



The Addictions Newsletter

The American Psychological Association, Division 50

Spring, 1997

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President's Column

George De Leon

Center for Therapeutic Community Research

My previous column outlined an agenda centered on two themes: broadening member participation within the Division, and enhancing visibility of the Division within APA. This report updates the progress in working on these two themes. However, let me open with some brief noteworthy items.

- The Division 50 Education and Training Committee has been expanded to fully address *both* academic training and issues relating to continuing professional education. (To learn more, see Mark Sobell's report on page 15 of this issue of *TAN*.)

- Plans are underway for developing a written history of Division 50 for APA's program on the Golden Anniversary of APA Divisions.

- One of the candidates for APA President-Elect, **Peter Nathan**, is an outstanding professional in alcohol addiction and a member of Division 50. (See Peter's article on page 3 of this issue of *TAN*).

- Several Division 50 members now serve on a national task force charged with revising the placement criteria protocol of the American Society of Addiction Medicine (ASAM).

A Call for Participation in Division 50

The first phase of launching the Division has successfully unfolded, evident in the accomplishments in its brief two and a half years of life. Some examples are the Division's modest

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Editor's Corner

Bruce S. Liese

University of Kansas Medical Center

I have a confession to make: I am addicted. Yes, addicted. Terribly addicted. Dreadfully addicted. Hopelessly addicted. It's sad, but true.

"Addicted to what?" you ask. "Addicted to being Editor of this newsletter," I say. Addicted to the friendships and collegial relationships I've developed over the past three years. Addicted to the stimulation and joy of working with the brightest, most innovative, creative, compassionate psychologists in the world.

I tried to quit cold turkey, but I went into DT's (recurrent thoughts of "**Don'T! Don'T! Don'T!**") I tried harm reduction (by reducing my involvement in *TAN*), but even the most mundane *TAN*-related activities led to full relapse. I tried to "**just say no**," but no one in the Division listened!

So here I am, pounding away at my Editor's Column, quietly smiling to myself. Please don't let anyone know my secret, but I fully embrace my addiction. If I stop editing *TAN* I know I will suffer from terrible withdrawal symptoms, my brain will atrophy (from disuse), and I will surely perish. (How's that for rationalizing?) So I must continue as Editor - - at least until I find a more compelling addiction. Any suggestions?

Seriously, I am grateful to all of you who ~~enable me~~... oops, I mean *encourage me* to be Editor of this newsletter. It really is fun! In fact, as soon as this column is written, I'll dash out the door to my weekly Editors' Anonymous (EA) meeting. But first, I will provide a quick overview of this issue.

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Division 50's APA Convention Program in Chicago Land 1997

Arthur "Mac" Horton, Jr.
1997 APA Convention Program Chair

The Division 50 Program Committee for the 1997 American Psychological Association (APA) Convention thanks all members of the Division who submitted proposals for inclusion in the program of the Division of Psychology of Addictive Behaviors.

The APA Convention will be held in Chicago, Illinois August 15-19, 1997. The Division 50 Program Committee was delighted by the very enthusiastic response to the call for submissions (almost 100 submissions of all kinds). The 1997 convention theme is "**Science for Practice**" and many of the scheduled sessions focus on recent scientific findings of crucial importance to practitioners.

The Program Committee was able to accept the majority of the submissions and the APA Division 50 program will include 11 symposia, four paper sessions, two poster sessions, two workshops, a round table discussion on "The Drug Abuse Treatment Outcome Study (DATOS): Update of Current Research Findings," chaired by Division President George De Leon, a presidential address by Dr. De Leon and invited addresses by Carlo DiClemente on "Motivation for Change: Implications for Substance Abuse Treatment" and Lawrence S. Brown, M.D., M.P.H. (Medical Director for the National Football League) on "Treating Substance Abuse Problems in Professional Athletes" as well as a social hour and Division business meeting.

Topics of symposia accepted include cognitive-behavioral substance abuse treatments, substance abuse treatment for woman, evaluation of community substance abuse programs, intervention with impaired psychologists, neurobiological consequences of drug abuse, treating co-morbid mental health and substance abuse disorders in the criminal justice system, adolescent substance abuse, and motivation in the treatment process.

Topics of paper sessions organized include "Assessment of Substance Abuse," "Addictive Processes," "Treatment Issues," and "AIDS Prevention." Poster sessions scheduled include presentations on all basic and applied aspects of the psychology of addictive behaviors, from dealing with managed care to coping with Internet addiction. Workshops accepted include Relapse Prevention with the dually-diagnosed and corrections and drug abuse treatment.

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The Addictions Newsletter

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Horton (continued from previous page)

Clearly, the 1997 Division 50 Convention Program is multi-faceted and includes the broad range of addictive behaviors. Consistent with the character of Division 50 as a Scientist-Practitioner Division, both science and practice concerns are well represented.

The members of the 1997 Division 50 Program Committee included Kim Fromme of the University of Texas at Austin (Kim is next year's Program Committee Chairperson), Pat Flynn of NDRI-North Carolina, and Tom Brandon, State University of New York at Binghamton. The equally hard working group of reviewers (Vincent J. Adesso, Curtis L. Barrett, Marsha E. Bates, Clara M. Bradizza, Kate Carey, Tony Cellucci, Kevin J. Corcoran, Bill Fals-Stewart, Meyer Glantz, Robert Malow, Jerome J. Platt, Elizabeth R. Rahdert, Damaris J. Rohsenow, Frederick Rotgers, Elsie Shore, Greg Smith, James L. Sorensen, Paul Stasiewicz, and Maria Testa), also deserves the Division's thanks and each reviewer has been sent a letter of thanks on behalf of the Division and will be recognized at the 1997 Division Business meeting. A number of other Division members kindly expressed a willing to review submissions but for a number of reasons (in most cases mail forwarding problems due to address changes) their services were not utilized this year. These individuals also deserve the Division's thanks for their willingness to serve (James H. Bray, Tim O'Farrell, Laurie Roehrich, Linda C. Sobell, Peter Vik).

In addition to the formal APA program, the Division is sponsoring an all day Pre-Convention Institute on August 14, 1997 and more details on the Pre-Convention Institute will be available in the near future. Please make plans to attend the Division 50 Program at the 1997 APA Convention in Chicago. Hope to see you there!!

Nominate "Old" and "New" Division 50 Fellows

Nominate someone you know for Fellow status in Division 50 (including yourself). The deadline for receipt of completed Fellow applications is **June 1, 1997** for those who are already *APA Fellows in other Divisions*. (This date allows for consideration of applicants at the 1997 APA Board meeting.) Applications received after that date will be deferred until the 1998 cycle. The deadline for completed applications for *new Fellow nominations* is **December 15, 1997** (for consideration at the 1998 APA Board meeting). Applications received after that date will be deferred until the 1999 cycle.

Correspondence and requests for applications should be addressed to: James L. Sorensen, Ph.D., Chair, Division 50 Fellows and Awards Committee, Department of Psychiatry, San Francisco General Hospital, 1001 Potrero Avenue, San Francisco, CA 94110; e-mail: james@itsa.ucsf.edu.

On Bridging Gaps

Peter E. Nathan
The University of Iowa

I'm grateful to Bruce Liese for his invitation to write this brief article for the Division 50 Newsletter. Like many of you, I worked hard for the establishment of the Division. I strongly felt that the interests of psychologists working in the addictions, long underemphasized within the APA, would best be served in this way. The accomplishments of Division 50 since its creation have proven how right we were. APA works harder in Washington on behalf of scientists and clinicians in substance abuse now that we are a formal part of the association's governance structure. Having our own allotment of time at the convention heightens the visibility of psychologists in the addictions. Publishing our own journal and this newsletter, and maintaining our own listserver, markedly increases the ease with which psychologists with common interests in substance abuse can communicate with each other.

The brief essay that follows considers an instructive parallel between the processes by which the gaps historically separating scientist-professionals and counselors in the addictions and academics and clinicians within organized psychology appear to have narrowed in recent years.

Early in my career, after completing a two-year clinical research post-doctoral, I went to work as a research clinician for Harvard Medical School at Boston City Hospital. One of the responsibilities of the job was to see patients in a Tuesday evening alcoholism clinic - even though I knew next to nothing about how to treat alcoholism. What little I knew had been gleaned from the very occasional mention of the addictions in lectures and textbooks during graduate school, for what was known about alcoholism 35 years ago was not typically taught to clinical psychologists-in-training. Few alcoholics came to psychologists for treatment, because psychosocial treatments for the condition were widely perceived as ineffective and few psychologists - or other professionals, for that matter - thought it necessary to take the trouble to learn much about what was generally considered an untreatable disorder. As a consequence, most of the alcoholics who did decide to seek treatment at the time, almost all of them men with chronic, recalcitrant problems, sought twelve-step programs or attended public outpatient clinics staffed largely by alcoholism counselors, most of whom had themselves recovered by means of Alcoholics Anonymous.

So I learned about alcoholism from other therapists in the clinic, several of whom were psychiatric residents who had not known any more about how to treat alcoholics than I did when they started. I also learned from the alcoholism counselors at the clinics that referred to our clinic and to which we referred. Most of all, I learned from my patients.

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APA Division 50 Executive Committee

Unofficial Minutes from Mid-Winter Meeting

Washington, DC--February 24, 1997

Arthur "Tom" Horvath

Secretary-Treasurer

Members in attendance: Barrett (Member-at-Large), Brown (Member-at-Large), De Leon (President), Goldman (Past-President), Horvath (Secretary-Treasurer), Platt (Member-at-Large), Zucker (President-Elect). No members absent.

Also present: Arthur Horton (APA Convention Program Chair), Bruce Liese (Newsletter Editor), Mark Sobell (Education and Training Chair).

Meeting called to order by De Leon at 8:45 AM

Motion 1. To accept the minutes of the 8/96 meeting, as printed in the newsletter (Barrett, Zucker; motion passed unanimously unless otherwise indicated).

President's Report (De Leon) - A Pre-Convention Institute is scheduled for Thursday before the 1997 APA Convention in Chicago. Major focuses will include addictive behaviors that do not fall under the term "chemical dependency" (so as to emphasize the commonalities across addictive behavior), the application of research findings to clinical practice, and the treatment of co-morbid addictive behaviors.

Motion 2. To approve holding a pre-APA convention training institute, as an annual event, to begin 8/97, provided that the Division incurs no significant financial risk from the event (Horvath, Barrett).

President-Elect's Report (Zucker)

Motion 3. To appoint an ad hoc Division History committee, to consist of Ray Hanbury, Miles Cox, and Curtis Barrett, with a chair to be selected among themselves, to submit a chapter on the history of the Division to APA by Fall, 1997 (Horvath, Platt).

Motion 4. To appoint Ray Hanbury as the Division's representative to the Committee on Division/APA Relations (CODAPAR) (Zucker, Goldman).

Extensive discussion occurred about how to have a greater influence on APA policy, in particular on the educational requirements of APA accredited training programs. Informal discussion on this issue will continue.

Treasurer's Report (Horvath)

Motion 5. To accept a 1997 budget of \$37,500 (Goldman, Zucker).

Report of the Nominations and Elections Committee (De Leon, for Shore) - There appears to be grass roots movement to nominate Sandra Brown for President, Jalie Tucker for Council Representative, and Ken Leonard for Member-at-Large. Additional candidates have been mentioned. The Council Representative election is required by APA Bylaws to have two candidates. Both other positions require only one candidate. Extensive discussion occurred about how to stimulate nominations for future elections.

Motion 6. To authorize a subcommittee consisting of the three Presidents to make nominations for open positions on the upcoming ballot, if any exist after the 3/1/97 nomination deadline (Goldman, Zucker).

Report of the Journal Editor (Horvath, for Sue Curry)

Motion 7. To approve the contract with Educational Publishing Foundation, for the continued publishing of the Journal until 2006, with automatic extensions thereafter unless 2-year notice is given, to replace the contract currently in place (Goldman, Zucker).

Motion 8. To commend Sue Curry for the continued excellence of our Journal (Goldman, Zucker).

Motion 9. To establish an ad hoc committee to promote institutional subscriptions to the Journal, to consist of Horvath, Zucker, Liese, Jan Williams, and Sue Curry, with Horvath as chair (Zucker, Platt).

Report of the Newsletter (Liese) - Newsletter now in 4th volume. Congratulations given.

Motion 10. To continue the appointment of Bruce Liese as the Editor of the Newsletter, commencing with the Fall, 1997 issue (Brown, Goldman).

Report of the Program Committee (Horton) - The theme of this year's convention program is Science for Practice. There were almost 100 submissions, and the program will be excellent. Congratulations given.

Report of the Education and Training Committee (Mark Sobell) - There have been two missions for the committee, continuing education and promoting better graduate education in addictive behavior.

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Horvath (continued from previous page)

Motion 11. To establish a standing Committee on Continuing Education, with an acting chair to be appointed by the President upon recommendation of the chair of the Education and Training Committee (Mark Sobell), with members to be appointed at the next Executive Committee (EC) meeting (8/97), following an open invitation to the membership, to take over from the Education and Training Committee the continuing education functions previously held by it, with the APA Program Chair as an *ex-officio* member (Sobell, Brown).

Report of the ad hoc Committee on Empirically Validated Treatments (Goldman) - Further work by this Committee is tabled until the next EC meeting (8/97), when an update will be presented on relevant developments on the dissemination of empirically validated treatments.

PRESENTATIONS by APA organizational units, or other organizations, covering their current activities and interactions with the Division:

- APA College of Professional Psychology (Jan Ciuccio)
- APA Public Interest Directorate (Henry Tomes)
- APA Science Directorate (Bill Howell, Chris Hartell)
- Center for Addiction Technology Education and Evaluation (Cheryl Mejta, Judy Lewis, Anna Skinstad)

Report of the National Committee on Problem Gambling Liaison (Barrett) - Psychologists have an opportunity to become a major influence in the study and treatment of gambling problems. The gaming industry has revenues of \$550 billion per year, which exceeds the revenues of any other United States entertainment industry.

Report of the International Liaison (Platt)

There was no old business or new business. Meeting adjourned, 3:15 PM

Editor's Corner (continued from page 1)

Elections are right around the corner and this issue is packed with important information about the candidates. Please give their biographies your full attention and vote when you receive your ballot from APA. In addition to election-related items, this issue of *TAN* contains important Division news (including various brief committee reports and minutes from the Executive Committee's mid-winter meeting). We are also fortunate to have a feature article written by **Peter Nathan**, candidate for President-Elect of APA. Peter is a member of Division 50 who has made an immeasurable contribution to our field with his research on alcohol problems. His article provides an interesting history of his experiences in the alcohol field.

So that's all the business for now. Thanks for listening... I'll be sure to keep you informed about my recovery.

Time to Vote for Division 50 Officers! *Report of the Nomination Process*

Elsie R. Shore
Elections Coordinator

This year the offices of President-Elect, Member-at-Large (3-year term), and APA Council Representative (3-year term) were open for nomination. Division 50 bylaws require that nominations be supported by the signatures of at least two and one-half percent of the members. The bylaws also make provision for nomination by the Board.

Thanks to the wonder of electronics, nominations arrived by fax, e-mail, and regular mail. . . . usually right before the deadline! Over sixty members submitted nominations. The count was reported to the Division 50 Executive Committee, which finalized the slate of candidates. Nominated for the office of President-Elect are **Sandra Brown** and **Arthur "Mac" Horton**. Nominated for APA Council Representative are **Jalie Tucker** and **Curtis L. Barrett**. **Ken Leonard** is nominated for Member-at-Large. Because there is only one candidate for Member-at-Large, the ballot, which will be sent by APA in mid-May, will have space for write-in candidates.

On pages 6 and 7 of this issue of the newsletter you will find the candidates' biographies. Please read them carefully and vote for the candidate of your choice when you receive your ballot from APA.

Notes from the Division 50 Membership Chair

Jan Williams
Membership Chair

At the end of 1996, Division 50 membership totals were: 19 Associates, 1041 Members, 54 Fellows, 193 Student Affiliates, and 66 Professional Affiliates. The Membership Chair has sent out over 2,200 membership information packets during 1997. This number includes packets sent to individuals who have taken the APA College of Professional Psychology exam for certification of proficiency in substance abuse but were not members of Division 50.

Retention of members continues to be an important issue for the Division. There were 137 resignations by members for the 1997 year. Only four of these individuals also resigned from APA. Applications from new members are coming in at an average rate of 3 or 4 per week. Student interest appears to be growing, which could provide the Division with an important source of new members.

Candidate Biographies

Division 50 Elections

Candidates for Division 50 President

Sandra A. Brown is a Professor in the Departments of Psychology and Psychiatry at the University of California, San Diego, Chief of the Psychology Service at the Veterans Affairs San Diego Healthcare System, and Associate Director of the Center for Research on Child and Adolescent Mental Health Services, Children's Hospital in San Diego. Since receiving her Ph.D. from Wayne State University in 1981, addictive behaviors have been the primary focus of her professional career. Dr. Brown has over 15 years' experience in direct clinical service to addicted populations, ranging from adolescents to older adults. Her major professional interests have been understanding the development and progression of substance abuse across the life span, processes whereby youth and adults succeed and fail following substance abuse treatment, and the special role of psychologists in the assessment and treatment of more complex addiction-related problems including co-morbid disorders.

While Dr. Brown belongs to Divisions 12 and 38 of APA, she considers Division 50, in which she is a Fellow, to be her professional home. Dr. Brown has been an active participant in Division 50 since its inception. She was the first Chairperson of the Education and Training Committee, Division 50 liaison to the APA College of Professional Psychology, and most recently Member-at-Large on the Board of Division 50. She was the 1996 recipient of the APA Division 50 National Service Contribution Award for her leadership in education, training, and certification for the treatment of substance abuse.

Her long standing commitment to the treatment of addictive behaviors is also reflected in her extensive training and program development activities across the country. She has been involved in service provider training and curriculum development nationally for the Addiction Technology Transfer Centers and lectures broadly on developmentally sensitive assessment and interventions for addictive populations. She has demonstrated a long-standing commitment to extending knowledge within psychology to other substance abuse professionals in schools and diverse health care settings. Her commitment to fostering high quality clinical care for those with addictive behaviors has also been the focus of her clinical research. She has been a member of the editorial boards of several addiction journals, a member and chair of the Clinical and Treatment Review Committee of NIAAA, reviewer for other NIAAA, NIDA, NIMH and VA review panels and recipient of 11 grants focused on understanding the process of addiction and recovery.

Dr. Brown is internationally known for her work on adolescent substance abuse, expectancies, and recovery processes. She has over 100 publications and her present

research on substance abuse, psychiatric co-morbidity, and smoking is funded by grants from the VA, NIAAA, NIDA and NIMH. A major goal for Dr. Brown is to promote training in the assessment and treatment of addictive disorders within the profession of psychology.

Arthur MacNeill Horton, Jr. earned his Ed.D. in Counselor Education from the University of Virginia (1976), and also holds Diplomates in Clinical Psychology and Behavioral Psychology from the American Board of Professional Psychology (ABPP) and a Diplomate in Professional Neuropsychology from the American Board of Professional Neuropsychology (ABPN). He is a past President of the American Board of Professional Neuropsychology, a past Chairperson of the Evaluation Section of Division 18 (Psychologists in Public Service) and the 1997 Program Chairperson for APA Division 50.

Prior to joining the National Institute on Drug Abuse (NIDA) in 1990, Dr. Horton coordinated an alcoholism treatment program in a Department of Veterans Affairs Medical Center, taught medical students and residents about alcoholism at the University of Maryland Medical School and conducted substance abuse research studies in a number of settings. In addition to the Department of Psychiatry of the University of Maryland Medical School, he has held faculty appointments at Johns Hopkins University, West Virginia University, the University of Baltimore, the Citadel, and the University of Virginia.

His NIDA research monitoring responsibilities have, at various times, focused on applied evaluations of drug abuse treatment programs, case management, and treatment of drug abusing women of child bearing age and their young children. Most recently, he has been involved in co-morbidity issues, and assessment of the clinical neurobiological effects of drug abuse therapies.

The author or editor of more than ten books, 25 book chapters, and almost 100 journal articles, Dr. Horton's most recent professional contributions include the edited volumes, the *Diagnostic Source Book on Drug Abuse Research and Treatment*, with B. Rounsaville, F. Tims, and B. Sowder (National Institutes of Health, 1993, reprinted 1996); *Drug Abuse Treatment: The Implementation of Innovative Approaches*, with B. Fletcher and J. Inciardi (Greenwood Press, 1994); *Diagnosis and Severity of Drug Abuse and Drug Dependence*, with J. Blaine, and L. Towle (National Institute on Drug Abuse, 1995), and; *Effectiveness of Innovative Approaches in the Treatment of Drug Abuse*, with F. Tims, J. Inciardi, and B. Fletcher (Greenwood Press, 1997).

A former chairperson of the NIDA Equal Employment Opportunity Committee, Dr. Horton received awards from the Department of Health and Human Services, NIH and NIDA as well as community groups, for his work on behalf of minority groups, disabled employees, and underserved populations.

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Candidates for APA Council Representative

Jalie A. Tucker is a Professor of Psychology at Auburn University, having previously held faculty positions in the Department of Psychology at Wayne State University, Detroit (1986-89) and in the Department of Psychiatry, College of Medicine, University of Florida, Gainesville (1980-86). She received a Ph.D. in clinical psychology from Vanderbilt University in 1979 and has been active in research, teaching, and clinical service throughout her career. Her specialty area is alcohol and drug abuse, with secondary interests in health psychology and behavioral medicine. Her current research on help-seeking and recovery processes in problem drinkers combines these interests and is supported by grants from the National Institute on Alcohol Abuse and Alcoholism. She is a Fellow of APA Divisions 12, 25, 28, and 50 and serves on the editorial board of several journals.

Dr. Tucker has been involved in Division 50/SPAB activities since the early 1980s. She was an associate editor of the *Psychology of Addictive Behaviors* and its precursors from 1982-93 and has since served as a consulting editor. She was President during 1993-94 when the Society of Psychologists in Addictive Behaviors gained Divisional status in APA. Shepherding the transition of SPAB into Division 50 required developing an organizational structure to support the practice, scientific, and educational goals of the Division's diverse membership and drawing upon the talents of members to implement it. Another key task, spearheaded by Sandra Brown, involved working with the APA College of Professional Psychology and with Division 28 (Psychopharmacology & Substance Abuse) to develop a viable credentialing process that is sensitive to scientific knowledge about addictive behavior change. Another priority was establishing linkages with other Divisions with similar constituencies. Dr. Tucker received a Division 50 Presidential Award in 1995 for Division service.

Because of the groundwork laid during this formative period and the tireless work of many Division 50 members, the young Division quickly mastered basic organizational tasks and is increasingly in a position to be proactive, rather than reactive, concerning issues that affect the future of our members and psychologists in general. There is much to be done with respect to disseminating psychological interventions that are guided by scientific knowledge, revising pre- and post-doctoral education to respond to market forces operating on the practice of psychology without selling out the science of psychology, expanding roles for psychologists in the era of managed care, promoting more appealing and diverse interventions for addictive behaviors, and informing the debate about United States drug control policy. Addressing such issues on behalf of Division 50 must be coordinated with other divisions and groups with similar interests and with the actions of APA. I would welcome an opportunity to contribute to the process by representing Division 50 to the APA Council of Representatives.

Curtis Barrett, a Fellow of Division 50, served Division 50's precursor, the Society of Psychologists in Addictive Behaviors (SPAB), for three years as Secretary-Treasurer and President. He received the SPAB award for outstanding service. Dr. Barrett is completing his second elected term on the Board of Division 50 as Member-at-Large.

His past service to psychology as President of his state psychological association, as Chair of his state's licensing board, as Regional Representative for ABPP, and his six years on the Board of ABPP's Board of Forensic Psychology, have given him perspective on the clinical and professional issues that the APA Council will consider.

Dr. Barrett is both a practitioner and an academic. He is Professor at the University of Louisville where his thirty years of experience in treating addictive disorders have been gained. In this University setting, he directed a treatment program and developed cognitive behavioral approaches to alcoholism and pathological gambling. With Eric Drogin, he addressed Forensic aspects of addiction. Dr. Barrett unabashedly endorses the Scientist-Practitioner (Boulder) model and, on the APA Council, he will assert that Psychology generally, and the Addictions field in particular, must proceed from a solid scientific base. No other discipline in the addictions field makes this assertion: Curt believes that Psychology must do so.

Candidate for Division 50 Member-at-Large

Ken Leonard is a Senior Research Scientist at the Research Institute on Addictions in Buffalo, New York. He is a Fellow in Division 50 and has served as Division 50 Liaison to the APA Office of Substance Abuse since the inception of the Division and as Liaison to the APA Public Interest Directorate since 1996. He has served on NIAAA's Psychosocial Review Committee (Treatment and Clinical Subcommittee), is an editorial board member for the *Journal of Studies on Alcohol*, and is an associate editor for the *Journal of Abnormal Psychology*. Dr. Leonard received a Ph.D. in Clinical Psychology in 1981 from Kent State University and was a Postdoctoral Fellow at the Western Psychiatric Institute and Clinic in Pittsburgh from 1981 to 1984.

Dr. Leonard's research has focused on alcohol and marital/family processes and alcohol and violence. He is co-editor of *Psychological Theories of Drinking and Alcoholism* with Dr. Howard Blaine, and co-editor of *Alcohol and the Family* with R. Lorraine Collins and John Searles.

**Watch for your ballot from
APA and cast your vote!**

Addictions Abstracts

Many Division 50 members are involved in scholarly activities. In this section, members can share their work with each other. The following are guidelines for submissions to *Addictions Abstracts*. Only one abstract may be submitted per person, per issue. The maximum length of each abstract should be 150 words. Only published papers (peer-reviewed articles, books, chapters) are acceptable (versus papers "in press" or "in progress"). All work should be published within the past year. Please include the full citation (not included in 150-word limit). We will only be able to accept a limited number of abstracts on a first-come, first-served basis. Please send abstracts by mail or (preferably) by e-mail to bliese@kumc.edu. Thanks!

Other Evidence for at Least Two Alcoholisms, II: Life Course Variation in Antisociality and Heterogeneity of Alcoholic Outcome

Zucker, R.A., Ellis, D.E., Fitzgerald, H.E., Bingham, C.R., and Sanford, K.P. (1996) Other evidence for at least two alcoholisms, II: Life course variation in antisociality and heterogeneity of alcoholic outcome. *Development and Psychopathology*, 8, 831-848.

Within the framework of a cumulation/nesting theory for the emergence of adult psychopathology, a typing structure for alcoholism based upon variations in life course continuity of antisocial behavior over childhood and adulthood was examined for its ability to differentiate symptomatic and life history variations among alcoholic and nonalcoholic men accessed by way of a population-based recruitment strategy. Results supported the theory and identified two alcoholic types, one high on lifetime antisociality (antisocial alcoholic = AAL), the other low (nonantisocial alcoholic = NAAL), and a third nonalcoholic type with low lifetime antisociality. Types differed in age of onset, severity, number, and life course of alcohol problems, measures of social adaptation, amount and severity of other psychopathology, and salience of family history load of alcoholism. Antisociality and alcoholism tended to be nested characteristics.

Psychotherapists' Beliefs About the Benefits of 12-Step Groups

Freimuth, M. (1996) Psychotherapists' beliefs about the benefits of 12-step groups. *Alcoholism Treatment Quarterly*, 14, 95-102.

The addictions literature describes the interaction of a person's simultaneous participation in a 12-step program and psychotherapy in two ways. With an adjunct model, each modality indirectly supports the work of the other while a collaborative model emphasizes active integration. A study was conducted to assess psychotherapists' perceptions of the benefits of 12-step work and to determine if these attitudes fit either model. Given the benefits of collaboration, this study's finding that psychotherapists from diverse backgrounds hold beliefs consistent with this model. The paper calls for further exploration of how experience in 12-step groups and psychotherapy can best be integrated.

Dual Diagnosis and Adolescent Psychiatric Patients

Piazza, N.J. (1996). Dual Diagnosis and adolescent psychiatric inpatients. *Substance Use and Misuse*, 31, 215-223.

Recognition is growing that many individuals with mental health disorders also suffer from substance use disorders. Providers of adolescent mental health services are in need of prevalence data and instruments that can assist in screening for alcohol and other drug use problems. This study provides data on the concurrent validity of using the Substance Abuse Subtle Screening Inventory (SASSI) with mental health patients and data on the prevalence of substance use disorders in a sample of adolescent psychiatric inpatients.

Addictions Abstracts

The Effectiveness of the SASSI for Detection of Substance Abuse in Pregnancy

Horrigan, T.J., Piazza, N.J., & Weinstein, L. (1996). The Substance Abuse Subtle Screening Inventory is more cost effective and has better selectivity than urine toxicology for the detection of substance abuse in pregnancy. *Journal of Perinatology*, 16, 326-330.

The Substance Abuse Subtle Screening Inventory (SASSI) was shown to have better selectivity than either urine toxicology or patient report in a sample of 560 pregnant women. The SASSI was found to correctly identify more individuals who were true positive or true negative for a substance use disorder than urinalysis alone. The SASSI was also able to identify individuals with an alcohol use disorder when urinalysis was not. The results suggest that the SASSI may be a more effective tool for identifying substance use disorders and preventing associated birth defects than urine toxicology.

Recovery from Alcohol Problems With and Without Treatment

Sobell, L.C., Cunningham, J. A., & Sobell, M.B. (1996). Recovery from alcohol problems with and without treatment: Prevalence in two population surveys. *American Journal of Public Health*, 86, 966-972.

This study was designed to determine the prevalence of recovery from alcohol problems with and without treatment, including whether such recoveries involved abstinence or moderate drinking. Data were analyzed from two surveys of randomly selected adults in the general population. Using random digit dialing, telephone interviews were conducted with 11,634 and 1,034 respondents. Respondents 20 years of age were categorized based on drinking status and history. Both surveys found that the majority of individuals (77.5% and 77.7%) who had recovered from an alcohol problem for 1 year did so without help or treatment. A sizable percentage (38% and 63%) also reported drinking moderately after resolving their problem. These two studies are among the first to report prevalence rates for recovery from alcohol problems for treated and untreated individuals and for moderation and abstinence outcomes.

Behavioral Assessment of Substance Abuse With Co-occurring Psychiatric Disorder

Stasiewicz, P.R., Carey, K.B., Bradizza, C.M., & Maisto, S.A. (1996). Behavioral assessment of substance abuse with co-occurring psychiatric disorder. *Cognitive and Behavioral Practice*, 3, 91-105.

Substance related disorders are common in individuals with severe and persistent mental illness. The effects of substance use in patients with co-morbid mental illness are varied and include both increases and decreases in psychiatric symptoms. Behavioral assessment of substance use provides a useful framework for identifying the interdependence of substance use and psychiatric symptoms. One important component of behavioral assessment is the analysis of antecedents and consequences. This paper describes the use of this approach in the assessment and treatment of a man with a multiple substance-related disorder and major depressive disorder with psychotic features. Eighteen-month outcome data are reported, and the utility of conducting a behavioral assessment for treatment planning and outcome evaluation is discussed.

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fiscal stability, its journal (*Psychology of Addictive Behaviors*), which is increasingly well-regarded, its significant role in assisting the College of Professional Psychology in developing APA's first professional proficiency certification, and now in establishing an annual institute.

While much of the work in phase one has been shouldered by a few members, the future health and vitality of the Division requires full democratization of involvement, work, and leadership. A call for increased participation was heralded at the recent midwinter Division 50 business meeting at the APA offices in Washington DC. The minutes of that meeting (published on page 4 of this issue of *TAN*) cannot reflect the labored deliberations of the executive committee concerning the 1997 Division elections. Although the deadline for nominations was fast approaching, there was only one nominee for President-Elect and none for the other positions. Under the bylaws the executive committee can propose an election slate. This alternative posed an obvious dilemma for a troubled committee that was exquisitely sensitive to perceptions of a closed political process. Fortunately, within a week, several nominees for all positions came forth with enough votes for eligibility. (The slate of candidates, including their biographies, begins on page 6 of this issue of *TAN*.)

This election dilemma dramatized the general need to cultivate *grass roots* membership participation, not only in the governance of Division 50 but in advancing its mission. Some relatively easy and effective ways of getting involved with Division affairs are briefly noted:

- Attend the outstanding Division 50 addresses, symposia, poster, paper and workshop sessions at the APA convention in Chicago. And be sure not to miss the Division 50 business meeting and social hour.
- Volunteer as a member or advisor to the Division's various subcommittees and task forces (e.g., Education and Training). Names of contact persons for these committees are available from me or Bruce Liese.
- Get on the Division 50 list server, which will expand your e-mail network.
- Join or launch a local chapter or Division on addictions in your state psychological association.

The Division 50 Institute

I am delighted to report that the first annual *Division 50 Institute in the Addictive Behaviors* will be launched in August 1997 at the APA convention in Chicago. Complete details about the program, registration, invited speakers, etc. will be provided in future communications. However, some key aspects

of the Institute are summarized in the following paragraphs.

The Institute will convene for a full day on *Thursday, August 14 1997* in the main convention hotel (Palmer House). Registration will be open to all APA attendees, although at a reduced fee for Division 50 members. (Non-member attendees can join Division 50 at the Institute's registration and receive the reduced fee). The first annual Institute will be co-sponsored by the Addiction Technology and Training Center (ATTC) at Governor's State University in Illinois. The ATTC is one of several regional training centers funded by the Center for Substance Abuse Treatment as part of its mission of improving treatment of substance abuse. Continuing Education credit may be earned, although this has not yet been finalized. The program is tentatively entitled *The Addictions in Psychology: Commonalities Across Substance Abuse, Gambling, Sexual Addiction and Eating Disorders*. Experts in each major addictive disorder, along with discussants and attendees, will collectively explore the validity of the theme itself - identifying the similarities and differences across various addictions.

The inaugural theme is especially auspicious for enhancing the visibility of the Division. First, it symbolizes the distinction and broad purview of Division 50 which extends beyond chemical dependency. And it highlights a diverse membership that includes researchers and practitioners in a variety of addictive disorders. Second, the theme implies a subspecialty in psychology, namely *generic addictive disorders*. Thus the Institute is the first to provide an appropriate venue within APA (and perhaps within professional psychology in general) for examination of the nature of addictive disorders in particular and the subspecialty in general.

Third, the theme reflects a strictly *psychological* perspective on addictive disorders consisting of two vectors: how psychological approaches illuminate the addictions, but also how the study and practice of addictive disorders contribute to psychology in general. Several examples of the latter vector are briefly noted; the varieties of relapse and relapse prevention, the efficacy of peer self-help models, (e.g., 12-Step, and therapeutic communities), formulations of recovery stage frameworks; empirically demonstrated distinctions between motivation and readiness for treatment; the development of motivational enhancement strategies, innovative treatments for co-morbidity (i.e., co-occurring mental illness and addiction; or co-occurring addictive disorders); treatment strategies for conduct and character disorder in juveniles and adults. These particular examples of developments within the addictions area will ultimately prove applicable to a wide range of other behavioral disorders.

In closing, the membership is essential in moving the Division's agenda. Your participation in general and in the Institute in particular will assure a successful launching of this annual event and would also significantly enhance the visibility and credibility of the Division itself.



Announcements

Visiting Assistant Professorship Auburn University

The Department of Psychology at Auburn University seeks Visiting Assistant Professor (non-tenure track) with expertise in human substance abuse and health psychology for initial 1-yr. appointment (may be extended for an additional four years). Involves teaching courses in substance abuse, health psychology, and related topics at the graduate and undergraduate levels. The winning candidate will participate in department's Behavioral Pharmacology and Substance Abuse specialty program (<http://www.duc.auburn.edu/~newlamc/>), which involves faculty and students from doctoral programs in clinical and experimental psychology. Minorities and women especially invited to apply. AA/EOE. Send C.V., letter of application covering teaching and research interests, three letters of reference, and representative reprints/preprints to Virginia E. O'Leary, Ph.D., Department of Psychology, 226 Thach Hall, Auburn University, AL 36849-5214.

Postdoctoral Research Fellowship University of Vermont

One position is available in a stimulating productive laboratory. Responsibilities are in the behavioral economics of drug self-administration. Applicants must have completed doctoral training in psychology or pharmacology and have research experience. Minorities are encouraged to apply. Competitive stipends.

Send letters of interest, vita, and letters of reference to Warren K. Bickel, Ph.D., Human Behavioral Pharmacology Laboratory, Department of Psychiatry, 38 Fletcher Place, Burlington, Vermont 05401-1419.

Post-Doctoral and Junior Faculty Positions Institute for Addictive Disorders Allegheny University

The newly organized Institute for Addictive Disorders (IAD) of the Allegheny University of the Health Sciences (formerly the Medical College of Pennsylvania and Hahnemann University) invites applications from highly qualified individuals for post-doctoral or junior faculty positions (both clinical and non-clinical). These positions offer opportunities for academic career advancement, including research and tenure track academic appointments for productive individuals. Allegheny University of the Health Sciences is a member of the Allegheny Health, Education and Research Foundation, the largest academic health system in Pennsylvania.

Responsibilities: To participate in the design, conduct, and implementation of clinical research projects in the addictions being conducted by the Institute Director and other faculty members of a highly active research group. Individuals selected for these positions will be involved in clinical and educational activities of the Institute as appropriate, as well as participating in the writing of proposals and research reports. The opportunity will also exist for individuals to develop their own research interests in the addictions. **Education:** Individuals selected for these positions will possess a doctorate in psychology or social/behavioral science. Interest in the addictions a must. Experience with addicted populations a plus. **Salary:** Competitive and commensurate with applicant's qualifications and experience.

Send curriculum vitae and three letters of recommendation to Jerome J. Platt, Ph.D., Professor and Director, Institute for Addictive Disorders, Allegheny University of the Health Sciences, MCP - Hahnemann School of Medicine, Broad and Vine Streets, MS 984, Philadelphia, PA 19102.

Announcements (*con't*)

Postdoctoral Research Fellowship University of Washington

This is a two-year appointment, commencing no earlier than July 1, 1997, and no later than January 1, 1998, with the Addictive Behaviors Research Center in the Department of Psychology at the University of Washington, and is funded by the National Institute on Alcohol Abuse and Alcoholism. The overall purpose is to provide postdoctoral training for individuals who wish to pursue a career in alcohol research, with an emphasis on the etiology and prevention of problem drinking and alcoholism. As this topic will be approached from both psychosocial and biobehavioral perspectives, individuals with background training in any relevant areas of psychology (clinical, health psychology, physiological, social, cognitive, behavioral pharmacology, etc.) are encouraged to apply. Applicants should submit a cover letter indicating areas of research interest, a vita, and three letters of recommendation to: G. Alan Marlatt, Ph.D., Postdoctoral Psychology Training Program in Alcohol Research, Department of Psychology, Box 351525, University of Washington, Seattle, WA 98195-1525.

Postdoctoral Research Associate University of Missouri-Columbia

The Department of Psychology at the University of Missouri - Columbia has an immediate opening for a Postdoctoral Research Associate for an initial one-year appointment that may be extended to two or more years. The position involves collaborating on a longitudinal study on the etiology and course of drinking problems in young adulthood. Required qualifications include a Ph.D. in psychology or a related discipline and excellent writing skills. Expertise in adult development and substance abuse is highly desirable. If interested, send CV, reprints, cover letter stating research and teaching interests, and three letters of reference to: Kenneth J. Sher, PhD, University of Missouri, Department of Psychology, 200 S. 7th St., Columbia, MO 65211 [phone: (573) 882-1681; fax: (573) 884-5588). Applications will be reviewed as they are received. Position will remain open until a qualified applicant is selected. The University does not discriminate on the basis of race, color, religion, national origin, ancestry, sex, age, disability, status as disabled veteran or veteran of Vietnam era.

Postdoctoral Fellowship in Tobacco Research

The H. Lee Moffitt Cancer Center and Research Institute, located at the University of South Florida, Tampa, invites applicants for a renewable one-year, full-time fellowship in tobacco/smoking research. Fellows will contribute to ongoing research projects as well as their own line of research. Current areas of emphasis include therapy development for smoking cessation, nicotine outcome expectancies, affect as motivator for smoking, learning-based models of drug motivation, and client-treatment matching. However, other areas of research are welcome. We also use nicotine dependence as a model to study general addiction processes. This position offers a unique opportunity to help guide the development of a new tobacco research and intervention program within a major medical center.

Applicants must have a Ph.D. in psychology, prior research experience in nicotine or other substance abuse, and a strong interest in psychological research. Applications must be received by April 15, 1997. A Drug-Free Workplace. Equal Opportunity Employer. Send letter of application, curriculum vitae, and three letters of recommendation to: Thomas H. Brandon, Ph.D., c/o Psychosocial Oncology, Moffitt Cancer Center, 12902 Magnolia Drive, Tampa, FL 33612.

Faculty Research Associate at Arizona State University

Two-year position beginning January 1, 1998. Collaborate on a longitudinal study of adolescents at risk for substance use/abuse, particularly on data analysis and manuscript writing. Requirements: Masters degree or ABD and quantitative skills/training. Preference will be given to candidates skilled in multivariate analyses of longitudinal data (e.g., structural modeling, growth curve modeling, multi-level modeling). Send vita and 2 letters of recommendation to: Laurie Chassin, Psychology Department, Box 871104, Arizona State University, Tempe, AZ 85287-1104. Application deadline May 1 or first of the month until filled. AA/EOE. Prof. Chassin can be contacted at (602) 965-1616, or by e-mail at laurie.chassin@asu.edu

Announcements (*con't*)

Johns Hopkins Postdoctoral Positions in Substance Abuse Research

Postdoctoral human research positions are available in a stimulating and productive environment with excellent clinical and research resources. **Applied Research in Behavioral Treatment of Substance Abuse:** Develop and evaluate treatment interventions for opioid and cocaine users. Sites include methadone, outpatient drug-free and addictions pregnancy clinics. **Human Laboratory Behavioral Pharmacology:** Design and implement controlled laboratory research on the behavioral, subjective, and physiological effects of psychoactive drugs for abuse liability testing and medication development. Drug classes under study include: opioids, cocaine, anxiolytics, caffeine, and nicotine. Research background and experience required. Minorities encouraged. USPHS stipend levels based on experience.

Send vita, letter of interest, names and phones of 3 references to: George E. Bigelow, Ph.D. or Maxine L. Stitzer, Ph.D., BPRU, Behavioral Biology Research Center, 5510 Nathan Shock Drive, Johns Hopkins Bayview Campus, Baltimore, Maryland 21224-6823, (410) 550-0035.

Postdoctoral Research Fellowship University of Rochester

A broad-based, NIDA-funded "Pharmacology of Drug Abuse" Training Program at the University of Rochester School of Medicine is seeking candidates for one postdoctoral position. This is a one year position, with the option for renewal for up to 3 years. Emphasis is on supporting trainee research related to drug abuse. One immediately available project is a 4-year 11-county trial of self-help smoking interventions in mid-life and older smokers. Applicants for this position should have basic skill with multivariate statistics and behavioral research design. This is an excellent opportunity to be part of a dynamic team of investigators, and to develop one's own related research project.

For general information on the training program, contact Jean Bidlack, Ph.D. at (716) 275-5600, or e-mail: bidlackj@pharmacol.rochester.edu. To apply for this position, send a C.V. and three letters of reference to: Deborah Ossip-Klein, Ph.D., University of Rochester School of Medicine, Monroe Community Hospital, 435 E. Henrietta Road, Rochester, NY 14620; (716) 274-7583; e-mail: ossip@prevmed.rochester.edu.

Postdoctoral Research Training Program Family-Based Interventions for Adolescent Drug Abuse

Applications are invited for a unique two year NIH/NIDA-funded postdoctoral research training program. This program began in 1994, and its objective is to develop research competencies in the area of family-based interventions for adolescent drug abuse. Post-doctoral fellows become actively involved in existing clinical research programs on multicultural outcome and process drug abuse treatment studies. Developing skills in designing and testing interventions with culturally diverse patient populations are important objectives of the program. Fellows are part of a seminar on intervention science research in adolescent drug abuse, and they also take courses in areas that will enhance their current research and clinical knowledge. Fellows learn about the research grant proposal process, they participate in project / application conceptualization and writing, and they receive training in the responsible conduct of prevention and intervention science. By the program's second year fellows are expected to develop an area of their own research within the focal area of the post-doctoral program, family-based interventions for adolescent drug abuse. Mentoring in writing one's own grant applications, writing for publication, and making professional presentations are strong aspects of the program.

We anticipate selecting post-doctoral applicants for three positions beginning in the July or September, 1997. Stipends for the postdoctoral training program positions are set under NIH/NRSA Training Grant guidelines, and vary according to years of relevant postdoctoral experience. Qualifications: Applicants must hold a Ph.D. or M.D., and have demonstrated research skills and a strong interest in intervention science. For more program information write to Dr. Howard Liddle, Professor and Deputy Director, Center for Family Studies, Department of Psychiatry and Behavioral Sciences, University of Miami, 1425 N.W. 10th Avenue, 3rd Floor, Miami, FL 33136 [(305) 243-5577 fax; hliddle@mednet.med.miami.edu].

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As part of the clinic job, I networked with counselors at the other facilities that served many of the same patients we saw at Boston City Hospital. Most of our patients were on welfare and, having little else to do most of the day, spent a great deal of their time visiting with friends and acquaintances at other treatment facilities in Boston's South End. From virtually the start of this networking process, I was aware of the psychological distance between the alcoholism counselors and myself. Although I had some sense of what explained it, I raised the issue with an older counselor with whom I had shared several particularly difficult patients. He readily acknowledged the distance between us, noting simultaneously how much he appreciated my energetic efforts to help my patients and how unfortunate it was that I could not be of much help to them because I had not myself undergone the defining experience of alcoholism and the arduous process of recovery from it. Both were essential to being an effective therapist, my colleague was convinced. Neither was accessible to me.

Although some of the counselors and I subsequently became friends, close to a decade of working together never changed their conviction that my professional compatriots and I were interlopers in their territory, no matter how much therapeutic success we might imagine we were experiencing.

My brief story illustrates important elements of relationships 30 and more years ago between most professionals who worked with substance abusers and most counselors in the recovery community. Although those few professionals who were in recovery themselves related more easily to the twelve-step community, especially if they had achieved sobriety by means of A.A., the gap between them and alcoholism workers nonetheless remained. That gap - between us and them - persisted even though it clearly worked against the best interests of our patients. There was substantially less referral, consultation, collaboration, or mutual benefit between the two camps than there should have been. As a result, it was more often the exception than the rule that a patient treated by a professional could benefit as well from the twelve-step community - and vice versa.

In the three decades separating this formative experience from today, I've observed a considerable amount of change, even though we clearly have a ways to go. I like to think that these changes came about, at least in part, because each group found the other increasingly relevant to the achievement of its aspirations. The similar gap in understanding between psychologists with largely academic interests and those with predominantly clinical interests in APA appears to be moving toward similar resolution. What is working within the addiction community may be working as well within organized psychology. Recognition of the same opportunities for mutual help and collaboration in both instances appear to be a key.

The veritable explosion in empirical data over the past two decades, on genetic and psychological factors in alcohol and drug abuse (e.g., Babor et al., 1992; Cloninger, 1987; Kendler et al., 1992), as well as on the promising outcomes of a range of innovative treatments (Finney & Moos, 1997; Hester & Miller, 1995; Miller et al., 1995), is now recognized by many clinicians for the contributions these findings make to practice. Conversely, clinicians more often collaborate with scientists, providing access to clinical populations and sharing clinical insights that enrich the clinical research that results. Let me illustrate with two personal experiences.

A lengthy planning process to develop a state-of-the-art treatment program for medically at-risk substance abusers at our university hospital has just come to an end. It will replace a state-funded inpatient unit that had largely outlived its usefulness. I brought to the group, composed of clinicians from every mental health discipline as well as a number of substance abuse counselors from the twelve-step tradition, the best data I could on reliable assessment techniques and empirically-validated treatments. Many of the assessment instruments and some of the treatment methods (in particular, the most promising cognitive-behavioral interventions) were not familiar to many in the group. Nonetheless, most recognized the necessity, in an era of increased demands for accountability and competition for every patient dollar, to use proven, cost-effective treatments and reliable and valid assessments.

I also took part recently in the process to develop an assessment instrument to certify psychologists working with substance abusers for the APA's College of Professional Psychology. The drafting committee was composed of clinicians and researchers, some especially knowledgeable about alcohol, some about drugs, a few about both. Apprehensive when I attended my first meeting lest there be acrimony when a researcher suggested that a favorite treatment had little empirical backing, I lost those concerns when I realized that the group shared respect for both data and clinical expertise and that the mutual disdain between researchers and clinicians I remembered was missing - not to reappear at any point in the process.

We are not yet where we need to be, of course. The push to develop certification barriers across the nation, primarily to enfranchise selected alcoholism counselors at the expense of other clinicians, including many psychologists and other professionals, is extremely unfortunate. It is designed to maintain an unuseful clinical exclusivity that never had much reason to exist. However, I believe history is on our side and that most signs point toward continuation of the 30-year-old trend toward enhanced collaboration rather than continued competition.

Thus, it is the rare scientist-professional in the addictions nowadays who does not weigh the added value of patients'

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Nathan (continued from previous page)

involvement in twelve-step programs, just as many counselors now pay attention to the empirical findings on treatments that work for substance abuse. While the road to these more productive relationships has been bumpy and even now has its share of potholes, it nonetheless permits higher speed limits toward maximum benefits for our science and our patients.

Paralleling the experiences we in the addictions have had in bridging the gap between scientist-professionals and counselors are efforts within APA to bring academics and clinicians together. The key in both instances, when progress has been made, has been mutual respect and mutual benefit: scientists and academics providing clinicians meaningful data on treatment outcomes, successively more reliable measurement instruments, valid projections of the course of disorders; clinicians providing scientists accurate information on changes in behavior during and following interventions, participating in rigorously-designed treatment outcome studies, developing new interventions for evaluation by scientists.

Our field - including many members of this Division - has modeled cooperative behavior yielding mutual benefit for scientists, professionals, and counselors. As we continue efforts to work with those who also work on behalf of substance abusers, it appears that a parallel process of reconciliation bringing together academics and clinicians within APA - based on like factors - is underway.

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The Division 50 Continuing Education Committee Needs Your Help

Mark Sobell

Chair, Education and Training Committee

At the mid-winter Executive Committee meeting, it was decided to enlarge the Division's ability to address education and training issues by establishing a Continuing Education Committee (CEC). The CEC will be responsible for postgraduate education and training functions, formerly the responsibility of the Education and Training Committee (ETC). These functions include matters such as seeking continuing education accreditation for the Division from APA, and arranging Division sponsored workshops and symposia. The ETC's mandate will be predoctoral education and training, and I will continue as its Chair. It was also decided that upon my recommendation the President will appoint an Acting Chair of the CEC. Present members of the ETC will be able to choose on which committee they wish to serve.

The expansion of Division education and training functions to 2 committees will create the opportunity for increased involvement in these functions by Division 50 members. As part of the Board's effort to encourage broader participation in executive functions by the membership, it is requested that any member interested in serving on either committee notify me of their interest before June 1, 1997. The Board will consider these expressions of interest at the next Executive Committee meeting (at the APA convention) and will appoint new committee members at that time (each committee will consist of 5 to 7 members). As part of this reorganization, the existence of a formal group of advisors to the ETC will be discontinued. Both committees will, of course, solicit input on issues from the Division membership as needed, and Division members will be asked to join ETC and CEC task forces as the need arises.

Involvement in the ETC and CEC is a way that Division members can make their voices heard in these important activities. If you would be willing to serve on either or both committees, please inform me before June 1 by telephone (954-452-7201), fax: (954-723-2712), or e-mail: sobellm@cps.acast.nova.edu.

**Please Participate
in Division 50 Elections!**

***Remember to vote when you receive
your ballot from APA***

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