom of Thailand, the Palestinian Territories, Israel, Egypt, the Republic of South Africa, Australia...all are countries where ISAP is involved in drug abuse research and training.

Methamphetamine Treatment in Thailand

Dr. Walter Ling, ISAP Director, and Jeanne Obert, Executive Director of Matrix Institute on Addictions, have been working in Thailand since 1998, when the U.S. Embassy in that country requested help in training Thai clinicians in the Matrix model of methamphetamine treatment. The Matrix model uses treatment strategies that have been tested and proven effective (see www.matrixinstitute.org).

This project, endorsed by the Center for Substance Abuse Treatment (CSAT) and funded with support from the U.S. Department of State, has assisted the Thai Ministry of Public Health in establishing a nationwide network of methamphetamine treatment facilities.

More recently, Dr. Ling initiated a program of research with support from the National Institute on Drug Abuse (NIDA) to expand the search for medications that may be useful in treating methamphetamine users. The goal of this pro-

ject is to open two research sites in Thailand in which ISAP personnel will train and supervise the Thai staff in the scientific skills of medication testing.

Middle East Drug Use Watch

Work in the Middle East began in 1997 as part of a trilateral program between UCLA and Israeli and Palestinian partners. The goal is to bring NIDA-developed epidemiological research methods to Middle East communities to help them understand and monitor their drug problems, as well as to build cooperation between the participants.

The first step in this work was the establishment of working research teams in Israel and the Gaza Strip region of the Palestinian Authority. The U.S. Department of State supported this work with a two-year grant for \$500,000.

Recently, a second \$500,000 grant was awarded to build a similar data collection process in Egypt and to expand the effort in Israel.

Drug Problems: Cross-Cultural Policy and Program Development (Auburn House, 2002), a book about these endeavors, was edited by ISAP's Dr. Richard Rawson and his Middle East colleagues, Drs. Richard Isralowitz and Mohamed Afifi.

Calendar of Events

May

May 13 & 14

Substance Abuse Research Consortium (SARC) Semi-Annual Meeting

Holiday Inn Capitol Plaza
Sacramento, California

Contact: Beth Finnerty, SARC Coordinator (310-312-0500, ext. 376; finnerty@ucla.edu)

May 20 & 21

Addiction Severity Index (ASI) - DENS Training

Phoenix, Arizona

Contact: Emma Cortez (520-917-0841, ext. 138)

May 28

Methamphetamine 101

Modoc, California

Contact: Tara Shepherd (530-233-6320)

June

June 2 & 3

Co-occurring Disorders

Long Beach, California

Contact: Sylvia DeGraff (310-641-7795, ext. 147)

June 3

Addiction Severity Index (ASI) - DENS Training

Albuquerque, New Mexico

Contact: Emma Cortez (520-917-0841, ext. 138)

June 14-19

The College on Problems of Drug Dependence

Sixty-Fifth Annual Scientific Meeting

Bal Harbour, Florida

For information: <http://views.vcu.edu/cpdd/>



By Beth Finnerty, M.P.H., Epidemiologist (finnerty@ucla.edu)

The following are a few recent trends in the abuse of alcohol and other drugs in Los Angeles County and the state of California:

- The estimated number of emergency department (ED) mentions of methamphetamine increased significantly from 2000 to 2001 in the Los Angeles-Long Beach metropolitan area, whereas ED mentions of marijuana, LSD, MDMA (Ecstasy), and GHB decreased significantly during the same time period.
- Marijuana, the most widely used illicit drug in Los Angeles County, was the primary drug for which 65% of youth (under the age of 18) entered treatment in the first half of 2002.
- In 2001, the California Department of Toxic Substances Control conducted more than 2,000 methamphetamine laboratory and dump-site cleanups throughout the state. The cleanups were estimated to cost California taxpayers close to \$5.5 million, or \$2,450 per laboratory.
- According to the 2001-2002 California Student Survey, there were promising declines in the prevalence of alcohol drinking and cigarette smoking among participating 7th, 9th, and 11th graders.

Subscribe To LA Info

LA Info: Alcohol and Drug Information Sheets are regularly published by the Los Angeles County Evaluation System: An Outcomes Reporting Program (LACES; see Page 5).

Each trend sheet focuses on a specific substance abuse issue relevant to L.A. County. The trend sheets are available online at www.laces-ucla.org.

To subscribe to LA Info, please contact Beth Finnerty at 310-312-0500, ext. 376, or finnerty@ucla.edu.

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