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Search History

1. PsycINFO; exp ADDICTION/ OR DRUG ABUSE [+NT]/ OR DRUG USAGE [+NT]/; 35456 results.
2. PsycINFO; addict*.ti,ab; 25722 results.
3. PsycINFO; 1 OR 2; 47561 results.

1. Promoting new practices to increase access to and retention in addiction treatment: An analysis of five communication channels.

Citation: Addictive Behaviors, June 2012(No Pagination Specified), 0306-4603 (Jun 9, 2012)

Author(s): Johnson, Kimberly A; Ford, James H; McCluskey, Matthew

Abstract: Addiction treatment programs adopt evidence-based practices slowly, in part because adopting a new practice is a process, not an event. Using different communication channels may have a different effect at different points in the process. This paper reports the effectiveness of five communication channels in getting substance abuse treatment programs to adopt new business practices. In this study, national trade media coverage produced the greatest interest among programs and the greatest number of decisions to adopt. Conference presentations produced fewer decisions to adopt than national media, but were the most effective channel when compared to the number of programs they reached. Peers were the greatest influence in moving clinic staff from the decision to adopt to implementation. These findings give preliminary evidence for using different communication channels at different times during an effort to promote the adoption of best practices. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

2. Retraining the Addicted Brain: A Review of Hypothesized Neurobiological Mechanisms of Mindfulness-Based Relapse Prevention.

Citation: Psychology of Addictive Behaviors, July 2012(No Pagination Specified), 0893-164X;1939-1501 (Jul 9, 2012)

Author(s): Witkiewitz, Katie; Lustyk, M. Kathleen B; Bowen, Sarah

Abstract: Addiction has generally been characterized as a chronic relapsing condition (Leshner, 1999). Several laboratory, preclinical, and clinical studies have provided evidence that craving and negative affect are strong predictors of the relapse process. These states, as well as the desire to avoid them, have been described as primary motives for substance use. A recently developed behavioral treatment, mindfulness-based relapse prevention (MBRP), was designed to target experiences of craving and negative affect and their roles in the relapse process. MBRP offers skills in cognitive-behavioral relapse prevention integrated with mindfulness meditation. The mindfulness practices in MBRP are intended to increase discriminative awareness, with a specific focus on acceptance of uncomfortable states or challenging situations without reacting "automatically." A recent efficacy trial found that those randomized to MBRP, as compared with those in a control group, demonstrated significantly lower rates of substance use and greater decreases in craving following treatment. Furthermore, individuals in MBRP did not report increased craving or substance use in response to negative affect. It is important to note, areas of the brain that have been associated with craving, negative affect, and relapse have also been shown to be affected by mindfulness training. Drawing from the neuroimaging literature, we review several plausible mechanisms by which MBRP might be changing neural responses to the experiences of craving and negative affect, which subsequently may reduce risk for relapse. We hypothesize that MBRP may affect numerous brain systems and may reverse, repair, or compensate for the neuroadaptive changes associated with addiction and addictive-behavior relapse. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

3. D-serine facilitates the effectiveness of extinction to reduce drug-primed reinstatement of cocaine-induced conditioned place preference.

- Citation:** Neuropharmacology, June 2012(No Pagination Specified), 0028-3908 (Jun 20, 2012)
- Author(s):** Hammond, Sherri; Seymour, Claire M; Burger, Ashley; Wagner, John J
- Abstract:** Addiction is a disease that is characterized by compulsive drug-seeking and use despite negative health and social consequences. One obstacle in treating addiction is a high susceptibility for relapse which persists despite prolonged periods of abstinence. Relapse can be triggered by drug predictive stimuli such as environmental context and drug associated cues, as well as the addictive drug itself. The conditioned place preference (CPP) behavioral model is a useful paradigm for studying the ability of these drug predictive stimuli to reinstate drug-seeking behavior. The present study investigated the dose-dependent effects of D-serine (10 mg/kg, 30 mg/kg and 100 mg/kg) on extinction training and drug-primed reinstatement in cocaine-conditioned rats. In the first experiment, D-serine had no effect on the acquisition or development of cocaine-induced locomotor sensitization or CPP. In the second experiment, D-serine treatment resulted in significantly decreased time spent in the drug-paired compartment following completion of an extinction protocol. A cocaine-primed reinstatement test indicated that the combination of extinction training along with D-serine treatment resulted in a significant reduction of drug-seeking behavior. The third experiment assessed D-serine's long-term effects to diminish drug-primed reinstatement. D-serine treatment given during extinction was effective in reducing drug-seeking for more than four weeks of abstinence after the last cocaine exposure. These findings demonstrate that D-serine may be an effective adjunct therapeutic agent along with cognitive behavioral therapy for the treatment of cocaine addiction. This article is part of a Special Issue entitled 'Cognitive Enhancers'. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO

4. Moral decision-making in polysubstance dependent individuals.

- Citation:** Drug and Alcohol Dependence, June 2012(No Pagination Specified), 0376-8716 (Jun 29, 2012)
- Author(s):** Carmona-Perera, Martina; Verdejo-Garcia, Antonio; Young, Liane; Molina-Fernandez, Antonio; Perez-Garcia, Miguel
- Abstract:** BACKGROUND: Moral judgments depend on the integration of complex cognitive and emotional processes. Addiction is associated with core deficits in both cognitive and emotional processing, which may jointly lead to utilitarian biases in moral decision-making. METHODS: We assessed 32 polysubstance dependent males and 32 non-drug using controls using a previously validated moral judgment task, including non-moral scenarios, and moral dilemmas that were either high in emotional salience ("personal scenarios") or low in emotional salience ("impersonal scenarios"). RESULTS: Polysubstance dependent individuals endorsed more utilitarian choices for personal dilemmas (e.g., smothering a baby to save a group of hidden people during wartime). These choices were also perceived as less difficult. Severity of alcohol use correlated with the proportion of utilitarian judgments. CONCLUSION: Polysubstance dependent individuals show a more utilitarian pattern of moral decision-making for personal moral scenarios. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO

5. High-sensitivity gamma-glutamyltransferase fraction pattern in alcohol addicts and abstainers.

Citation: Drug and Alcohol Dependence, June 2012(No Pagination Specified), 0376-8716 (Jun 29, 2012)

Author(s): Franzini, Maria; Fornaciari, Irene; Vico, Tiziana; Moncini, Marco; Cellesi, Valerio; Meini, Milo; Emdin, Michele; Paolicchi, Aldo

Abstract: BACKGROUND: Four fractions of gamma-glutamyltransferase (GGT) with different molecular weight (b-, m-, s-, and f-GGT) are present in human plasma. Differential GGT fraction pattern is found in non-alcoholic liver disease (NAFLD) and chronic viral hepatitis, characterized by normal or decreased b-GGT/s-GGT (b/s) ratio, respectively. METHODS: Chromatographic fractional GGT analysis was performed on plasma obtained from 51 subjects: 27 alcoholics (mean (SD), age 45 (9) years; 23 males; 14 positive for viral infection), 24 abstinent from at least 1 month (43 (12) years; 20 males; 6 positive for viral infection). Twenty-seven blood donors matched for age and gender (44 (9) years; 23 males) were selected as controls. RESULTS: All fractions were significantly increased in alcoholics ($P<0.001$), s-GGT showing the largest increase, while only m-GGT and s-GGT were elevated in abstainers ($P<0.01$), in comparison with controls. The b/s ratio was significantly lower in both alcoholics and abstainers than in controls (median (25th-75th perc.): 0.10 (0.07-0.15), 0.16 (0.10-0.24), 0.35 (0.29-0.53), respectively, $P<0.001$). Viral infection did not significantly changes absolute values of individual GGT fractions in alcoholics, but the b/s ratio was significantly lower in virus positive than in virus negative subjects (0.08 (0.05-0.12), 0.14 (0.09-0.20), respectively, $P<0.01$). CONCLUSIONS: The fraction pattern analysis might increase the specificity of GGT as biomarker of alcohol abuse, especially concerning the differential diagnosis between alcoholism and NAFLD, a common cause of elevated GGT level in the general population. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

6. The Sturm und Drang of anabolic steroid use: Angst, anxiety, and aggression.

Citation: Trends in Neurosciences, June 2012, vol./is. 35/6(382-392), 0166-2236 (Jun 2012)

Author(s): Oberlander, Joseph G; Henderson, Leslie P

Correspondence Address: Henderson, Leslie P.: Department of Physiology and Neurobiology, Dartmouth Medical School, Hanover, NH, US, 03755

Institution: Oberlander, Joseph G.: Department of Physiology and Neurobiology, Dartmouth Medical School, Hanover, NH; Henderson, Leslie P.: Department of Physiology and Neurobiology, Dartmouth Medical School, Hanover, NH

Language: English

Abstract: Anabolic androgenic steroids (AAS) are illicitly administered to enhance athletic performance and body image. Although conferring positive actions on performance, steroid abuse is associated with changes in anxiety and aggression. AAS users are often keenly invested in understanding the biological actions of these drugs. Thus, mechanistic information on AAS actions is important not only for the biomedical community, but also for steroid users. Here we review findings from animal studies on the impact of AAS exposure on neural systems that are crucial for the production of anxiety and aggression, and compare the effects of the different classes of AAS and their potential signaling mechanisms, as well as context-, age- and sex-dependent aspects of their actions. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Aggressive Behavior](#)
[*Anxiety](#)
[*Drug Usage](#)

[*Neural Receptors](#)

[*Steroids](#)

Source: PsycINFO

7. Effect of the dopamine D3 receptor antagonist GSK598809 on brain responses to rewarding food images in overweight and obese binge eaters.

Citation: Appetite, August 2012, vol./is. 59/1(27-33), 0195-6663 (Aug 2012)

Author(s): Dodds, Chris M; O'Neill, Barry; Beaver, John; Makwana, Aidan; Bani, Massimo; Merlo-Pich, Emilio; Fletcher, Paul C; Koch, Annelize; Bullmore, Edward T; Nathan, Pradeep J

Correspondence Address: Dodds, Chris M.: GlaxoSmithKline Pharmaceuticals, Clinical Unit Cambridge, Addenbrooke's Centre for Clinical Investigation, Box 128, Addenbrooke's Hospital, Hills Road, Cambridge, United Kingdom, CB2 2QQ, chris.m.dodds@gsk.com

Institution: Dodds, Chris M.: GlaxoSmithKline Pharmaceuticals, Clinical Unit Cambridge, Addenbrooke's Centre for Clinical Investigation, Cambridge; O'Neill, Barry: GlaxoSmithKline Pharmaceuticals, Clinical Unit Cambridge, Addenbrooke's Centre for Clinical Investigation, Cambridge; Beaver, John: Clinical Imaging Centre, GlaxoSmithKline Pharmaceuticals; Makwana, Aidan: Clinical Imaging Centre, GlaxoSmithKline Pharmaceuticals; Bani, Massimo: GlaxoSmithKline Pharmaceuticals; Merlo-Pich, Emilio: GlaxoSmithKline Pharmaceuticals; Fletcher, Paul C.: Brain Mapping Unit, Department of Psychiatry, University of Cambridge, Cambridge; Koch, Annelize: GlaxoSmithKline Pharmaceuticals, Clinical Unit Cambridge, Addenbrooke's Centre for Clinical Investigation, Cambridge; Bullmore, Edward T.: GlaxoSmithKline Pharmaceuticals, Clinical Unit Cambridge, Addenbrooke's Centre for Clinical Investigation, Cambridge; Nathan, Pradeep J.: GlaxoSmithKline Pharmaceuticals, Clinical Unit Cambridge, Addenbrooke's Centre for Clinical Investigation, Cambridge

Language: English

Abstract: The dopamine D3 receptor is thought to be a potential target for treating compulsive disorders such as drug addiction and obesity. Here, we used functional Magnetic Resonance Imaging (fMRI) to investigate the effects the selective dopamine D3 receptor antagonist GSK598809 on brain activation to food images in a sample of overweight and obese binge-eating subjects. Consistent with previous studies, processing of food images was associated with activation of a network of reward areas including the amygdala, striatum and insula. However, brain activation to food images was not modulated by GSK598809. The results demonstrate that D3 receptor manipulation does not modulate brain responses to food images in overweight and obese subjects. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Dopamine](#)
[*Dopamine Antagonists](#)
[*Neural Receptors](#)
[*Obesity](#)
[*Biological Neural Networks](#)
[Overweight](#)

Source: PsycINFO

8. Religiosity, heavy alcohol use, and vicarious learning networks among adolescents in the United States.

Citation: Health Education & Behavior, June 2012, vol./is. 39/3(341-351), 1090-1981;1552-6127 (Jun 2012)

Author(s): Gryczynski, Jan; Ward, Brian W

Correspondence Address: Gryczynski, Jan: Friends Research Institute, 1040 Park Ave., Ste. 103, Baltimore, MD, US, 21201, jgryczynski@friendsresearch.org

Institution: Gryczynski, Jan: Friends Research Institute, Baltimore, MD; Ward, Brian W.: University of Maryland, College Park, MD

Language: English

Abstract: Previous research has found that religiosity may protect against risky alcohol and drug use behaviors among adolescents, but the social mechanics underpinning the relationship are not well understood. This study examined the relationship between religiosity, heavy drinking, and social norms among U.S. adolescents aged 12 to 17 years, using the 2007 National Survey on Drug Use and Health (n = 14,556). Based on a vicarious learning networks theoretical perspective, the effect of religiosity on heavy drinking behavior was hypothesized to be exerted indirectly through the norms of key reference groups in the social network (close friends and parents). Support was found for reference group norms as one underlying mechanism of the religiosity-alcohol relationship. Religiosity and nonpermissive drinking norms of parents, close friends, and peers maintained a strong protective association with adolescent heavy drinking. Supplementary analyses elaborated on the role of competing and complementary normative orientations among reference groups in the social network. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for Public Health Education; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Abuse](#)
[*Health Promotion](#)
[*Religiosity](#)
[*Sexual Risk Taking](#)
[*Social Networks](#)
[Adolescent Attitudes](#)
[Adolescent Development](#)
[Drug Usage](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [Highwire Press](#)

9. Subsidized housing, public housing, and adolescent violence and substance use.

Citation: Youth & Society, June 2012, vol./is. 44/2(217-235), 0044-118X;1552-8499 (Jun 2012)

Author(s): Leech, Tamara G. J

Correspondence Address: Leech, Tamara G. J.: Department of Sociology, Indiana University-Purdue University, 425 University Boulevard, 301E Cavanaugh Hall, Indianapolis, IN, US, 46202, tleech@iupui.edu

Institution: Leech, Tamara G. J.: Department of Sociology, Indiana University-Purdue University, Indianapolis, IN

Language: English

Abstract: This study examines the separate relationships of public housing residence and subsidized housing residence to adolescent health risk behavior. Data include 2,530 adolescents aged 14 to 19 who were children of the National the Longitudinal Study of Youth. The author use stratified propensity methods to compare the behaviors of each group-subsidized housing residents and public housing residents-to a matched control group of teens receiving no housing assistance. The results reveal no significant relationship between public housing residence and violence, heavy alcohol/marijuana use, or other drug use. However, subsidized housing residents have significantly lower rates of violence and hard drug use, and marginally lower rates of heavy marijuana/alcohol use. The results indicate that the consistent, positive effect of vouchers in the current literature is not due to a lower standard among the typical comparison group: public housing. Future studies should focus on conceptualizing and analyzing the protective effect of vouchers beyond comparisons to public housing environments. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Drug Abuse](#)
[*Health Behavior](#)
[*Violence](#)
[*Risk Assessment](#)
[Housing](#)
[Risk Taking](#)

Source: PsycINFO

10. Differential outcomes of court-supervised substance abuse treatment among California parolees and probationers.

Citation: International Journal of Offender Therapy and Comparative Criminology, June 2012, vol./is. 56/4(539-556), 0306-624X (Jun 2012)

Author(s): Evans, Elizabeth; Jaffe, Adi; Urada, Darren; Anglin, M. Douglas

Correspondence Address: Evans, Elizabeth: Integrated Substance Abuse Programs, Semel Institute for Neuroscience and Human Behavior, David Geffen School of Medicine at UCLA, 1640 S. Sepulveda Blvd., Suite 200, Los Angeles, CA, US, 90025, laevans@ucla.edu

Institution: Evans, Elizabeth: David Geffen School of Medicine at UCLA, Los Angeles, CA; Jaffe, Adi: David Geffen School of Medicine at UCLA, Los Angeles, CA; Urada, Darren: David Geffen School of Medicine at UCLA, Los Angeles, CA; Anglin, M. Douglas: David Geffen School of Medicine at UCLA, Los Angeles, CA

Language: English

Abstract: To explore the effectiveness of court-supervised drug treatment for California parolees, offender characteristics, treatment experiences, and outcomes were examined and contrasted to those of probationers. The analysis used statewide administrative data on 4,507 parolees and 22,701 probationers referred to treatment by Proposition 36 during fiscal year 2006-2007. Compared with probationers, parolee problems were more severe at treatment entry, more were treated in residential settings, treatment retention was shorter, and fewer completed treatment. Regarding outcomes, fewer parolees were successful at treatment discharge and more recidivated over 12-months post admission. Both groups improved in many areas by treatment discharge, but improvements were generally smaller among parolees. Significant interaction effects indicated that parolees benefited from residential care and more treatment days, even after controlling for covariates. Court-supervised drug treatment for parolees can "work;" however, parolees have more frequent and diverse needs, and their outcomes are enhanced by more intensive treatment. Findings suggest methods for optimizing the effectiveness of criminal-justice-supervised programs for treating drug-dependent offenders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Conference Information: Addiction Health Services Research Conference. Oct, 2009. San Francisco. CA, US. A preliminary draft of this article was presented at the aforementioned conference.

Country of Publication: HOLDER: The Author(s); YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adjudication](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Treatment Outcomes](#)
[Parole](#)
[Probation](#)

Source: PsycINFO

11. The geography of drug market activities and child maltreatment.

Citation: Child Maltreatment, May 2012, vol./is. 17/2(144-152), 1077-5595 (May 2012)

Author(s): Freisthler, Bridget; Kepple, Nancy J; Holmes, Megan R

Correspondence Address: Freisthler, Bridget: UCLA Department of Social Welfare, 3250 Public Affairs Building, Box 951656, Los Angeles, CA, US, 90095, freisthler@publicaffairs.ucla.edu

Institution: Freisthler, Bridget: Department of Social Welfare, Luskin School of Public Affairs, University of California, Los Angeles, CA; Kepple, Nancy J.: Department of Social Welfare, Luskin School of Public Affairs, University of California, Los Angeles, CA; Holmes, Megan R.: Department of Social Welfare, Luskin School of Public Affairs, University of California, Los Angeles, CA

Language: English

Abstract: This study examines how drug market activities place children at risk of maltreatment over space and time. Data were collected for 95 Census tracts in Sacramento, California, over 7 years and were analyzed using Bayesian space-time models. Referrals for child maltreatment investigations were less likely to occur in places where current drug market activity was present. However, past-year local and spatially lagged drugs sales were positively related to referrals. After the investigative phase, Census tracts with more drug sales had higher numbers of substantiations, and those with more possessions also had more entries into foster care. The temporal delay between drug sales and child maltreatment referrals may indicate that the surveillance systems designed to protect children may not be responsive to changing neighborhood conditions or be indicative of the time it takes for the detrimental effects of the drug use to appear. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Child Abuse](#)
[*Illegal Drug Distribution](#)
[*Drug Usage](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [Highwire Press](#)

12. Bupropion in the treatment of problematic online game play in patients with major depressive disorder.

Citation: Journal of Psychopharmacology, May 2012, vol./is. 26/5(689-696), 0269-8811;1461-7285 (May 2012)

Author(s): Han, Doug Hyun; Renshaw, Perry F

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Institution: Han, Doug Hyun: Department of Psychiatry, Chung Ang University, College of Medicine, Seoul; Renshaw, Perry F.: Brain Institute, University of Utah, Salt Lake City, UT

Language: English

Abstract: As one of the problematic behaviors in patients with major depressive disorder (MDD), excessive online game play (EOP) has been reported in a number of recent studies. Bupropion has been evaluated as a potential treatment for MDD and substance dependence. We hypothesized that bupropion treatment would reduce the severity of EOP as well as depressive symptoms. Fifty male subjects with comorbid EOP and MDD were randomly assigned to bupropion + education for internet use (EDU) or placebo + EDU groups. The current study consisted in a 12-week, prospective, randomized, doubleblind clinical trial, including an eight-week active treatment phase and a four-week post treatment follow-up period. During the active treatment period, Young Internet Addiction Scale (YIAS) scores and the mean time of online game playing in the bupropion group were greatly reduced compared with those of the placebo group. The Beck Depression Inventory (BDI) scores in the bupropion group were also greatly reduced compared with those of the placebo group. During the four-week post-treatment follow-up period,

bupropion-associated reductions in online game play persisted, while depressive symptoms recurred. Conclusively, bupropion may improve depressive mood as well as reduce the severity of EOP in patients with comorbid MDD and online game addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Bupropion](#)
[*Drug Therapy](#)
[*Games](#)
[*Internet Addiction](#)
[*Major Depression](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [Highwire Press](#)

13. Disentangling the relationships between maternal smoking during pregnancy and co-occurring risk factors.

Citation: Psychological Medicine, July 2012, vol./is. 42/7(1547-1557), 0033-2917;1469-8978 (Jul 2012)

Author(s): Ellingson, J. M; Rickert, M. E; Lichtenstein, P; Langstrom, N; D'Onofrio, B. M

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Language: English

Abstract: Background: Maternal smoking during pregnancy (SDP) has been studied extensively as a risk factor for adverse offspring outcomes and is known to co-occur with other familial risk factors. Accounting for general familial risk factors has attenuated associations between SDP and adverse offspring outcomes, and identifying these confounds will be crucial to elucidating the relationship between SDP and its psychological correlates. Method: The current study aimed to disentangle the relationship between maternal SDP and co-occurring risk factors (maternal criminal activity, drug problems, teen pregnancy, educational attainment, and cohabitation at childbirth) using a population-based sample of full- (n = 206 313) and half-sister pairs (n = 19 363) from Sweden. Logistic regression models estimated the strength of association between SDP and co-occurring risk factors. Bivariate behavioral genetic models estimated the degree to which associations between SDP and co-occurring risk factors are attributable to genetic and environmental factors. Results: Maternal SDP was associated with an increase in all co-occurring risk factors. Of the variance associated with SDP, 45% was attributed to genetic factors and 53% was attributed to unshared environmental factors. In bivariate models, genetic factors accounted for 21% (non-drug-, non-violence-related crimes) to 35% (drug-related crimes) of the covariance between SDP and co-occurring risk factors. Unshared environmental factors accounted for the remaining covariance. Conclusions: The genetic factors that influence a woman's criminal behavior, substance abuse and her offspring's rearing environment all influence SDP. Therefore, the intergenerational transmission of genes conferring risk for antisocial behavior and substance misuse may influence the associations between maternal SDP and adverse offspring outcomes. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Conference Information: Behavior Genetics Association Conference. Jun, 2011. Newport. RI, US. Preliminary analyses of this work were presented at the aforementioned conference.

Country of Publication: HOLDER: Cambridge University Press; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Criminal Behavior](#)
[*Drug Abuse](#)
[*Etiology](#)
[*Risk Factors](#)
[*Tobacco Smoking](#)
[Pregnancy](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [ProQuest](#)

14. Inducing negative affect increases the reward value of appetizing foods in dieters.

Citation: Journal of Cognitive Neuroscience, July 2012, vol./is. 24/7(1625-1633), 0898-929X;1530-8898 (Jul 2012)

Author(s): Wagner, Dylan D; Boswell, Rebecca G; Kelley, William M; Heatherton, Todd F

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Language: English

Abstract: Experiencing negative affect frequently precedes lapses in self-control for dieters, smokers, and drug addicts. Laboratory research has similarly shown that inducing negative emotional distress increases the consumption of food or drugs. One hypothesis for this finding is that emotional distress sensitizes the brain's reward system to appetitive stimuli. Using functional neuroimaging, we demonstrate that inducing negative affect in chronic dieters increases activity in brain regions representing the reward value of appetitive stimuli when viewing appetizing food cues. Thirty female chronic dieters were randomly assigned to receive either a negative ($n = 15$) or neutral mood induction ($n = 15$) immediately followed by exposure to images of appetizing foods and natural scenes during fMRI. Compared with chronic dieters in a neutral mood, those receiving a negative mood induction showed increased activity in the OFC to appetizing food images. In addition, activity to food images in the OFC and ventral striatum was correlated with individual differences in the degree to which the negative mood induction decreased participants' self-esteem. These findings suggest that distress sensitizes the brain's reward system to appetitive cues, thereby offering a mechanism for the oft-observed relationship between negative affect and disinhibited eating. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Massachusetts Institute of Technology; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Dietary Restraint](#)
[*Emotional States](#)
[*Food](#)
[*Rewards](#)
[Functional Magnetic Resonance Imaging](#)

Source: PsycINFO

15. Drug-related cues exacerbate decision making and increase craving in heroin addicts at different abstinence times.

Citation: Psychopharmacology, June 2012, vol./is. 221/4(701-708), 0033-3158;1432-2072 (Jun 2012)

Author(s): Wang, Gui-Bin; Zhang, Xiao-Li; Zhao, Li-Yan; Sun, Li-Li; Wu, Ping; Lu, Lin; Shi, Jie

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Language: English

Abstract: Rationale: Relapse is a persistent problem in the management of addiction. Drug-related cues are powerful instigators of relapse. Impulsive decision making may contribute to relapse through a poorly considered assessment of the consequences of drug use. Drug cues robustly increase subjective craving, which is frequently associated with relapse. Objective: The present study explored the effects of drug-related cues on decision making and craving in heroin addicts at different abstinence times: 1, 3, 12, and 24 months. Methods: The 75 male participants were given 5 min exposure to neutral and drug-associated cues while decision making performance, craving, blood pressure, heart rate, and emotional state pre- and post-exposure were assessed. The Iowa Gambling Task was used to evaluate decision making ability in heroin addicts. Results: Drug-related cues exacerbated impulsive decision making and increased craving, heart rate, and systolic pressure in heroin addicts at all abstinence times. Conclusions: Drug-related cues aggravated decision making and increased craving in former heroin addicts who had been drug-free for 1-24 months, which might have significant clinical implications for the prevention of relapse. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Cues](#)
[*Decision Making](#)
[*Drug Abstinence](#)
[*Heroin](#)
[Craving](#)
[Drug Abuse](#)

Source: PsycINFO

16. RGS4 overexpression in the rat dorsal striatum modulates mGluR5- and amphetamine-mediated behavior and signaling.

Citation: Psychopharmacology, June 2012, vol./is. 221/4(621-635), 0033-3158;1432-2072 (Jun 2012)

Author(s): Schwendt, Marek; Sigmon, Stacey A; McGinty, Jacqueline F

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Language: English

Abstract: Rationale: Regulator of G-protein signaling 4 (RGS4) is a brain-enriched negative modulator of G-protein-coupled receptor signaling. Decreased availability of RGS4 in the frontal cortex and striatum has been described in animal models of schizophrenia and drug addiction. However, cellular and behavioral consequences of dysregulated RGS4-dependent receptor signaling in the brain remain poorly understood. Objective: This study aims to investigate whether RGS4, through inhibiting the function of mGluR5

receptors in the dorsal striatum (dSTR), regulates cellular and behavioral responses to acute amphetamine. Methods: After herpes simplex virus-RGS4 was infused into the dSTR, RGS4 overexpression as well as binding of recombinant RGS4 to mGluR5 was assessed. The effect of RGS4 overexpression on behavioral activity induced by the intrastriatal mGluR5 agonist, DHPG, or amphetamine was recorded. Activation of extracellular signal-regulated kinase (ERK) and Akt (protein kinase B) was measured in the dSTR tissue at the end of each behavioral experiment. Results: RGS4 overexpressed in the dSTR coimmunoprecipitated with mGluR5 receptors and suppressed both behavioral activity and phospho-ERK levels induced by DHPG. RGS4 overexpression or the mGluR5 antagonist, 3-((2-methyl-4-thiazolyl)ethynyl)pyridine (MTEP), attenuated amphetamine-induced phospho-ERK (but not phospho-Akt) levels. RGS4 suppressed amphetamine-induced vertical activity and augmented horizontal activity over 90 min. Similarly, MTEP augmented amphetamine-induced horizontal activity, but did not affect vertical activity. Conclusions: The present data demonstrate that RGS4 in the dSTR attenuates amphetamine-induced ERK signaling and decreases the behavioral efficacy of acute amphetamine likely by limiting mGluR5 function. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Amphetamine](#)
[*Animal Locomotion](#)
[*Gene Expression](#)
[*Proteins](#)
[*Striatum](#)
[Rats](#)

Source: PsycINFO

17. Review of Substance abuse in Canada.

Citation: Canadian Journal of Counselling and Psychotherapy, 2011, vol./is. 45/1(87-90), 1923-6182 (2011)

Author(s): Block, Aaron L

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Language: English

Abstract: Reviews the book, Substance abuse in Canada by M. Herie and W. Skinner (2010). This book was written for those who have been impacted directly or indirectly by addiction. Myths and assumptions from personal experience and the media are challenged. Tobacco, nicotine, and illicit drugs such as opioids and cannabis are explored in terms of assessment and evidence-based treatment, and from cultural and legal perspectives. Personal choice is compared and contrasted within a biopsychosocial framework when discussing policy development at the federal and provincial level. Canada's drug policy and evolution is detailed and addiction is firmly placed within a Canadian and international context. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cannabis](#)
[*Drug Abuse](#)
[*Nicotine](#)
[*Opiates](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [ProQuest](#)

18. Decreased cocaine motor sensitization and self-administration in mice overexpressing cannabinoid CB2 receptors.

- Citation:** Neuropsychopharmacology, June 2012, vol./is. 37/7(1749-1763), 0893-133X;1740-634X (Jun 2012)
- Author(s):** Aracil-Fernandez, Auxiliadora; Trigo, Jose M; Garcia-Gutierrez, Maria S; Ortega-Alvaro, Antonio; Ternianov, Alexander; Navarro, Daniela; Robledo, Patricia; Berbel, Pere; Maldonado, Rafael; Manzanares, Jorge
- Correspondence Address:** Manzanares, Jorge: Instituto de Neurociencias, Universidad Miguel Hernandez-CSIC, Avenida Ramon y Cajal s/n, Alicante, Spain, 03550, jmanzanares@umh.es
- Institution:** Aracil-Fernandez, Auxiliadora: Instituto de Neurociencias, Universidad Miguel Hernandez-CSIC, Alicante; Trigo, Jose M.: Red Tematica de Investigacion Cooperativa en Salud, Institute de Salud Carlos III, MICINN, Madrid; Garcia-Gutierrez, Maria S.: Instituto de Neurociencias, Universidad Miguel Hernandez-CSIC, Alicante; Ortega-Alvaro, Antonio: Unidad de Neuropsicofarmacologia Traslacional, Complejo Hospitalano Universitario de Albacete, Albacete; Ternianov, Alexander: Unidad de Neuropsicofarmacologia Traslacional, Complejo Hospitalano Universitario de Albacete, Albacete; Navarro, Daniela: Instituto de Neurociencias, Universidad Miguel Hernandez-CSIC, Alicante; Robledo, Patricia: Red Tematica de Investigacion Cooperativa en Salud, Institute de Salud Carlos III, MICINN, Madrid; Berbel, Pere: Instituto de Neurociencias, Universidad Miguel Hernandez-CSIC, Alicante; Maldonado, Rafael: Red Tematica de Investigacion Cooperativa en Salud, Institute de Salud Carlos III, MICINN, Madrid; Manzanares, Jorge: Instituto de Neurociencias, Universidad Miguel Hernandez-CSIC, Alicante
- Language:** English
- Abstract:** The potential involvement of the cannabinoid CB2 receptors (CB2r) in the adaptive responses induced by cocaine was studied in transgenic mice overexpressing the CB2r (CB2xP) and in wild-type (WT) littermates. For this purpose, the acute and sensitized locomotor responses to cocaine, conditioned place preference, and cocaine intravenous self-administration were evaluated. In addition, we assessed whether CB(2)r were localized in neurons and/or astrocytes, and whether they colocalized with dopamine D1 and D2 receptors (D1Dr and D2Dr). Dopamine (DA) extracellular levels in the nucleus accumbens (NAcc), and gene expression of tyrosine hydroxylase (TH) and DA transporter (DAT) in the ventral tegmental area (VTA), and -opioid and cannabinoid CB1 receptors in the NAcc were also studied in both genotypes. CB2xP mice showed decreased motor response to acute administration of cocaine (10-20 mg/kg) and cocaine-induced motor sensitization compared with WT mice. CB2xP mice presented cocaine-induced conditioned place aversion and self-administered less cocaine than WT mice. CB2r were found in neurons and astrocytes and colocalized with D2Dr in the VTA and NAcc. No significant differences in extracellular DA levels in the NAcc were observed between genotypes after cocaine administration. Under baseline conditions, TH and DAT gene expression was higher and -opioid receptor gene expression was lower in CB2xP than in WT mice. However, both genotypes showed similar changes in TH and -opioid receptor gene expression after cocaine challenge independently of the pretreatment received. Importantly, the cocaine challenge decreased DAT gene expression to a lesser extent in cocaine-pretreated CB2xP than in cocaine-pretreated WT mice. These results revealed that CB2r are involved in cocaine motor responses and cocaine self-administration, suggesting that this receptor could represent a promising target to develop novel treatments for cocaine addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2012
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Cannabinoids](#)
[*Cocaine](#)
[*Drug Self Administration](#)
[*Motor Processes](#)
[*Sensitization](#)
[Animal Locomotion](#)

Mice
Neural Receptors

Source: PsycINFO

19. A proof-of-concept randomized controlled study of gabapentin: Effects on cannabis use, withdrawal and executive function deficits in cannabis-dependent adults.

Citation: Neuropsychopharmacology, June 2012, vol./is. 37/7(1689-1698), 0893-133X;1740-634X (Jun 2012)

Author(s): Mason, Barbara J; Crean, Rebecca; Goodell, Vivian; Light, John M; Quello, Susan; Shadan, Farhad; Buffkins, Kimberly; Kyle, Mark; Adusumalli, Murali; Begovic, Adnan; Rao, Santosh

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Language: English

Abstract: There are no FDA-approved pharmacotherapies for cannabis dependence. Cannabis is the most widely used illicit drug in the world, and patients seeking treatment for primary cannabis dependence represent 25% of all substance use admissions. We conducted a phase IIa proof-of-concept pilot study to examine the safety and efficacy of a calcium channel/GABA modulating drug, gabapentin, for the treatment of cannabis dependence. A 12-week, randomized, double-blind, placebo-controlled clinical trial was conducted in 50 unpaid treatment-seeking male and female outpatients, aged 18-65 years, diagnosed with current cannabis dependence. Subjects received either gabapentin (1200 mg/day) or matched placebo. Manual-guided, abstinence-oriented individual counseling was provided weekly to all participants. Cannabis use was measured by weekly urine toxicology and by self-report using the Timeline Followback Interview. Cannabis withdrawal symptoms were assessed using the Marijuana Withdrawal Checklist. Executive function was measured using subtests from the Delis-Kaplan Executive Function System. Relative to placebo, gabapentin significantly reduced cannabis use as measured both by urine toxicology ($p = 0.001$) and by the Timeline Followback Interview ($p = 0.004$), and significantly decreased withdrawal symptoms as measured by the Marijuana Withdrawal Checklist ($p < 0.001$). Gabapentin was also associated with significantly greater improvement in overall performance on tests of executive function ($p = 0.029$). This POC pilot study provides preliminary support for the safety and efficacy of gabapentin for treatment of cannabis dependence that merits further study, and provides an alternative conceptual framework for treatment of addiction aimed at restoring homeostasis in brain stress systems that are dysregulated in drug dependence and withdrawal. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Anticonvulsive Drugs
*Cannabis
*Drug Dependency

*Drug Withdrawal
*Executive Function

Source: PsycINFO

20. Temporally dependent changes in cocaine-induced synaptic plasticity in the nucleus accumbens shell are reversed by D1-like dopamine receptor stimulation.

Citation: Neuropsychopharmacology, June 2012, vol./is. 37/7(1671-1682), 0893-133X;1740-634X (Jun 2012)

Author(s): Ortinski, Pavel I; Vassoler, Fair M; Carlson, Gregory C; Pierce, R. Christopher

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Language: English

Abstract: Dopaminergic and glutamatergic inputs to the nucleus accumbens shell have a central role in reward processing. Non-contingent cocaine administration generates a number of long-term AMPA receptor-dependent changes in synaptic efficacy. However, the synaptic consequences of cocaine self-administration and the potential role of dopamine in these processes remain unclear. Here, we examined the influence of D1 dopamine receptor (D1DR) activation on excitatory synaptic plasticity in the accumbens shell of adult rats following cocaine self-administration. Our results indicated that during the first 2 days following cocaine exposure both pre- and post-synaptic mechanisms contribute to a net decrease in AMPA receptor-mediated signaling. This is reflected by decreased frequency of miniature EPSCs (mEPSCs) attributable to enhanced cannabinoid receptor activity, decreased mEPSC amplitude, and increased paired-pulse ratio of evoked EPSCs. In contrast, the only changes observed in the shell 3-4 weeks following cocaine self-administration were increased mEPSCs amplitudes and AMPA/NMDA ratios. We further found that although these cocaine-induced neuroadaptations during early and late abstinence have different synaptic expression mechanisms, they were normalized by stimulation of D1DRs. Thus, pre-exposure to the D1DR agonist, SKF38393, during the initial period of abstinence increased excitatory synaptic strength, but reduced excitatory signaling after weeks of abstinence. Taken together, these results indicate that the direction of changes in excitatory transmission induced by cocaine self-administration switches over the first few weeks of abstinence. Moreover, D1DRs gate the stability of these cocaine-induced changes at glutamatergic synapses in the accumbens shell by utilizing multiple temporally distinct mechanisms, which has implications for the treatment of cocaine craving and addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cocaine
*Dopamine
*Neural Receptors
*Nucleus Accumbens
*Synaptic Plasticity
Rats

Source: PsycINFO

21. Chronic corticosterone exposure during adolescence reduces impulsive action but increases impulsive choice and sensitivity to yohimbine in male Sprague-Dawley rats.

- Citation:** Neuropsychopharmacology, June 2012, vol./is. 37/7(1656-1670), 0893-133X;1740-634X (Jun 2012)
- Author(s):** Torregrossa, Mary M; Xie, Maylene; Taylor, Jane R
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- Institution:** Torregrossa, Mary M.: Department of Psychiatry, Yale University, New Haven, CT; Xie, Maylene: Department of Psychiatry, Yale University, New Haven, CT; Taylor, Jane R.: Department of Psychiatry, Yale University, New Haven, CT
- Language:** English
- Abstract:** Chronic stress during adolescence is associated with an increased risk for alcoholism and addictive disorders. Addiction is also associated with increased impulsivity, and stress during adolescence could alter cortical circuits responsible for response inhibition. Therefore, the present study determined the effect of chronic exposure to the stress hormone corticosterone (CORT) during adolescence on tests of impulsivity in adulthood and examined possible biochemical mechanisms. Male Sprague-Dawley rats were exposed to CORT by their drinking water during adolescence (post-natal day 30-50). The rats were then tested in adulthood to assess behavior on the 5-choice serial reaction time task (5CSRTT), stop-signal reaction time task (SSRTT), and the delay-discounting task, which differentially assess attention, impulsive action, and impulsive choice. Yohimbine-induced impulsivity on the 5CSRTT and biochemical analysis of the lateral orbital frontal cortex (IOFC) was also assessed owing to the ability of yohimbine to activate the hypothalamic-pituitary-adrenal axis and influence impulsivity. Adolescent CORT-treated rats were found to behave largely like controls on the 5CSRTT, but did show reduced premature responses when the intertrial interval was increased. Nevertheless, the CORT-treated rats tended to have more yohimbine-induced impulsive responses at low doses on this task, which was not found to be due to increased pCREB in the IOFC, but could be related to a higher expression/activity of the AMPA receptor subunit GluR1. Adolescent CORT-treated rats performed more accurately on the SSRTT, but showed greater impulsivity on the delay-discounting task, as indicated by steeper discounting functions. Therefore, adolescent CORT exposure reduced impulsive action but increased impulsive choice, indicating that chronic stress hormone exposure in adolescence can have long-term consequences on behavior. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2012
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Corticosterone](#)
[*Impulsiveness](#)
[*Prefrontal Cortex](#)
[*Yohimbine](#)
[*Delay Discounting](#)
[Hypothalamic Pituitary Adrenal Axis](#)
[Rats](#)
- Source:** PsycINFO

22. Drug intake is sufficient, but conditioning is not necessary for the emergence of compulsive cocaine seeking after extended self-administration.

- Citation:** Neuropsychopharmacology, June 2012, vol./is. 37/7(1612-1619), 0893-133X;1740-634X (Jun 2012)
- Author(s):** Jonkman, Sietse; Pelloux, Yann; Everitt, Barry J

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Language: English

Abstract: Compulsive drug seeking, which is characterized by continued instrumental effort despite contingent punishment, has been shown to emerge after extended drug self-administration. Exactly what aspect of drug self-administration drives the appearance of addictive behavior is unclear, but the mechanistic explanations that have been offered differ in one key respect. On one hand, it has been suggested that dysfunctional conditioning during self-administration drives unrealistic reward expectations, ultimately producing resistance to punishment. If this is indeed the pathological process that drives compulsive behavior, then compulsivity should be apparent only in the presence of the pavlovian and instrumental stimuli that underwent frequent pairing with the drug reward. On the other hand, it has also been suggested that extended drug intake produces general changes to reward and decision-making circuits that manifest as compulsive drug seeking. Unfortunately, conditioning history and drug intake are generally intrinsically intertwined. However, here we used an animal model of compulsive cocaine seeking to selectively manipulate drug intake and the degree of conditioning in the test context, to investigate which of the two is more important for the emergence of compulsive cocaine seeking. The results show that extended drug intake alone is sufficient, but extended conditioning in the test context is not necessary for the emergence of compulsive cocaine seeking, resolving a fundamental question in addiction research. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Cocaine](#)
[*Drug Self Administration](#)
[*Drug Seeking](#)
[Rats](#)

Source: PsycINFO

23. Loss of environmental enrichment increases vulnerability to cocaine addiction.

Citation: Neuropsychopharmacology, June 2012, vol./is. 37/7(1579-1587), 0893-133X;1740-634X (Jun 2012)

Author(s): Nader, Joelle; Claudia, Chauvet; El Rawas, Rana; Favot, Laure; Jaber, Mohamed; Thiriet, Nathalie; Solinas, Marcello

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Language: English

Abstract: Life experiences, especially during critical periods of maturation, such as adolescence, can dramatically affect vulnerability to diseases at adulthood. Early exposure to positive environmental conditions such as environmental enrichment (EE) has been shown to reduce the occurrence and the intensity of neurological and psychiatric disorders including drug addiction. However, whether or not exposure to EE during early stages of life would protect from addiction when, at adulthood, individuals may find themselves in non-enriched conditions has not been investigated. Here we show that switching mice from EE to non-enriched standard environments not only results in the loss of the preventive effects of EE but also increases the rewarding effects of cocaine. This enhanced vulnerability is associated with emotional distress and with increased levels in the mRNA levels of corticotropin releasing factor (CRF) in the bed nucleus of the stria terminalis (BNST), as well as with increases in CREB phosphorylation in the BNST and in the shell of the nucleus accumbens. The increased sensitivity to the rewarding effects of cocaine is completely blocked by the CRF antagonist antalarmin, confirming a major role of the CRF system in the negative consequences of this environmental switch. These results indicate that positive life conditions during early stages of life, if they are not maintained at adulthood, may have negative emotional consequences and increase the risks to develop drug addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Animal Environments](#)
[*Cocaine](#)
[*Susceptibility \(Disorders\)](#)
[Mice](#)

Source: PsycINFO

24. Differential effects of cocaine on dopamine neuron firing in awake and anesthetized rats.

Citation: Neuropsychopharmacology, June 2012, vol./is. 37/7(1559-1571), 0893-133X;1740-634X (Jun 2012)

Author(s): Koulchitsky, Stanislav; de Backer, Benjamin; Quertemont, Etienne; Charlier, Corinne; Seutin, Vincent

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Language: English

Abstract: Cocaine (benzoylmethylecgonine), a natural alkaloid, is a powerful psychostimulant and a highly addictive drug. Unfortunately, the relationships between its behavioral and electrophysiological effects are not clear. We investigated the effects of cocaine on the firing of midbrain dopaminergic (DA) neurons, both in anesthetized and awake rats, using pre-implanted multielectrode arrays and a recently developed telemetric recording system. In anesthetized animals, cocaine (10 mg/kg, intraperitoneally) produced a general decrease of the firing rate and bursting of DA neurons, sometimes preceded by a transient increase in both parameters, as previously reported by others. In awake rats, however, injection of cocaine led to a very different pattern of changes in firing. A decrease in firing rate and bursting was observed in only 14% of DA neurons. Most of the other DA

neurons underwent increases in firing rate and bursting: these changes were correlated with locomotor activity in 52% of the neurons, but were uncorrelated in 29% of them. Drug concentration measurements indicated that the observed differences between the two conditions did not have a pharmacokinetic origin. Taken together, our results demonstrate that cocaine injection differentially affects the electrical activity of DA neurons in awake and anesthetized states. The observed increases in neuronal activity may in part reflect the cocaine-induced synaptic potentiation found *ex vivo* in these neurons. Our observations also show that electrophysiological recordings in awake animals can uncover drug effects, which are masked by general anesthesia. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Dopamine](#)
[*Electrophysiology](#)
[*Neurons](#)
[Rats](#)
[Pharmacokinetics](#)

Source: PsycINFO

25. Encountering compassion in substance abuse studies: Views from a doctoral student.

Citation: Journal of Social Work Practice in the Addictions, April 2012, vol./is. 12/2(215-218), 1533-256X;1533-2578 (Apr 2012)

Author(s): Steen, Jeff T

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Institution: Steen, Jeff T.: Silver School of Social Work, New York University, New York, NY

Language: English

Abstract: The current article presents views from a doctoral student discussing about substance abuse. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Taylor & Francis Group, LLC

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Students](#)

Source: PsycINFO

26. Working with children and families who have survived natural disasters: Exploring substance abuse and other risk factors.

Citation: Journal of Social Work Practice in the Addictions, April 2012, vol./is. 12/2(209-214), 1533-256X;1533-2578 (Apr 2012)

Author(s): Powell, Tara; Steiker, Lori K. Holleran

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Institution: Powell, Tara: School of Social Work, University of Texas at Austin, Austin, TX; Steiker, Lori K. Holleran: School of Social Work, University of Texas at Austin, Austin, TX

Language: English

Abstract: The relationship between trauma and substance abuse has long been established in social work practice and related research. There are articles in the disaster literature that discuss the impact of natural disasters in other countries, such as the earthquakes in China, cyclones in Pakistan, and the more recent earthquake in Haiti in 2010. The trauma of

surviving each natural disaster has its own characteristics, manifestations, and concerns for clients and social workers. First, can you share what your roles and experience is in relation to natural disasters and interventions with children and families? (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
 *Family
 *Natural Disasters
 *Risk Factors
 *Trauma
Source: PsycINFO

27. Review of Principles and practice of group work in addictions.

Citation: Journal of Social Work Practice in the Addictions, April 2012, vol./is. 12/2(206-208), 1533-256X;1533-2578 (Apr 2012)
Author(s): Brocato, Jo
Institution: Brocato, Jo: California State University, Long Beach, CA
Language: English
Abstract: Reviews the book, Principles and Practice of Group Work in Addictions edited by Robert Hill and Jennifer Harris (2011). The authors have skillfully edited the contributions of addiction specialists in the United Kingdom to offer an overview of group work that integrates theory and practice skills across a variety of addiction treatment models. The targeted audience includes providers of addiction services at all levels of experience. Promising a practical and concise introduction to group work in addictions, this book is organized into three sections: (a) core group work, (b) practical issues and solutions to common problems, and (c) specific issues within the field of addictions. The strength-based interventions of this book are in alignment with social work practice and social workers will appreciate the nonstigmatizing language throughout the text. The pragmatic hands-on approach of this book will have an appeal to social workers who are considering conducting addiction groups. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
 *Group Psychotherapy
 *Social Group Work
Source: PsycINFO

28. Review of Group therapy for substance use disorders.

Citation: Journal of Social Work Practice in the Addictions, April 2012, vol./is. 12/2(205-206), 1533-256X;1533-2578 (Apr 2012)
Author(s): Hohman, Melinda
Institution: Hohman, Melinda: San Diego State University, San Diego, CA
Language: English
Abstract: Reviews the book, Group Therapy for Substance Use Disorders by Linda Carter Sobell and Mark B. Sobell (2011). The authors bring to life the mechanisms, skills, and methods of their guided self-change (GSC) treatment model. Previously found to be effective in individual therapy, the authors adapted GSC for group settings and tested it against the individual therapy setting. The book is a result of this work. The book is divided into three sections. The first section begins with a chapter that describes the GSC. The authors set GSC in the context of other cognitive-behavioral methods for those with substance use

disorders (SUDs), comparing their similarities and differences. The second section of the book describes the GSC in individual and group formats in step-by-step detail. The final section is an excellent general review of group work information and provides specific detail that will be helpful to anyone working with treatment groups, not only with SUD groups; examples include groupsize, working with a cotherapist, termination, and other structural issues. This book is a blend of science and hands-on experience. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Group Psychotherapy](#)
[*Treatment](#)
[Mental Disorders](#)
Source: PsycINFO

29. What's faith got to do with it? Religiosity among women who use methamphetamine.

Citation: Journal of Social Work Practice in the Addictions, April 2012, vol./is. 12/2(189-204), 1533-256X;1533-2578 (Apr 2012)
Author(s): Lutnick, Alexandra; Lorvick, Jennifer; Cheng, Helen; Wenger, Lynn; Kral, Alex H
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Institution: Lutnick, Alexandra: Urban Health Program, RTI International, San Francisco, CA; Lorvick, Jennifer: Urban Health Program, RTI International, San Francisco, CA; Cheng, Helen: Women's Global Health Imperative Program, RTI International, San Francisco, CA; Wenger, Lynn: Urban Health Program, RTI International, San Francisco, CA; Kral, Alex H.: Urban Health Program, RTI International, San Francisco, CA
Language: English
Abstract: Religiosity is not found to be consistently protective in mental health and substance use outcomes among illicit drug users. This study examines the association among religiosity, mental health, and drug use among a community-recruited sample of women who use methamphetamine. The majority of the sample (74%) had high scores of religious faith. In multivariate analysis, those with high scores had higher odds of self-reporting a mental health diagnosis and of being psychologically dependent on methamphetamine, and they were less likely to report injection risk. Further examination of the role of religiosity in the lives of women who use methamphetamine is advised. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Mental Health](#)
[*Methamphetamine](#)
[*Religiosity](#)
[*Faith](#)
[Human Females](#)
Source: PsycINFO

30. Alcohol use and HIV risk among juvenile drug court offenders.

Citation: Journal of Social Work Practice in the Addictions, April 2012, vol./is. 12/2(178-188), 1533-256X;1533-2578 (Apr 2012)
Author(s): Tolou-Shams, Marina; Houck, Christopher D; Nugent, Nicole; Conrad, Selby M; Reyes, Ayanaris; Brown, Larry K

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Language: English

Abstract: Juvenile drug courts (JDCs) largely focus on marijuana and other drug use interventions. Yet, JDC offenders engage in other high-risk behaviors, such as alcohol use and sexual risk behaviors, which can compromise their health, safety, and drug court success. An examination of alcohol use and sexual risk behaviors among 52 male substance-abusing young offenders found that over 50% were using alcohol, 37% reported current marijuana use, and one third of all sexual intercourse episodes were unprotected. After accounting for recent marijuana use, the odds of a juvenile having vaginal or anal sex was 6 times greater if they had recently used alcohol. JDCs might benefit from delivering alcohol and sexual risk reduction interventions to fully address the needs of these young offenders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*HIV](#)
[*Intervention](#)
[*Juvenile Delinquency](#)
[*Sexual Risk Taking](#)
[Adjudication](#)
[Alcohol Abuse](#)

Source: PsycINFO

31. PTSD and psychoactive substance use among Israeli veterans: The phenomenon and contributing factors.

Citation: Journal of Social Work Practice in the Addictions, April 2012, vol./is. 12/2(163-177), 1533-256X;1533-2578 (Apr 2012)

Author(s): Teichman, Meir; Cohen, Ety

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Institution: Teichman, Meir: Bob Shapell School of Social Work, Tel Aviv University, Tel Aviv; Cohen, Ety: Bob Shapell School of Social Work, Tel Aviv University, Tel Aviv

Language: English

Abstract: This study explores the relationships between posttraumatic stress disorder (PTSD) and the use and abuse of psychoactive substances among Israeli veterans of different campaigns who were diagnosed with severe and chronic PTSD (N = 201). Main findings include: (a) Prevalence of substance use and abuse among these veterans was significantly higher than in the general Israeli adult male population; (b) Substance use and misuse among the respondents was related to the intensity of their posttraumatic symptoms, levels of anxiety and depression, and low levels of resilience. Significant relationships were found among substance use, PTSD, and participation in combat casualty evacuation; and (c) Misuse of medications was the most common form of substance abuse and was significantly related to the intensity of PTSD symptoms. The role of social workers working with PTSD patients is discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Diagnosis](#)
[*Major Depression](#)
[*Military Veterans](#)
[*Posttraumatic Stress Disorder](#)
[*Symptoms](#)
[Drug Abuse](#)
[Drugs](#)
Source: PsycINFO

32. An ecosystemic perspective in the treatment of posttraumatic stress and substance use disorders in veterans.

Citation: Journal of Social Work Practice in the Addictions, April 2012, vol./is. 12/2(143-162), 1533-256X;1533-2578 (Apr 2012)
Author(s): Weiss, Eugenia L; Coll, Jose E; Mayeda, Shannon; Mascarenas, Jennifer; Lawlor, Kristen; Debraber, Tara
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Institution: Weiss, Eugenia L.: School of Social Work, University of Southern California, Irvine, CA; Coll, Jose E.: School of Education & Social Services, Saint Leo University, Saint Leo, FL; Mayeda, Shannon: School of Social Work, University of Southern California, Irvine, CA; Lawlor, Kristen: Volunteers of America, Boston, MA; Debraber, Tara: School of Social Work, University of Southern California, Irvine, CA
Language: English
Abstract: This article reviews the prevalence of co-occurring posttraumatic stress disorder (PTSD) and substance use disorders (SUDs) in the veteran population. Recommendations regarding how to better understand, engage, and retain veterans with PTSD/SUDs in treatment are presented through an ecological perspective that takes into account the multiple systems and worldviews, including culture, ethnicity, family, and military culture, that are transacting with the individual. A case example illustrates the multifaceted approach that the authors feel is necessary to increase treatment participation and retention with military clients. This article can be useful for both civilian social work clinicians and those working in military or veteran treatment settings. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abuse](#)
[*Epidemiology](#)
[*Military Veterans](#)
[*Posttraumatic Stress Disorder](#)
[*Treatment](#)
Source: PsycINFO

33. Decision making in narcolepsy with cataplexy.

Citation: Sleep: Journal of Sleep and Sleep Disorders Research, January 2011, vol./is. 34/1(99-104), 0161-8105;1550-9109 (Jan 1, 2011)
Author(s): Bayard, Sophie; Abril, Beatriz; Yu, Huan; Scholz, Sabine; Carlander, Bertrand; Dauvilliers, Yves
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Language:

English

Abstract:

Objectives: To investigate decision-making and addictive behaviors in narcolepsy-cataplexy (NC). NC is caused by the loss of hypothalamic neurons that produce hypocretins. The hypocretin system plays a crucial role in sleep, wakefulness, and energy homeostasis, and is also involved in emotion regulation, reward processing, and addiction. **Setting:** Academic sleep center. **Patients:** 23 subject with NC and 23 matched healthy controls. **Design:** We used the Iowa Gambling Task (IGT) to assess decision making under ambiguity condition based on emotional feedback processing and the Game of Dice Task (GDT) to assess decision making under risk condition. All participants underwent a semi-structured psychiatric interview and completed the Beck Depression Inventory-II and the UPPS Impulsive Behavior Scale. Patients underwent one night of polysomnography followed by an MSLT, with neuropsychological evaluation performed between MSLT sessions. **Measurements and Results:** NC patients had higher depressive symptoms and showed a significant lack of perseverance. One NC patient had a past history of drug dependence. NC patients also exhibited selective reduced IGT performance and normal performance on the GDT. No clinical or polysomnographic characteristics were associated with increased sensitivity to reward and/or decreased sensitivity to punishment. However, lack of perseverance in NC patients was associated with disadvantageous decision making on the IGT. **Conclusion:** We demonstrated a lack of perseverance and a selective reduced performance on decision making under ambiguity in NC in contrast to normal decision making under explicit conditions. Patients with narcolepsy-cataplexy may opt for choices with higher immediate emotional valence, regardless of higher future punishment, to compensate for their reduced reactivity to emotional stimuli. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Cataplexy
 *Narcolepsy
 *Polysomnography
 *Sleep
 *Wakefulness
 Decision Making
 Major Depression

Source:

PsycINFO

Full Text:Available in *fulltext* at [National Library of Medicine](#)**34. Depression and alcohol addiction: A therapeutic challenge.****Original Title:**

Depression und alkohol-abhangigkeit: Eine therapeutische herausforderung.

Citation:

Nervenheilkunde: Zeitschrift fur interdisziplinare Fortbildung, 2012, vol./is. 31/5(305-310), 0722-1541 (2012)

Author(s):

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Heberlein, A.: Center for Addiction Research (CARE), Klinik für Psychiatrie, Sozialpsychiatrie und Psychotherapie, Medizinische Hochschule Hannover, Hannover

Language: German

Abstract: The treatment of depressive disorders in alcohol-dependent patients is often a difficult clinical challenge. For example, regulatory framework inhibits the access to psychotherapeutic treatment. So, the demand of a permanent abstinence is a prerequisite for the reimbursement of psychotherapeutic treatment. Contrary to those claims that are not compatible with the current state of research on the neurobiological basis of addiction, clinical studies show that combined treatment strategies including the simultaneous treatment of depression and addictive disorders lead to higher therapeutic success rates. Regarding pharmacotherapy, a combined treatment with drugs for relapse prevention and anti-depressives may be considered useful. Psychotherapeutically, a combination of motivation-enhancing approaches and cognitive-behavioral methods can be considered an effective treatment of both disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Schattauer; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Alcohols](#)
[*Major Depression](#)
[*Psychotherapeutic Processes](#)
[*Therapeutic Processes](#)
[Neurobiology](#)

Source: PsycINFO

35. A best-worst scaling survey of adolescents' level of concern for health and non-health consequences of smoking.

Citation: Social Science & Medicine, July 2012, vol./is. 75/1(87-97), 0277-9536;1873-5347 (Jul 2012)

Author(s): Marti, Joachim

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Institution: Marti, Joachim: School of Public Health, Division of Health Policy and Administration, Yale University, New Haven, CT

Language: English

Abstract: This paper uses best-worst scaling, a choice-based survey method, to assess adolescents' level of concern for various adverse consequences of tobacco use. In addition to health risks cited most often (i.e., lung cancer and cardiovascular diseases), the study also focuses on less frequently mentioned health implications (e.g., effects on teeth, appearance, skin, weight and sexual dysfunction) and other adverse effects that are unrelated to health, such as cost, addiction, or manipulation by the tobacco industry. The relative importance of 15 items was assessed in a sample of 376 adolescents (ages 14-19 years) in Western Switzerland. The resulting data provide rich information on the relative importance of the items considered and even allow for the assessment of individual-level preference scales. The results indicate that apart from lung cancer that is consistently rated as being of most concern, less-mentioned health risks such as reduced physical capacity and sexual dysfunction are of significant importance. Subgroup analyses and results from a random parameter approach highlight substantial heterogeneity in preferences that should be exploited in future prevention messages. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Health](#)

[*Risk Factors](#)
[*Tobacco Smoking](#)

Source: PsycINFO

36. Does school ethos explain the relationship between value-added education and teenage substance use? A cohort study.

Citation: Social Science & Medicine, July 2012, vol./is. 75/1(69-76), 0277-9536;1873-5347 (Jul 2012)

Author(s): Markham, Wolfgang A; Young, Robert; Sweeting, Helen; West, Patrick; Aveyard, Paul

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Language: English

Abstract: Previous studies found lower substance use in schools achieving better examination and truancy results than expected, given their pupil populations (high value-added schools). This study examines whether these findings are replicated in West Scotland and whether school ethos indicators focussing on pupils' perceptions of schooling (environment, involvement, engagement and teacher-pupil relations) mediate the associations. Teenagers from forty-one schools (S2, aged 13, n = 2268; S4, aged 15, n = 2096) previously surveyed in primary school (aged 11, n = 2482) were surveyed in the late 1990s. School value-added scores were derived from standardised residuals of two regression equations separately predicting from pupils' socio-demographic characteristics (1) proportions of pupils passing five Scottish Standard Grade Examinations, and (2) half-day truancy loss. Outcomes were current smoking, monthly drinking, ever illicit drug use. Random effects logistic regression models adjusted for potential pupil-level confounders were used to assess (1) associations between substance use and school-level value-added scores and (2) whether these associations were mediated by pupils' perceptions of schooling or other school-level factors (school roll, religious denomination and mean aggregated school-level ethos scores). Against expectations, value-added education was positively associated with smoking (Odds Ratios [95% confidence intervals] for one standard deviation increase in value-added scores were 1.28 [1.02-1.61] in S2 and 1.13 [1.00-1.27] in S4) and positively but weakly and non-significantly associated with drinking and drug use. Engagement and positive teacher-pupil relations were strongly and negatively associated with all substance use outcomes at both ages. Other school-level factors appeared weakly and largely non-significantly related to substance use. Value-added scores were unrelated to school ethos measures and no ethos measure mediated associations between value-added education and substance use. We conclude that substance use in Scotland is more likely in high value-added schools, among disengaged students and those with poorer student-teacher relationships. Understanding the underpinning mechanisms is a potentially important public health concern. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Education](#)
[*School Environment](#)
[*Student Engagement](#)
[*Teacher Student Interaction](#)
[School Truancy](#)
[Truancy](#)
[Values](#)

Source: PsycINFO

37. Association between cocaine abuse in pregnancy and placenta-associated syndromes using propensity score matching approach.

Citation: Early Human Development, June 2012, vol./is. 88/6(333-337), 0378-3782 (Jun 2012)

Author(s): Mbah, Alfred K; Alio, Amina P; Fombo, Doris W; Bruder, Karen; Dagne, Getachew; Salihu, Hamisu M

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Language: English

Abstract: Aims: We used propensity scores matching techniques to assess the association between maternal cocaine abuse in pregnancy and the occurrence of placenta-associated syndromes (PAS). Study design: Mothers who abused cocaine (n = 5026) were matched to controls (n = 5026) from a sample of 1,693,197, unexposed mothers in Florida from 1998 to 2007. Cocaine abuse was identified using the ICD-9 principal and secondary diagnosis codes (304.2 for cocaine dependence and 305.6 for cocaine abuse). The outcome of interest, PAS, was identified as any indication in diagnosis field of ICD-9-CM codes for: placental abruption (641.2), oligohydramnios (658.0), placental infarction (656.7, 656.8, 656.9), gestational hypertension (642.3, 642.9), preeclampsia (642.4, 642.5, and 642.7) or eclampsia (642.6). Results: Nearly 6% of mothers in the study sample experienced a condition associated with PAS prior to matching. Women who abused cocaine were 58% more likely to have PAS when compared to women who did not (OR = 1.48, 95% confidence interval: 1.33, 1.66). Women who abused cocaine were at elevated odds for placental abruption, placenta infarction and preeclampsia with the most pronounced odds noted for placental abruption (OR = 2.79, 95% confidence interval: 2.19, 3.55). Conclusions: These findings indicate that cocaine abuse during pregnancy is associated with more placenta-related disorders than previously reported. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Drug Abuse](#)
[*Placenta](#)
[*Pregnancy](#)
[*Syndromes](#)

Source: PsycINFO

38. Child and adult outcomes of chronic child maltreatment.

Citation: Pediatrics, 2012, vol./is. 129/5(839-845), 0031-4005;1098-4275 (2012)

Author(s): Jonson-Reid, Melissa; Kohl, Patricia L; Drake, Brett

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Work, Washington University, St Louis, MO; Drake, Brett: George Warren Brown School of Social Work, Washington University, St Louis, MO

Language: English

Abstract: Objective: To describe how child maltreatment chronicity is related to negative outcomes in later childhood and early adulthood. Methods: The study included 5994 low-income children from St Louis, including 3521 with child maltreatment reports, who were followed from 1993-1994 through 2009. Children were 1.5 to 11 years of age at sampling. Data include administrative and treatment records indicating substance abuse, mental health treatment, brain injury, sexually transmitted disease, suicide attempts, and violent delinquency before age 18 and child maltreatment perpetration, mental health treatment, or substance abuse in adulthood. Multivariate analysis controlled for potential confounders. Results: Child maltreatment chronicity predicted negative childhood outcomes in a linear fashion (eg, percentage with at least 1 negative outcome: no maltreatment = 29.7%, 1 report = 39.5%, 4 reports = 67.1%). Suicide attempts before age 18 showed the largest proportionate increase with repeated maltreatment (no report versus 4+ reports = +625%, $P < .0001$). The dose-response relationship was reduced once controls for other adverse child outcomes were added in multivariate models of child maltreatment perpetration and mental health issues. The relationship between adult substance abuse and maltreatment report history disappeared after controlling for adverse child outcomes. Conclusions: Child maltreatment chronicity as measured by official reports is a robust indicator of future negative outcomes across a range of systems, but this relationship may desist for certain adult outcomes once childhood adverse events are controlled. Although primary and secondary prevention remain important approaches, this study suggests that enhanced tertiary prevention may pay high dividends across a range of medical and behavioral domains. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Academy of Pediatrics; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Child Abuse](#)
[*Drug Abuse](#)
[*Mental Health](#)
[*Suicide](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [American Academy of Pediatrics](#)
Available in *print* at [Newcomb Library & Information Service](#)

39. Understanding recovery barriers: Youth perceptions about substance use relapse.

Citation: American Journal of Health Behavior, September 2012, vol./is. 36/5(602-614), 1087-3244;1945-7359 (Sep 2012)

Author(s): Gonzales, Rachel; Anglin, M. Douglas; Beattie, Rebecca; Ong, Chris Angelo; Glik, Deborah C

Correspondence Address: Gonzales, Rachel, rachelmg@ucla.edu

Institution: Gonzales, Rachel: Integrated Substance Abuse Programs, University of California, Los Angeles, CA; Anglin, M. Douglas: Integrated Substance Abuse Programs, University of California, Los Angeles, CA; Beattie, Rebecca: Integrated Substance Abuse Programs, University of California, Los Angeles, CA; Ong, Chris Angelo: Integrated Substance Abuse Programs, University of California, Los Angeles, CA; Glik, Deborah C.: School of Public Health, University of California, Los Angeles, CA

Language: English

Abstract: Objective: To qualitatively explore how treatment-involved youth retrospectively contextualize relapse from substance use. Methods: Fourteen focus groups were conducted with 118 youth (78.3% male; 66.1% Latino) enrolled in participating substance abuse treatment programs (4 young adult and 10 adolescent) throughout Los Angeles County. Transcripts were analyzed for relapse perception themes. Results: Dominant

relapse themes include emotional reasons (90%), life stressors (85%), cognitive factors (75%), socialization processes (65%), and environmental issues (55%). Conclusions: Youth perceptions about relapse during treatment should be used to better inform clinical approaches and shape early-intervention recovery agendas for substance-abusing youth. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Attitudes](#)
[*Adult Attitudes](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Relapse Prevention](#)
[Predelinquent Youth](#)
[Treatment Barriers](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [EBSCOhost](#)

40. Substance-related disorders.

Citation: Psychiatry review and Canadian certification exam preparation guide., 2012(145-170) (2012)

Author(s): Leamon, Martin H; Wright, Tara M; Myrick, Hugh; Parthasarathi, Usha

Institution: Leamon, Martin H.: U California, Davis, Dept of Psychiatry and Behavioral Sciences, Davis, CA; Wright, Tara M.: Medical U of South Carolina, Ralph H. Johnson VAMC, Charleston, SC; Myrick, Hugh: Medical U of South Carolina, Ralph H. Johnson VAMC, Charleston, SC; Parthasarathi, Usha: McMaster U, Michael G. DeGroote School of Medicine, Dept of Psychiatry and Behavioural Neurosciences, Hamilton, ON

Language: English

Abstract: (create) Discusses classification systems in terms of the DSM-IV-TR for substance-related and substance-induced disorders. Neurobiology, the general principles of treatment, and various substances, including alcohol and cannabis are presented. The chapter concludes with a discussion of co-occurring substance use disorders and other psychiatric disorders and key points regarding substance-related disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Diagnostic and Statistical Manual](#)
[*Drug Abuse](#)
[*Mental Disorders](#)
[Drug Dependency](#)

Source: PsycINFO

41. Analysing 'cultural safety' in mental health policy reform: Lessons from British Columbia, Canada.

Citation: Critical Public Health, June 2012, vol./is. 22/2(223-234), 0958-1596;1469-3682 (Jun 2012)

Author(s): Josewski, Viviane

Correspondence Address: Josewski, Viviane: Faculty of Health Sciences, Simon Fraser University, Vancouver, BC, Canada, V6B 5K3, vha1@sfu.ca

Institution: Josewski, Viviane: Faculty of Health Sciences, Simon Fraser University, Vancouver, BC

Language: English

Abstract: In response to the mental health disparities experienced by Aboriginal peoples, and related inequities regarding the accessibility to appropriate mental health care, there has been a shift in health policy to endorse 'By Indigenous for Indigenous' health care delivery models. In Canada, this has resulted in the creation of new mechanisms for Aboriginal participation in health care planning by health authorities with the goal of

fostering culturally safe mental health and addictions care. Yet, there is a growing concern about the effects of neo-liberal cost concerns in health policy on the effective implementation of such progressive reform ideas. Drawing on a critical policy review and ethnographic interviews with four community-based Aboriginal organisations and one health authority, this article uses 'cultural safety' as a critical lens to discuss emerging tensions within the context of regional Aboriginal mental health care reform in British Columbia. The findings of this study draw attention to the intersecting ways that dominant socio-historical and political ideologies undermine cultural safety in decision-making and funding practices, thereby creating situations of cultural risk for both Aboriginal people working within the area of Aboriginal mental health and by extension for Aboriginal people who are seeking mental health and addictions care. The insights gained from this research contribute to the ongoing dialogue regarding how to foster culturally safe mental health policy and practice, and for action in the political realm. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Health Care Delivery](#)
[*Mental Health Services](#)
[*Health Care Reform](#)
[*Health Disparities](#)
[Safety](#)

Source: PsycINFO

42. Harm reduction as anarchist practice: A user's guide to capitalism and addiction in North America.

Citation: Critical Public Health, June 2012, vol./is. 22/2(209-221), 0958-1596;1469-3682 (Jun 2012)

Author(s): Smith, Christopher B. R

Correspondence Address: Smith, Christopher B. R.: Department of Anthropology, University of Pennsylvania, Philadelphia, PA, US, 19104-6398, cbrs1977@gmail.com

Institution: Smith, Christopher B. R.: Department of Anthropology, University of Pennsylvania, Philadelphia, PA

Language: English

Abstract: In spite of its origins as an illegal, clandestine, grassroots activity that took place either outside or in defiant opposition to state and legal authority, there is growing evidence to suggest that harm reduction in North America has become sanitized and depoliticized in its institutionalization as public health policy. Harm reduction remains the most contested and controversial aspect of drug policy on both sides of the Canada-US border, yet the institutionalization of harm reduction in each national context demonstrates a series of stark contrasts. Drawing from regional case study examples in Canada and the US, this article historically traces and politically re-maps the uneasy relationship between the autonomous political origins of harm reduction, contemporary public health policy, and the adoption of the biomedical model for addiction research and treatment in North America. Situated within a broader theoretical interrogation of the etiology of addiction, this study culminates in a politically engaged critique of traditional addiction research and drug/service user autonomy. Arguing that the founding philosophy and spirit of the harm reduction movement represents a fundamentally anarchist-inspired form of practice, this article concludes by considering tactics for reclaiming and re-politicizing the future of harm reduction in North America. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Capitalism](#)
[*Drug Addiction](#)
[*Harm Reduction](#)

*Public Health
*Health Care Policy

Source: PsycINFO

43. Perceived discrimination and longitudinal increases in adolescent substance use: Gender differences in mediational pathways.

Citation: American Journal of Public Health, May 2012, vol./is. 102/5(1006-1011), 0090-0036;1541-0048 (May 2012)

Author(s): Brody, Gene H; Kogan, Steven M; Chen, Yi-fu

Correspondence Address: Brody, Gene H.: University of Georgia, Center for Family Research, 1095 College Station Road, Athens, GA, US, 30605-4527, gbrody@uga.edu

Institution: Brody, Gene H.: Center for Family Research, Institute for Behavioral Research, University of Georgia, Athens, GA; Kogan, Steven M.: Department of Child and Family Development, University of Georgia, Athens, GA; Chen, Yi-fu: Center for Family Research, Institute for Behavioral Research, University of Georgia, Athens, GA

Language: English

Abstract: Objectives: This study was designed to test hypotheses about the prospective association of adolescents' perceptions of discrimination with increases in substance use and the processes that mediate this association. Methods: African American youths residing in rural Georgia (n = 573; mean age = 16.0 years) provided longitudinal data on their experiences with discrimination, substance use, school engagement, and affiliations with substance-using peers. Results: For male youths, perceived discrimination was significantly related to increases in substance use, and, as hypothesized, this association was mediated by the contributions of perceived discrimination to decreases in school engagement and increases in affiliations with substance-using peers. Analyses also indicated that discrimination influences substance use rather than vice versa. Conclusions: Results are consistent with the hypothesis that high levels of discrimination are linked to increases in substance use for African American male adolescents. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Adolescent Attitudes
*Discrimination
*Drug Usage
*Human Sex Differences
*Student Engagement

Source: PsycINFO

Full Text: Available in *fulltext* at [EBSCOhost](#)
Available in *fulltext* at [EBSCOhost](#)
Available in *fulltext* at [ProQuest](#)

44. The New York policy on smoking in addiction treatment: Findings after 1 year.

Citation: American Journal of Public Health, May 2012, vol./is. 102/5(e17-e25), 0090-0036;1541-0048 (May 2012)

Author(s): Guydish, Joseph; Tajima, Barbara; Kulaga, Agatha; Zavala, Roberto; Brown, Lawrence S; Bostrom, Alan; Ziedonis, Douglas; Chan, Mable

Correspondence Address: Guydish, Joseph: Institute for Health Policy Studies, 3333 California St, Suite 265, San Francisco, CA, US, 94118, joseph.guydish@ucsf.edu

Institution: Guydish, Joseph: Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA; Tajima, Barbara: Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA; Kulaga, Agatha: New York University Langone Medical Center, New York, NY; Zavala, Roberto: Addiction Research and Treatment Corporation, Brooklyn, NY; Brown, Lawrence S.: Addiction Research and Treatment Corporation, Brooklyn, NY; Bostrom, Alan: Department of

Epidemiology and Biostatistics, University of California, San Francisco, CA; Ziedonis, Douglas: Department of Psychiatry, University of Massachusetts Medical School, Worcester, MA; Chan, Mable: Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA

Language:

English

Abstract:

Objectives: We assessed changes in smoking prevalence and other measures associated with the July 2008 New York Office of Alcoholism and Substance Abuse Services tobacco policy, which required that all publicly funded addiction treatment programs implement smoke-free grounds, have "no evidence" of smoking among staff, and make tobacco dependence treatment available for all clients. **Methods:** In a random sample of 10 programs, staff and clients were surveyed before the policy and 1 year later. Measures included tobacco-related knowledge, attitudes, and practices used by counselors and received by clients. **Results:** Client smoking decreased from 69.4% to 62.8% ($P = .044$). However, response to the policy differed by program type. Outpatient programs showed no significant changes on any of the staff and client survey measures. In methadone programs, staff use of tobacco-related practices increased ($P < .01$), client attitudes toward tobacco treatment grew more positive ($P < .05$), and clients received more tobacco-related services ($P < .05$). Residential clients were more likely to report having quit smoking after policy implementation (odds ratio = 4.7; 95% confidence interval = 1.53, 14.19), but they reported less favorable attitudes toward tobacco treatment ($P < .001$) and received fewer tobacco-related services from their program ($P < .001$) or their counselor ($P < .001$). **Conclusions:** If supported by additional research, the New York policy may offer a model that addiction treatment systems can use to address smoking in a population where it has been prevalent and intractable. Additional intervention or policy supports may be needed in residential programs, which face greater challenges to implementing tobacco-free grounds. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Addiction
*Drug Rehabilitation
*Government Policy Making
*Smoking Cessation
*Tobacco Smoking

Source:

PsycINFO

Full Text:

Available in *fulltext* at [EBSCOhost](#)

Available in *fulltext* at [EBSCOhost](#)

Available in *fulltext* at [ProQuest](#)

45. Destigmatizing alcohol dependence: The requirement for an ethical (not only medical) remedy.

Citation:

American Journal of Public Health, May 2012, vol./is. 102/5(e5-e8), 0090-0036;1541-0048 (May 2012)

Author(s):

Williamson, Laura

Correspondence Address:

Williamson, Laura: Institute for Applied Health Research, Glasgow Caledonian University, Buchanan House (K306), Glasgow, United Kingdom, G5 0BA, Laura.Williamson@gcu.ac.uk

Institution:

Williamson, Laura: Institute for Applied Health Research, Glasgow Caledonian University, Glasgow

Language:

English

Abstract:

The disease model of alcohol dependence or "alcoholism" is often presented as the linchpin in addressing the condition successfully. It has been argued, for example, that adopting a medical approach will reduce the stigma that impedes the provision and acceptance of treatment. However, the medical paradigm has existed for many years without significantly affecting the negative social attitudes that surround dependence. I argue that a reductive scientific approach is not equipped to address the socioethical tensions that dependence creates. To lessen the stigmatization of dependence, it is

important to integrate ethical analysis into policy debates on the condition. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Rehabilitation](#)
[*Alcoholism](#)
[*Ethics](#)
[*Stigma](#)

Source: PsycINFO

Full Text: Available in *fulltext* at [EBSCOhost](#)
 Available in *fulltext* at [EBSCOhost](#)
 Available in *fulltext* at [ProQuest](#)

46. Oxycontin as currency: Oxycontin use and increased social capital among rural Appalachian drug users.

Citation: Social Science & Medicine, May 2012, vol./is. 74/10(1602-1609), 0277-9536;1873-5347 (May 2012)

Author(s): Jonas, Adam B; Young, April M; Oser, Carrie B; Leukefeld, Carl G; Havens, Jennifer R

Correspondence Address: Havens, Jennifer R.: Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky College of Medicine, 915B South Limestone, Lexington, KS, US, 40502, jennifer.havens@uky.edu

Institution: Jonas, Adam B.: Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky College of Medicine, Lexington, KS; Young, April M.: Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky College of Medicine, Lexington, KS; Oser, Carrie B.: Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky College of Medicine, Lexington, KS; Leukefeld, Carl G.: Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky College of Medicine, Lexington, KS; Havens, Jennifer R.: Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky College of Medicine, Lexington, KS

Language: English

Abstract: Studies have shown that position within networks of social relations can have direct implications on the health behaviors of individuals. The present study examines connections between drug use and individual social capital within social networks of drug users (n = 503) from rural Appalachian Kentucky, U.S.A. Respondent driven sampling was used to recruit individuals age 18 and older who had used one of the following drugs to get high: cocaine, crack, heroin, methamphetamine, or prescription opioids. Substance use was measured via self-report and social network analysis of participants' drug use network was used to compute effective size, a measure of social capital. Drug network ties were based on sociometric data on recent (past 6 month) drug co-usage. Multivariate multi-level ordinal regression was used to model the independent effect of socio-demographic and drug use characteristics on social capital. Adjusting for gender, income, and education, daily OxyContin use was found to be significantly associated with greater social capital, and daily marijuana use was associated with less social capital. These results suggest that in regions with marked economic disparities such as rural Appalachia, OxyContin may serve as a form of currency that is associated with increased social capital among drug users. Interventions focusing on increasing alternate pathways to acquiring social capital may be one way in which to alleviate the burden of drug use in this high-risk population. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cocaine](#)
[*Drug Usage](#)
[*Social Capital](#)

[Drug Abuse](#)
[Social Networks](#)

Source: PsycINFO

47. Attitudes and beliefs related to HIV/AIDS in urban religious congregations: Barriers and opportunities for HIV-related interventions.

Citation: Social Science & Medicine, May 2012, vol./is. 74/10(1520-1527), 0277-9536;1873-5347 (May 2012)

Author(s): Bluthenthal, Ricky N; Palar, Kartika; Mendel, Peter; Kanouse, David E; Corbin, Dennis E; Derose, Kathryn Pitkin

Correspondence Address: Bluthenthal, Ricky N.: Department of Preventive Medicine, Institute for Prevention Research, USC Keck School of Medicine, Soto Street Building ("SSB"), 2001N. Soto Street, MC 9239, Los Angeles, CA, US, 90033, rbluthen@usc.edu

Institution: Bluthenthal, Ricky N.: Institute for Prevention Research and Health Promotion, Department of Preventive Medicine, Keck School of Medicine, University of Southern California, Los Angeles, CA; Palar, Kartika: Pardee RAND Graduate School, Rand Corporation, CA; Mendel, Peter: Health Program, RAND Corporation, CA; Kanouse, David E.: Health Program, RAND Corporation, CA; Corbin, Dennis E.: Social Work Department, California State University Dominguez Hills, Carson, CA; Derose, Kathryn Pitkin: Health Program, RAND Corporation, CA

Language: English

Abstract: HIV-related stigmas have been seen as a barrier to greater religious congregation involvement in HIV prevention and care in the United States and elsewhere. We explored congregational and community norms and attitudes regarding HIV, sexuality, and drug use through a qualitative case study of 14 diverse religious congregations in Los Angeles County, California between December 2006 and May 2008. Data collected included semi-structured interviews with 57 clergy and lay leaders across the congregations, structured observations of congregational activities, review of archival documents, and a questionnaire on congregational characteristics. Across and within congregations, we found a wide range of views towards HIV, people with HIV, and populations at risk for HIV, from highly judgmental and exclusionary, to "loving the sinner, not the sin," to accepting and affirming. Attitudes and norms about HIV, homosexuality, and substance abuse appeared to be related to the type and intensity of congregational HIV-related activities. However, even among the higher activity congregations, we found a range of perceptions, including ones that were stigmatizing. Results suggest that affirming norms and attitudes are not a prerequisite for a congregation to initiate HIV activities, a finding relevant for HIV service providers and researchers seeking to engage congregations on this issue. HIV stigma reduction is not a prerequisite for congregational HIV involvement: both may occur simultaneously, or one before the other, and they dynamically affect each other. Strategies that are congruent with congregations' current levels of comfort and openness around HIV can themselves facilitate a process of attitudinal and normative change. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*AIDS](#)
[*AIDS \(Attitudes Toward\)](#)
[*HIV](#)
[*Religion](#)
[*Urban Environments](#)
[Drug Usage](#)
[Intervention](#)
[Religious Beliefs](#)
[Sexuality](#)

Source: PsycINFO

48. Therapists' impact on the effectiveness of substance abuse treatment: A systematic review.

Original Title:	Terapeutin vaikutus päihdehoidon toimivuuteen. Systemoitu katsaus 2000-luvun tutkimuksiin.
Citation:	Psykologia, 2012, vol./is. 47/1(38-55), 0355-1067 (2012)
Author(s):	Artkoski, Tytti; Kuusisto, Katja; Saarnio, Pekka
Correspondence Address:	Artkoski, Tytti, tytti.artkoski@uta.fi
Institution:	Artkoski, Tytti: School of Social Sciences and Humanities, University of Tampere, Tampere; Kuusisto, Katja: Institute for Advanced Social Research, IASR, University of Tampere, Tampere; Saarnio, Pekka: School of Social Sciences and Humanities, University of Tampere, Tampere
Language:	Finnish
Abstract:	The aim of this study was to review studies of the therapist impact on the effectiveness of substance abuse treatment. A systematic review of studies measuring the therapist effect on substance abuse treatment retention and outcome was conducted. Peer-reviewed articles matching review criteria from the past decade were analyzed for relevant information, such as the therapist (n), the clients (n), most typically used substance and key results. Twenty-two studies matched the criteria. The findings included five categories concerning therapist impact on substance abuse treatment effectiveness: 1) Therapists' professional background, 2) Therapist-targeted interventions, 3) Matching therapists to clients, 4) Therapeutic alliance and 5) Therapeutic style. The key results supported findings from earlier studies. In conclusion, the therapists effect is a crucial factor in effective substance abuse treatment and future research of this area is recommended. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Publication Type:	Journal; Peer Reviewed Journal
Subject Headings:	*Drug Abuse *Drug Rehabilitation *Therapists *Treatment Effectiveness Evaluation
Source:	PsycINFO

49. Reflective listening in motivational interviewing: A technique or a skill?

Original Title:	Reflektointi taitona ja tekniikkana motivoivassa haastattelussa.
Citation:	Psykologia, 2012, vol./is. 47/1(20-37), 0355-1067 (2012)
Author(s):	Rakkolainen, Maria; Ehrling, Leena
Correspondence Address:	Rakkolainen, Maria: School of Social Sciences and Humanities, University of Tampere, Tampere, Finland, 33014, maria.rakkolainen@uta.fi
Institution:	Rakkolainen, Maria: School of Social Sciences and Humanities, University of Tampere, Tampere; Ehrling, Leena: School of Social Sciences and Humanities, University of Tampere, Tampere
Language:	Finnish
Abstract:	Motivational interviewing (MI) is usually studied by coding counselor behavior with a specific coding instrument designed to evaluate and count the counselors' MI-consistent and inconsistent behavior. This study supplemented MITI (Motivational interviewing treatment integrity) coding with Conversation analysis (CA) to explicate why reflections, the fundamental skill in MI, are sometimes difficult to code resulting in low reliability results. The data included the first audiotaped and transcribed encounters of clients with a substance abuse problem at an outpatients clinic. CA results showed that problematic reflections halted the clients' perspective and contributed to the interaction more as a roadblock than as an MI-consistent listening skill. Explicit conclusions for MITI coding improvements are made. The results pave the way for further studies on reflections to

identify the most effective reflective listening skills for improving clients' treatment attendance and the need to focus on efficient means to teach and learn this challenging yet influential method. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Ability Level](#)
[*Counselors](#)
[*Drug Abuse](#)
[*Motivational Interviewing](#)
[*Active Listening](#)

Source: PsycINFO

50. Implementing motivational interviewing in initial sessions with substance abusers.

Original Title: Motivoivan haastattelun toteutuminen päihdehoidon ensitapaamisissa.

Citation: Psykologia, 2012, vol./is. 47/1(4-19), 0355-1067 (2012)

Author(s): Rakkolainen, Maria

Correspondence Address: Rakkolainen, Maria: School of Social Sciences and Humanities, University of Tampere, Tampere, Finland, 33014, maria.rakkolainen@uta.fi

Institution: Rakkolainen, Maria: School of Social Sciences and Humanities, University of Tampere, Tampere

Language: Finnish

Abstract: This study investigated the substance abuse (SU) counselors' adherence to motivational interviewing (MI), a well-known SU method in the Finnish outpatient setting. The data included the first encounters of 16 counselors and their 36 clients with an alcohol or SU problem. The interaction tapes were transcribed and coded with MITI (Motivational Interviewing Treatment Integrity), a method developed for evaluating MI treatment adherence. The reliability of the Finnish version of MITI was shown to be of good quality although MI-Non-Adherent and complex reflection -codes need further improvement. The MI results showed that the counselors' style of interaction adhered to the spirit of MI relatively well. However, the more specific MI methods were implemented more randomly, thus weakening MI treatment integrity in most of the sessions. The results highlight the need for instruments like MITI to ensure objective feedback and close monitoring in training and supervising MI for obtaining good MI treatment fidelity. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Counselors](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Motivational Interviewing](#)

Source: PsycINFO

51. Illicit drug use among hospitality employees.

Citation: International Journal of Hospitality Management, September 2012, vol./is. 31/3(631-632), 0278-4319 (Sep 2012)

Author(s): Pizam, Abraham [Ed]

Institution: Pizam, Abraham: Rosen College of Hospitality Management, University of Central Florida, Orlando, FL

Language: English

Abstract: This issue of International Journal of Hospitality Management focuses on the illicit drug use among hospitality employees. According to Surveys on Drug Use and Health (NSDUHs), food service workers exhibited the highest prevalence of past month illicit drug use and past year illicit drug dependence, among all occupational groups. Amid

these workers, food preparation serving related occupations had the highest prevalence of past month illicit drug use and past year illicit drug dependence. The major industry group with the highest prevalence of past month and past year illicit drug use was accommodations and food services. The sub-industry category of food services and drinking places had the highest prevalence of past month illicit drug use and past year illicit drug dependence. This in comparison to the utilities industry that had the lowest prevalence of past month and past year illicit drug use. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Elsevier Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Business and Industrial Personnel](#)
[*Drug Abuse](#)
[*Drug Dependency](#)
[*Epidemiology](#)
[*Hospitality Industry](#)

Source: PsycINFO

52. Harm reduction and public policy.

Citation: Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.), 2012(339-379) (2012)

Author(s): Walthers, Justin; Weingardt, Kenneth R; Witkiewitz, Katie; Marlatt, G. Alan

Institution: Walthers, Justin: Department of Psychology, Washington State University, Vancouver, WA; Weingardt, Kenneth R.: Center for Health Care Evaluation, VA Palo Alto Health Care System, Menlo Park, CA; Witkiewitz, Katie: Department of Psychology, Washington State University, Vancouver, WA; Marlatt, G. Alan: Addictive Behaviors Research Center, University of Washington, Seattle, WA

Language: English

Abstract: (create) Since the turn of the century, drug control policy in the United States has been characterized primarily by prohibition; the possession, use, and distribution of most psychoactive substances are expressly forbidden by authority of law. The Controlled Substances Act of 1970 (as amended in 1984, 1986, 1988, 1990, 1993, 1996, 2000, 2004, 2005, and 2008) is the controlling national drug legislation of today, and applies to all psychoactive drugs considered dangerous by the government (U.S. Drug Enforcement Agency, 2010). Over the past two decades, governmental attempts to enforce the prohibition of controlled substances have dramatically intensified. The Federal Anti-Drug Abuse Act of 1988 established as a policy goal of the U.S. government the "creation of a drug-free America," and was seen by many as the formal declaration of the "war on drugs." The Anti-Drug Abuse Act of 1988 established an Office of National Drug Control Policy (ONDCP) to set priorities and objectives for national drug control, to promulgate a National Drug Control Strategy on an annual basis, and to oversee this strategy's implementation (see ONDCP, 1997b). In this section, we outline the stated goals of the National Drug Control Strategies over the past two decades and examine a wide variety of data in an effort to determine how effective policy initiatives have been at achieving these goals. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Laws](#)
[*Government Policy Making](#)
[*Harm Reduction](#)
[Drug Abuse](#)

Source: PsycINFO

53. Harm reduction for Asian American and Pacific Islander populations.

Citation: Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.), 2012(291-317) (2012)

Author(s): Osilla, Karen Chan; Wong, Eunice C; Zane, Nolan

Institution: Osilla, Karen Chan: RAND Corporation, Santa Monica, CA; Wong, Eunice C.: RAND Corporation, Santa Monica, CA; Zane, Nolan: Department of Psychology, University of California, Davis, Davis, CA

Language: English

Abstract: (create) The Asian American and Pacific Islander (AAPI) population is anticipated to grow from 15.5 million to 40.6 million by the year 2042, representing one of the fastest-growing groups in the United States (U.S. Census Bureau, 2008). Yet few studies have examined the applicability of existing addiction treatment approaches with AAPIs. Harm reduction is an approach to addiction that is gaining increasing recognition (Marlatt & Witkiewitz, 2002). In contrast to traditional approaches that focus on a single goal of abstinence or the complete cessation of addictive behaviors, harm reduction approaches emphasize the reduction of negative consequences associated with addiction (Denning, 2000; Marlatt, 1998; Tatarsky, 2003). Thus, harm reduction supports multiple client-driven goals, recognizing any gains in individual and community quality of life as treatment successes. As with most other treatment approaches, there has been little empirical investigation on the effectiveness of harm reduction with AAPIs. The purpose of this chapter is to discuss the use of harm reduction with AAPIs. We begin by reviewing the research on addictive behaviors and addiction treatment among AAPIs. We then discuss areas in which cultural mismatches can arise within addiction treatment in general and the applicability of harm reduction principles to the AAPI population. Finally, relapse management techniques are often used in conjunction with a harm reduction philosophy. Based on available research, we describe clinical strategies for adapting relapse management for AAPIs. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Asians](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Harm Reduction](#)
[*Pacific Islanders](#)

Source: PsycINFO

54. Redefining the treatment of dual disorders.

Citation: Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.), 2012(229-243) (2012)

Author(s): Denning, Patt

Institution: Denning, Patt: Harm Reduction Therapy Center, San Francisco, CA

Language: English

Abstract: (create) Despite the enormous literature on dual or co-occurring disorders, there is still no theory of etiology or principles of treatment that have captured the complexity of people who suffer from them. The only consistent theme seems to be an agreement that dually diagnosed people must be fully and permanently abstinent in order to be accurately diagnosed and adequately treated. More than 50% of people who have serious mental health problems also suffer from substance misuse (Drake et al., 2003). This rises to 70% if one includes all psychiatric disorders. Harm reduction psychotherapy (HRP) is a new paradigm. It has emerged over the past 15 years out of the intersection of psychotherapy, public health, and advocacy movements. HRP includes different assessment and treatment strategies than standard addiction treatments. It flows from the belief that clients have the right to address their problems without the imposition of predetermined goals such as abstinence. HRP starts from an understanding that we will seldom have the luxury of a clear psychiatric diagnosis. It is a model that embraces ambiguity and relativity. Our best information comes from our clients. We begin where the client is, take their descriptions of their problems at face value, and use their wisdom to guide the treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Drug Rehabilitation](#)
[*Dual Diagnosis](#)
[*Harm Reduction](#)
[*Psychotherapy](#)
[Drug Abuse](#)
[Mental Disorders](#)
Source: PsycINFO

55. Reducing harm associated with illicit drug use: Opiates, amphetamines, cocaine, steroids, and other substances.

Citation: Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.), 2012(170-200) (2012)
Author(s): Kilmer, Jason R; Cronce, Jessica M; Hunt, Scott B; Lee, Christine M
Institution: Kilmer, Jason R.: Center for the Study of Health and Risk Behaviors, Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA; Cronce, Jessica M.: Center for the Study of Health and Risk Behaviors, Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA; Hunt, Scott B.: School of Psychology, Fielding Graduate University, Santa Barbara, CA; Lee, Christine M.: Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA
Language: English
Abstract: (from the chapter) In the previous edition of this book, Tapert and colleagues (1998) noted that for illicit substance use and abuse, harm reduction strategies could include altering an individual's drug-taking practices or substituting a less harmful substance or the same substance in a less potent form. The goal of this section is to update the reader on research evaluating the efficacy and feasibility of specific harm reduction approaches that was published in the 10 years subsequent to the first edition; however, to set an appropriate foundation for this new information, and to provide continuity between editions, a concise introduction to each featured substance is presented, and the conclusions reached by Tapert and colleagues regarding each harm reduction approach is summarized in the appropriate section. In this chapter, we consider harm reduction efforts with opiates (for which there is perhaps the most empirically evaluated information addressing specific harm reduction strategies), amphetamines, and cocaine. We briefly discuss and consider the harm reduction strategies for misuse of prescription drugs, hallucinogens, and steroids. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Amphetamine](#)
[*Cocaine](#)
[*Drug Abuse](#)
[*Harm Reduction](#)
[*Opiates](#)
[Drug Rehabilitation](#)
[Hallucinogenic Drugs](#)
[Prescription Drugs](#)
[Steroids](#)
Source: PsycINFO

56. Harm reduction and cannabis.

Citation: Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.), 2012(149-169) (2012)
Author(s): Roffman, Roger A; Stephens, Robert S

Institution: Roffman, Roger A.: School of Social Work, University of Washington, Seattle, WA; Stephens, Robert S.: Department of Psychology, Virginia Polytechnic Institute and State University, Blacksburg, VA

Language: English

Abstract: (from the chapter) We begin this chapter by acknowledging a number of characteristics unique to cannabis, both to the drug itself and to the societal context in which its use is debated when the topic of harm reduction is raised. Then, following a brief summary of the prevalence of cannabis use, we review current evidence concerning adverse health, cognitive, and behavioral effects associated with cannabis consumption. The next section discusses interventions, both to prevent harm and to ameliorate cannabis-related problems that already have occurred. We review the outcomes of behavioral intervention trials with adults and adolescents experiencing cannabis use disorders, and tests of brief "check-up" interventions tailored for users who, while having some concerns about the effects they're experiencing, are not committed to quitting or reducing use. A final part of this section pertains to harm reduction advice for cannabis users, including discussion of suggestions disseminated by organizations in the cannabis policy reform movement. Cannabis control policy is the focus of the next section, with a particular emphasis on the harm reduction reasoning underlying alternate policy models. The chapter concludes with recommendations for future research. Before continuing, a caveat is in order. The charge to the authors is to consider strategies to reduce or avoid cannabis-related harm. Nonetheless, it's important to note that a balanced review of cannabis would acknowledge the drug's benefits (see Melamede, 2005, for a review of functions of the endocannabinoid system). (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Cannabis](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Harm Reduction](#)
[Drug Laws](#)
[Government Policy Making](#)
[Intervention](#)

Source: PsycINFO

57. Harm reduction for alcohol problems.

Citation: Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.), 2012(63-106) (2012)

Author(s): Larimer, Mary E; Dillworth, Tiara M; Neighbors, Clayton; Lewis, Melissa A; Montoya, Heidi D; Logan, Diane E

Institution: Larimer, Mary E.: Center for the Study of Health and Risk Behaviors, Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA; Dillworth, Tiara M.: Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA; Neighbors, Clayton: Department of Psychology, University of Houston, Houston, TX; Lewis, Melissa A.: Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA; Montoya, Heidi D.: Department of Veterans Affairs, Puget Sound Health Care System, Seattle, WA; Logan, Diane E.: Addictive Behaviors Research Center, University of Washington, Seattle, WA

Language: English

Abstract: (create) While the United States has a long history of treating alcohol use problems based on the disease model of alcoholism, the idea behind harm reduction for alcohol use began in the 1960s and has evolved through the years, influencing the development of several different prevention and treatment approaches as well as public policy. We provide information regarding the epidemiology and consequences (both negative and positive) of alcohol and a brief history of alcohol harm reduction in the United States. This is followed by an updated review of the recent research related to this topic. In particular, we review progress in development of appropriate prevention and treatment approaches

based on the increasing sophistication of basic, behavioral, and pharmacological research on alcohol, and review the recent literature documenting the benefits of these therapies on both abstinence and reduced drinking outcomes. We review the research on brief interventions and harm reduction strategies in college students, as well as workplace and medical settings. We also discuss the variety of opinions regarding alcohol control policies and their alignment with harm reduction philosophy. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Alcohol Rehabilitation](#)
[*Alcoholism](#)
[*Harm Reduction](#)
[Drug Abuse Prevention](#)
[Epidemiology](#)
[Intervention](#)
[Treatment](#)

Source: PsycINFO

58. Harm reduction psychotherapy.

Citation: Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.), 2012(36-60) (2012)

Author(s): Tatarsky, Andrew; Kellogg, Scott

Institution: Tatarsky, Andrew: Center for Integrative Psychotherapy for Substance Misuse, New York, NY; Kellogg, Scott: Schema Therapy Institute, New York University, New York, NY

Language: English

Abstract: (from the chapter) Harm reduction is an exciting new development in the addiction treatment field that we believe has great potential to increase the effectiveness of efforts to heal substance users across the spectrum of severity. We are both clinical psychologists who chose to specialize in the treatment of substance users while completing our clinical training. Over time, it became increasingly clear to us that the majority of patients were not being helped by the traditional approaches, and that many substance-using individuals did not seem to be interested in what our programs were offering. We believe that our experiences are not uncommon for workers in the field of substance use treatment, and, like many, we began to search for alternative ways of understanding substance use problems and for treatment approaches that offered more hope. Each of us, via different paths, ultimately discovered harm reduction as an alternative paradigm that we believe points the way toward many new treatment innovations that hold great promise for more effectively attracting, retaining, and fostering positive change in people with substance use problems. This chapter provides an overview of the harm reduction model and how we and a growing group of colleagues around the country have been applying the harm reduction paradigm to substance use treatment and psychotherapy-applications that we believe are essential ingredients in the effective treatment of this population. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Harm Reduction](#)
[*Psychotherapy](#)

Source: PsycINFO

59. Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.).

Citation: Harm reduction: Pragmatic strategies for managing high-risk behaviors (2nd ed.), 2012 (2012)

Author(s): Marlatt, G. Alan [Ed]; Larimer, Mary E [Ed]; Witkiewitz, Katie [Ed]

Institution: Marlatt, G. Alan: Addictive Behaviors Research Center, University of Washington, Seattle, WA; Larimer, Mary E.: Addictive Behaviors Research Center, University of Washington, WA; Witkiewitz, Katie: Department of Psychology, Washington State University Vancouver, Vancouver, WA

Language: English

Abstract: (from the jacket) From addictions treatment pioneer G. Alan Marlatt and associates, this is the authoritative work on harm reduction: its principles, strategies, applications, and evidence base. Contributors present innovative programs that have been developed and tested for a range of high-risk behaviors. Extensively revised, the second edition reflects significant advances in research and clinical practice, as well as growing professional acceptance of the harm reduction model. It features new chapters on additional populations and substances, treatment of dual disorders, and harm reduction psychotherapy. Part I describes the history and current status of harm reduction and reviews psychotherapeutic models that incorporate it, with attention to both their conceptual underpinnings and practical clinical techniques. Part II turns the lens on specific substances of abuse-including alcohol, tobacco, and illicit drugs, with a new chapter on cannabis-as well as dual disorders and risky sexual behaviors. The book explores science-based alternatives to abstinence-only treatments, from psychotherapy, counseling, and brief interventions to pharmacological strategies, needle-exchange programs, and other community- and population-based programs. Part III showcases culturally competent treatment approaches for underserved communities. The updated chapter on interventions for African Americans is augmented by new chapters on Hispanic and Asian American populations and adolescent drinkers. Rounding out the volume, Part IV puts harm reduction in the context of current United States drug control policy. Comprehensive, timely, and rich with clinical insights, this book is essential reading for clinical psychologists, social workers, substance abuse counselors, psychiatrists, and other clinicians who treat clients with addiction and substance use problems; public health professionals; and graduate students and trainees. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*At Risk Populations](#)
[*Drug Abuse](#)
[*Harm Reduction](#)
[*Risk Taking](#)
[*Treatment](#)
[Cultural Sensitivity](#)
[Drug Laws](#)
[Government Policy Making](#)

Source: PsycINFO

60. Case management in substance abuse treatment.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(402-421) (2012)

Author(s): Zweben, Allen

Institution: Zweben, Allen: School of Social Work, Columbia University, New York, NY

Language: English

Abstract: (from the chapter) Case management is an approach that is used across health care, mental health, and social service settings to help clients gain access to services. In the addictions field, case management is especially important for those deemed to be at risk for early relapse. This chapter provides the rationale and support for case management in the treatment of addiction problems. In addition to discussing practical case management strategies, it provides case examples to show how these strategies can be applied to resolve issues that often arise in substance use treatment. The chapter shows how case management can be incorporated into an integrated system of care to serve a liaison function between services that address different aspects of substance use problems. Finally, the chapter ends with a presentation of issues that need to be investigated for the

improvement of case management services. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Case Management](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Health Care Services](#)
[*Health Service Needs](#)
[Addiction](#)
[Clients](#)
[Health Care Delivery](#)
[Mental Health](#)
[Social Services](#)

Source: PsycINFO

61. Addressing substance abuse in primary care settings: Screening and brief intervention.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(355-375) (2012)

Author(s): Barry, Kristen L; Blow, Frederic C

Institution: Barry, Kristen L.: Department of Psychiatry, University of Michigan Medical School, Ann Arbor, MI; Blow, Frederic C.: Department of Psychiatry, University of Michigan Medical School, Ann Arbor, MI

Language: English

Abstract: (from the chapter) Alcohol and drug abuse, including abuse of psychoactive prescription medications, are important and growing concerns in the United States. Because substance use is associated with a number of physical, mental, social, and legal consequences it is important to train health care personnel in primary clinical settings to recognize and treat these issues. Healthy People 2000 guidelines (U.S. Department of Health and Human Services, 1990) first recommended increasing the proportion of physical and mental health providers who screen and provide advice for alcohol and drug problems. Indeed, practitioners across specialties, including primary and emergency care personnel, have a crucial role in identifying and treating at-risk and problem substance use. To assist in this task, brief screening and intervention techniques have been developed for use within the limited time constraints of most medical settings. A comprehensive model for addressing alcohol and drug use in medical settings includes screening, brief intervention, and referral to treatment (SBIRT). SBIRT offers opportunities for early detection, focused motivational enhancement, and targeted encouragement to seek needed substance abuse treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Intervention](#)
[*Primary Health Care](#)
[*Professional Competence](#)
[*Screening](#)
[At Risk Populations](#)
[Drug Rehabilitation](#)
[Medical Personnel](#)
[Professional Referral](#)

Source: PsycINFO

62. Integrating psychotherapy and pharmacotherapy in substance abuse treatment.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(319-354) (2012)

Author(s): Carroll, Kathleen M; Kiluk, Brian D

Institution: Carroll, Kathleen M.: Department of Psychiatry, Yale University School of Medicine, West Haven, CT; Kiluk, Brian D.: Department of Psychiatry, Yale University School of Medicine, West Haven, CT

Language: English

Abstract: (from the chapter) This chapter (1) describes differences in the roles and functions of psychotherapy and pharmacotherapy in the treatment system; (2) discusses the potential advantages of the two forms of treatment alone and in combination; and (3) concentrates on the pharmacological treatment of alcohol and opioid dependence (the only classes of substance dependence for which effective and approved pharmacotherapies exist), with an emphasis on describing how outcomes can be enhanced and extended through combining them with psychotherapy. This chapter is concerned with the practical integration of pharmacotherapy and psychotherapy. It should be noted that in this chapter "psychotherapy" is used as a general term for several types of psychosocial treatment, including individual and group counseling, psychotherapy, and behavior therapy. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Drug Therapy](#)
[*Multimodal Treatment Approach](#)
[*Psychotherapy](#)
[*Treatment Outcomes](#)
[Alcoholism](#)
[Drug Rehabilitation](#)
[Opiates](#)
[Pharmacology](#)

Source: PsycINFO

63. Neurobiological bases of addiction treatment.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(281-318) (2012)

Author(s): Chung, Philip H; Ross, Julie D; Wakhlu, Sidarth; Adinoff, Bryon

Institution: Chung, Philip H.: Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas, TX; Ross, Julie D.: Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas, TX; Wakhlu, Sidarth: VA North Texas Health Care System, TX; Adinoff, Bryon: VA North Texas Health Care System, TX

Language: English

Abstract: (from the chapter) Over the past two decades stunning progress has been made in understanding the psychopathology of addiction. These advances have identified changes in neural pathways that evolve following chronic substance use. Substance-induced alterations in brain functioning have both physiological (tolerance and dependence) and behavioral consequences, such as craving and the inability to control the impulse to use drugs despite adverse consequences—the defining characteristic of addiction. On the basis of this medical model of addiction, several medications have been developed to assist in normalizing the brain chemistry disrupted by chronic substance use or aid in the avoidance of substance use. By providing this support, new medications allow addicted individuals to focus on their psychosocial treatment and work a program of recovery. This chapter first presents the basics of brain function, including the neurotransmitters and pathways involved in substance abuse. This understanding provides the foundation for the subsequent presentation of medications used to treat addictive disorders. This chapter focuses on medications approved by the U.S. Food and Drug Administration (FDA) for alcohol dependence and opioid dependence with an overview of promising new developments for stimulant and cannabis dependence. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Addiction](#)

*Drug Abuse
 *Neurobiology
 *Psychopathology
 *Treatment
 Alcoholism
 Brain
 Drug Rehabilitation
 Drug Therapy
 Medical Model
 Neural Pathways
 Neurotoxicity
 Neurotransmitters
 Opiates

Source: PsycINFO

64. Family therapy techniques for substance abuse treatment.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(256-280) (2012)

Author(s): Lam, Wendy K. K.; O'Farrell, Timothy J; Birchler, Gary R

Institution: Lam, Wendy K. K.: Duke Translational Medicine Institute, Duke School of Medicine, Chapel Hill, NC; O'Farrell, Timothy J.: Families and Addiction Program, Veterans Affairs Boston Healthcare System, Brockton, MA

Language: English

Abstract: (from the chapter) Over the last half century the family treatment model has been rapidly accepted as a critical component of substance abuse treatment. During the last three decades, family-based assessment and intervention has become widely viewed as part of standard care for alcoholism and drug abuse. In fact, many have argued that the only reason not to include family members in the treatment of a substance-abusing patient is refusal by the patient or members of the family involved. This chapter provides an overview of different systems and techniques of family therapy commonly used to treat alcoholism and drug abuse. These interventions are as diverse as the variety of family functioning theories from which they evolved. In this chapter, we focus on the use of family-involved treatments to (1) help the family cope when the substance abuser refuses to get help; (2) help the family initiate change for loved ones who are resistant to seeking help; and (3) facilitate treatment and aid recovery when the substance abuser has sought help. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Drug Abuse
 *Drug Rehabilitation
 *Family Intervention
 *Family Relations
 *Family Therapy
 Family Members
 Help Seeking Behavior
 Treatment
 Clinical Models

Source: PsycINFO

65. Theoretical bases of family approaches to substance abuse treatment.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(224-255) (2012)

Author(s): McCrady, Barbara S; Ladd, Benjamin O; Hallgren, Kevin A

Institution: McCrady, Barbara S.: Department of Psychology, Center on Alcoholism, Substance Abuse, and Addictions, University of New Mexico, Albuquerque, NM; Ladd, Benjamin O.: Department of Psychology, Center on Alcoholism, Substance Abuse, and Addictions, University of New Mexico, Albuquerque, NM; Hallgren, Kevin A.: Department of

Psychology, Center on Alcoholism, Substance Abuse, and Addictions, University of New Mexico, Albuquerque, NM

- Language:** English
- Abstract:** (from the chapter) Social support is an important factor in the development and resolution of substance use disorders (SUDs). Social support is usually thought of in broad terms because it is likely to be a multidimensional construct, and historically has not been well defined within the substance abuse field. As a result, attempts have been made to narrow in on the sources of social support that are most influential. Most research shows that the family has a different impact on SUDs compared to the larger social network. Because evidence suggests a strong influence of family, family models have received considerable attention in the substance abuse field. This chapter briefly describes the historical roots of family approaches to conceptualizing the etiology, maintenance, and treatment of SUDs. The chapter focuses specifically on alcohol abuse and dependence, given the high prevalence of and abundant research in alcohol use disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
- Publication Type:** Book; Edited Book
- Subject Headings:** [*Alcohol Abuse](#)
[*Family](#)
[*Social Networks](#)
[*Social Support](#)
[*Treatment](#)
[Alcoholism](#)
[Drug Rehabilitation](#)
[Family Intervention](#)
[Family Relations](#)
[Theories](#)
- Source:** PsycINFO

66. Facilitating 12-step recovery from substance abuse.

- Citation:** Treating substance abuse: Theory and technique (3rd ed.), 2012(191-223) (2012)
- Author(s):** Nowinski, Joseph
- Institution:** Nowinski, Joseph: Correctional Managed Health Care Division, University of Connecticut Health Center, Tolland, CT
- Language:** English
- Abstract:** (from the chapter) Twelve-step-facilitation (TSF) is an intervention for facilitating recovery from alcohol or drug abuse or addiction. TSF can be used by practitioners who do not necessarily have extensive knowledge of or experience with 12-step fellowships such as Alcoholics Anonymous (AA) or Narcotics Anonymous (NA) but who wish to actively encourage their patients' use of such programs. Research suggests that treatment, in tandem with AA or NA attendance, is a powerful intervention. Although 12-step fellowships have been a mainstay of addictions treatment for many years, an individual counseling approach utilizing these principles has only recently been developed. TSF can help to engage a person in the beginning steps and to encourage them to join a 12-step fellowship. TSF can be used by practitioners who do not necessarily have extensive experience with 12-step fellowships, but who wish to connect clients to these important services. This chapter presents the TSF sequence, including core, elective, and conjoint components. It also highlights the philosophical connection between TSF and 12-step ideas, such as locus of change, acceptance, and surrender. Whether used alone or in conjunction with other approaches, TSF strategies can provide an important bridge between individual psychotherapy and 12-step practices. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
- Publication Type:** Book; Edited Book
- Subject Headings:** [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Individual Psychotherapy](#)

*Twelve Step Programs
Addiction
Alcohol Abuse
Alcoholics Anonymous
Intervention

Source: PsycINFO

67. Theory of 12-step-oriented treatment.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(167-190) (2012)

Author(s): Wallace, John

Institution: Wallace, John: Private Practice, Rochester, MA

Language: English

Abstract: (from the chapter) The 12-step approach to the origins, maintenance, and modification of addictive behaviors has long constituted an informal bio-psycho-social-spiritual model of addiction. Although 12-step talk uses layman's terms and not technical psychology language, it is a rich language full of references to the physical, psychological, social, and spiritual aspects of human beings. Despite considerable variability among 12-step-oriented treatment programs, it is possible to discern some common characteristics. If one strips away the ambiguities and complexities of the 12-steps, a set of actions emerge that may be strongly related to the effectiveness of 12-step programs. This chapter focuses on these common characteristics and the fundamental principles of 12-step-oriented treatment. In addition, the chapter presents evidence for the effectiveness of 12-step-oriented treatment and explores possible reasons for its effectiveness. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Addiction
*Biopsychosocial Approach
*Spirituality
*Twelve Step Programs
Behavior Modification
Drug Rehabilitation
Theories
Treatment Outcomes

Source: PsycINFO

68. Behavioral treatment techniques for psychoactive substance use disorders.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(138-166) (2012)

Author(s): Marinchak, James S; Morgan, Thomas J

Institution: Marinchak, James S.: Graduate School of Applied and Professional Psychology, Rutgers, The State University of New Jersey, Piscataway, NJ; Morgan, Thomas J.: Graduate School of Applied and Professional Psychology, Rutgers, The State University of New Jersey, Piscataway, NJ

Language: English

Abstract: (from the chapter) Behaviorally based approaches are among the best supported models for addictions treatment. The behavioral model, with its emphasis on assessment and evaluation, lends itself well to studies of effectiveness. In addition, the health care system continues to demand accountability and quality treatment, and behavioral treatments are a good match given this climate. Whether working with substance abuse patients or with a general psychiatric population, there are several essential tasks that the behaviorally oriented clinician must accomplish during treatment. These tasks include (1) developing a collaborative working relationship, (2) enhancing patient motivation to engage in treatment exercises both within and outside therapy, (3) using a functional analysis to make a thorough individualized assessment of the patient's presenting problem/s, (4)

developing the patient's treatment goals and assisting in their implementation, (5) evaluating treatment progress, and (6) providing information for long-term recovery strategies, including the warning signs of relapse. This chapter explores: Basic Tasks of All Behavioral Interventions; Specific Behavioral Treatment Techniques and Interventions; and Specific Issues in Implementing Substance Abuse Treatment from a Behavioral Perspective (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Behavior Therapy](#)
[*Behaviorism](#)
[*Drug Abuse](#)
[*Intervention](#)
[*Psychotherapeutic Techniques](#)
 Behavioral Assessment
 Drug Addiction
 Drug Rehabilitation
 Treatment

Source: PsycINFO

69. Cognitive-behavioral theories of substance abuse.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(113-137) (2012)

Author(s): Rotgers, Frederick

Institution: Rotgers, Frederick: Graduate School of Applied and Professional Psychology, Rutgers, The State University of New Jersey, Piscataway, NJ

Language: English

Abstract: (from the chapter) Cognitive-behavioral (CB) theories of treatment for psychoactive substance use disorders (PSUDs) are based on principles of learning and behavior change. CB strategies are part of the larger group of techniques that fall under the rubric of "behavior therapy." The last decade has been a period of "normal science" for CB theory. Recent advances have included increased attention to the importance of the therapeutic relationship in CB theory and on the use of CB approaches in combination with other approaches, such as motivational interviewing, pharmacotherapy, mindfulness, and contingency management. This chapter begins by discussing basic assumptions of CB theory, followed by a brief outline of the processes presumed to operate in treatment of PSUDs. This review is followed by a consideration of the etiology, maintenance, and client characteristics that inform treatment from a CB perspective. Discussion then proceeds to the tasks that CB-oriented clinicians attempt to accomplish in treatment. The chapter concludes with a review of the advantages and disadvantages of CB theories of PSUDs. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Behavior Change](#)
[*Cognitive Behavior Therapy](#)
[*Drug Abuse](#)
[*Theories](#)
[*Therapeutic Processes](#)
 Behavior Therapy
 Drug Rehabilitation
 Learning

Source: PsycINFO

70. Contingency management in substance abuse treatment.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(81-112) (2012)

Author(s): Dallery, Jesse; Meredith, Steven E; Budney, Alan J

Institution: Dallery, Jesse: Department of Psychology, University of Florida, Gainesville, FL; Meredith, Steven E.: Department of Psychology, University of Florida, Gainesville, FL; Budney, Alan J.: Department of Psychiatry and Behavioral Sciences, College of Medicine, University of Arkansas for Medical Sciences, Little Rock, AR

Language: English

Abstract: (from the chapter) Individuals who seek treatment for substance abuse problems can be difficult to engage in treatment. Even when clients make initial progress, frequently their motivation wanes and relapse occurs. Contingency management (CM) can facilitate robust change in this challenging clinical population. A large body of literature examining CM across a range of drug classes and clinical populations provides compelling empirical support for the efficacy of this treatment. A recent meta-analysis of CM effects on drug abstinence concluded that the data "provide strong support for CM as being among the more effective approaches to promoting abstinence during and after the treatment of drug dependence disorders" (Prendergast, Podus, Finney, Greenwell, & Roll, 2006, p. 1556). In this chapter, we describe how CM has been implemented in a variety of research and clinical settings. We also discuss innovations in CM and how these innovations can overcome some of the major obstacles associated with disseminating this evidence-based treatment. Finally, we provide guidelines and recommendations about delivering CM in the clinic. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Behavior Change](#)
[*Contingency Management](#)
[*Drug Abuse](#)
[*Treatment Guidelines](#)
[*Treatment Outcomes](#)
[Clinical Practice](#)
[Drug Rehabilitation](#)
[Evidence Based Practice](#)
[Relapse Prevention](#)
[Treatment](#)

Source: PsycINFO

71. The behavioral economics of substance abuse.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(48-80) (2012)

Author(s): Murphy, James G; MacKillop, James; Vuchinich, Rudy E; Tucker, Jalie A

Institution: Murphy, James G.: Department of Psychology, University of Memphis, Memphis, TN; MacKillop, James: Department of Psychology, University of Georgia, Athens, GA; Vuchinich, Rudy E.: Department of Veterans Affairs, Residential Rehabilitation Treatment Program, Tuscaloosa, AL; Tucker, Jalie A.: School of Public Health, University of Alabama at Birmingham, Birmingham, AL

Language: English

Abstract: (from the chapter) This chapter explores the basic theory and research that underlies behavioral treatment approaches such as the community reinforcement approach (CRA) and contingency management (CM). These treatments attempt to reduce substance abuse by manipulating one or more basic behavioral mechanisms (e.g., response cost or drug price, alternative reinforcement, or alternative reward delay) that have been shown to influence substance use in laboratory research. Among substance abuse treatments, CM is somewhat unique in that it originated from experimental psychology rather than from the psychotherapy literature or from cultural and spiritual ideas about addictive behavior. In this chapter, we show how the underlying "matching law" theory developed, discuss some of the conceptual innovations produced by this theory, and present some ways that these innovations connect with behavioral economics. We then present the basic concepts and empirical relations in the behavioral economics of substance abuse, with an emphasis on the role of drug price, alternative reinforcement, and temporal discounting on individuals' drug use patterns. We highlight several recent studies that suggest that these variables

may be critically related to the process of changing addictive behavior patterns. We conclude with a brief introduction to neuroeconomics, an emerging field that bridges behavioral economics and cognitive neuroscience. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Contingency Management](#)
[*Drug Abuse](#)
[*Experimental Psychology](#)
[*Theories](#)
[*Behavioral Economics](#)
[Drug Rehabilitation](#)
[Reinforcement](#)
[Treatment](#)
Source: PsycINFO

72. Motivational interviewing in practice.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(28-47) (2012)
Author(s): Tooley, Erin M; Moyers, Theresa B
Institution: Tooley, Erin M.: Department of Psychology, University of New Mexico, Albuquerque, NM; Moyers, Theresa B.: Department of Psychology, Center on Alcoholism, Substance Abuse, and Addictions, University of New Mexico, Albuquerque, NM
Language: English
Abstract: (from the chapter) Motivational interviewing (MI) originated in the 1980s as a treatment for substance abuse patients. At the time, it stood in stark contrast to many contemporary treatments that emphasized confrontation in response to client resistance or "denial". In contrast to this approach, Miller and Rollnick (2002) conceptualized client resistance and motivation as the product of an interaction between therapist and client. A therapist using MI influences the interaction by seeking to minimize the client's natural resistance to change. A single session of MI has been found to be effective as an introduction to other types of substance abuse treatment in terms of enhancing client motivation, treatment retention, and outcome. Research on MI has focused increasingly on potential mechanisms of change that might lead to more favorable client outcomes. One candidate is a client's verbalization of "change talk," defined as language that expresses movement toward changing a particular problematic behavior. This chapter explores the theory of MI while focusing on the relational components, technical components, training and theoretical implications of MI. The chapter concludes with a hypothetical case example. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Behavior Change](#)
[*Drug Abuse](#)
[*Motivational Interviewing](#)
[*Therapeutic Processes](#)
[Clinical Practice](#)
[Drug Rehabilitation](#)
[Language](#)
[Motivation](#)
[Theories](#)
Source: PsycINFO

73. Theories of motivation and addictive behavior.

Citation: Treating substance abuse: Theory and technique (3rd ed.), 2012(9-27) (2012)
Author(s): Rose, Gary S; Walters, Scott T

Institution: Rose, Gary S.: Department of Clinical Psychology, Massachusetts School of Professional Psychology, Bedford, MA; Walters, Scott T.: School of Public Health, University of North Texas Health Science Center, Fort Worth, TX

Language: English

Abstract: (from the chapter) This chapter discusses motivational theories of addiction. Our goal is to explain why people use substances (sometimes despite their best interests) and the conditions under which people are more likely to make changes. The chapter begins with a review of motivational theories of addiction, in particular those that help explain the paradox of drug use despite an array of problems. We then discuss theories of motivational change, in particular focusing on factors that may make change more likely to "stick." Finally, we discuss the way that motivation connects to language, and how counselor and client words can shift the balance toward change. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Addiction](#)
[*Behavior Change](#)
[*Motivation](#)
[*Theories](#)
[*Therapeutic Processes](#)
[Drug Rehabilitation](#)
[Drug Usage](#)
[Language](#)
[Motivational Interviewing](#)
[Readiness to Change](#)

Source: PsycINFO

74. Treating substance abuse: Theory and technique (3rd ed.).

Citation: Treating substance abuse: Theory and technique (3rd ed.)., 2012 (2012)

Author(s): Walters, Scott T [Ed]; Rotgers, Frederick [Ed]

Institution: Walters, Scott T.: School of Public Health, University of North Texas Health Science Center, TX; Rotgers, Frederick: Program for Motivation and Change, Graduate School of Applied and Professional Psychology, Rutgers, The State University of New Jersey, NJ

Language: English

Abstract: (from the jacket) Widely adopted, this state-of-the-art work is grounded in the best available knowledge about substance abuse and its treatment. The editors and contributors are leading authorities who provide a complete introduction to each of today's major evidence-based treatment approaches—from conceptual underpinnings to clinical applications. The third edition has been revised and updated to reflect significant advances in research, theory, and technique. Entirely new chapters cover the biology of substance use disorders, treatment in primary care settings, and case management. The third edition retains the structure that makes the book so popular as a course text and practitioner resource. Following an introductory overview, paired chapters focus respectively on the theory and practice of each approach, including motivational, contingency management, cognitive-behavioral, 12-step, family, and pharmacological models. Theory chapters explain basic assumptions about how people develop, maintain, and recover from substance use disorders and concisely review the research support for each approach. Practice chapters then offer a start-to-finish view of treatment, covering such crucial topics as the therapeutic relationship, assessment procedures, goal setting, the sequencing of interventions, how "denial" and "resistance" are addressed, the role of self-help groups, and strategies for preventing and dealing with relapse. Illustrative case examples are included. The volume concludes with three chapters on integrating different techniques to meet patients' needs in a range of clinical settings. Written for a broad audience, this book is an essential text for courses in substance abuse treatment and addiction counseling. Experienced substance abuse clinicians—including clinical psychologists, clinical social workers, psychiatric nurses, counselors, and

psychiatrists-will find it a valuable reference for staying up to date on current treatment approaches. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Evidence Based Practice](#)
[*Psychological Theories](#)
[*Treatment](#)
[*Clinical Models](#)
 Addiction
 Case Management
 Drug Rehabilitation
 Measurement
 Mental Health Services
 Psychotherapeutic Processes
 Psychotherapeutic Techniques

Source: PsycINFO

75. Case study: Promoting community resilience with local values-Greenland's Paamiut Asasara.

Citation: The social ecology of resilience: A handbook of theory and practice., 2012(387-397) (2012)

Author(s): Berliner, Peter; Larsen, Line Natascha; de Casas Soberon, Elena

Correspondence Address: Berliner, Peter: Department of Education, University of Aarhus, Copenhagen, Denmark, Peer@dpu.dk

Institution: Berliner, Peter: Department of Education, University of Aarhus, Copenhagen; Larsen, Line Natascha: Department of Psychology, University of Copenhagen, Copenhagen; de Casas Soberon, Elena: Department of Psychoeducation, University of Cuauhtemoc, Aguascalientes

Language: English

Abstract: (from the introduction) This chapter provides a case study of Greenland's Paamiut Asasara, a program to promote community resilience using local values. This chapter shows how one community facing high rates of crime, violence, suicide, drug abuse and child neglect were able to address these social problems by strengthening community-wide resilience. Interventions included the revitalization of the local culture, shared activities, the building of social networks, and opening up opportunities for creative self-expression. The chapter reports at length on the participants' descriptions of the changes they experienced and describes differences in the community at large. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Community Development](#)
[*Resilience \(Psychological\)](#)
[*Social Networks](#)
[*Sociocultural Factors](#)
[*Behavioral Ecology](#)
 Child Neglect
 Community Services
 Crime
 Drug Abuse
 Social Support
 Suicide
 Violence

Source: PsycINFO

76. Comorbidity between attention deficit/hyperactivity disorder and substance use disorders: Evidence from animal models.

Original Title: Comorbidade entre o transtorno de deficit de atencao/ hiperatividade e o abuso e dependencia de alcool e outras drogas: Evidencias por meio de modelos animais.

Citation: Revista Brasileira de Psiquiatria, June 2011, vol./is. 33/2(203-208), 1516-4446;1809-452X (Jun 2011)

Author(s): Vendruscolo, Leandro F; Takahashi, Reinaldo N

Correspondence Address: Takahashi, Reinaldo N.: Departamento de Farmacologia, Universidade Federal de Santa Catarina, Florianopolis, Brazil, 88049-900, takahashi@farmaco.ufsc.br

Institution: Vendruscolo, Leandro F.: Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA; Takahashi, Reinaldo N.: Departamento de Farmacologia, Centro de Ciencias Biologicas, Universidade Federal de Santa Catarina (UFSC), Florianopolis

Language: Portuguese

Abstract: Objective: To describe some recent theories regarding the comorbidity between attention deficit/hyperactivity disorder and substance use disorders and discuss the utility of using spontaneously hypertensive rats (an animal model of attention deficit/hyperactivity disorder) for the study of attention deficit/ hyperactivity disorder and substance use disorders comorbidity. Method: We compiled the main results of studies investigating the behavioral effects of drugs of abuse in spontaneously hypertensive rats. Results and Discussion: Spontaneously hypertensive rats, in addition to expressing the main features of attention deficit/hyperactivity disorder (impulsivity, hyperactivity, and attention deficit), appear to be more sensitive to psychostimulants, cannabinoids, and opioids and drink large amounts of alcohol. Repeated treatment of spontaneously hypertensive rats with methylphenidate (a first-choice drug for the treatment of attention deficit/hyperactivity disorder) or exposure to an enriched environment during adolescence resulted in an increase or decrease, respectively, in alcohol consumption in adulthood. These results suggest that environmental factors can either favor or confer resistance to attention deficit/hyperactivity disorder and substance use disorders comorbidity. Although research is at the very early stage in this field, spontaneously hypertensive rats appear to be a useful animal model for the study of attention deficit/hyperactivity disorder and substance use disorders comorbidity. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Animal Models](#)
[*Attention Deficit Disorder with Hyperactivity](#)
[*Comorbidity](#)
[*Drug Abuse](#)
[*Drug Therapy](#)
[Rats](#)

Source: PsycINFO

77. Alcohol consumption in young college students.

Original Title: Consumo de alcohol en jovenes universitarios.

Citation: Avances en Psicologia Latinoamericana, June 2011, vol./is. 29/1(77-97), 1794-4724;2145-4515 (Jun 2011)

Author(s): Salcedo Monsalve, Alejandra; Palacios Espinosa, Ximena; Fernanda Espinosa, Angela

Correspondence Address: Salcedo Monsalve, Alejandra: Programa de Psicologia, Escuela de Medicina y Ciencias de la Salud, Universidad del Rosario, Bogota, Colombia, 24 N 63C-69, alejandra.salcedo@urosario.edu.co

Institution: Salcedo Monsalve, Alejandra: Universidad del Rosario, Bogota; Palacios Espinosa, Ximena: Universidad del Rosario, Bogota; Fernanda Espinosa, Angela: Universidad del Rosario, Bogota

Language: Spanish

Abstract: Descriptive Cross-sectional study involving 787 students from a private university in Bogota. Its objectives were to determine the alcohol consumption prevalence, alcoholism and risk of alcoholism and determine the current pattern of alcohol consumption. A survey-which included the CAGE index- was used to collect the data. A prevalence of alcoholism of 23%, and of risk of alcoholism of 15% were found. Results show that alcohol consumption in university students begins in high school and it is a problematic conduct that it is worth being enlarged and analyzed in greater detail including other variables and perfecting the diagnosis of alcoholism and its risk in order to achieve early identification and intervention. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*College Students](#)
[*Intervention](#)
[*Risk Factors](#)

Source: PsycINFO

78. Substance abuse and the effective counselor.

Citation: Foundations of mental health counseling (4th ed.), 2011(227-251) (2011)

Author(s): Borsos, David

Institution: Borsos, David: Chestnut Hill College, Philadelphia, PA

Language: English

Abstract: (from the chapter) This chapter attempts to introduce the counselor and counseling student to a major overview of the substance abuse field. A brief history is given as well as models of addiction, assessment tools, and treatment strategies. The interested counselor should pursue further training in assessing and treating these issues before working in this population. The well-trained counselor will find that he or she has many of the necessary skills to work with these people but will need some specialized training and knowledge to be truly effective and competent. I heartily recommend you seek out this training and work with this population. Change is hard, but the damage from the failure to change is far harder for these individuals. Breaking the cycle of addiction will not only help the man or woman in front of you but the many generations to follow. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Alcohol Abuse](#)
[*Counseling](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Measurement](#)
[Counselor Trainees](#)
[Counselors](#)

Source: PsycINFO

79. Addiction.

Citation: The American Psychiatric Publishing textbook of geriatric neuropsychiatry (3rd ed.), 2011(427-441) (2011)

Author(s): Volfson, Elena; Oslin, David W

Institution: Volfson, Elena: Philadelphia VA Medical Center, Philadelphia, PA; Oslin, David W.: VISN 4 Mental Illness, Research, Education and Clinical Center (MIRECC), Philadelphia Veterans Administration Medical Center, Philadelphia, PA

Language: English

Abstract: (from the chapter) Substance abuse, particularly of alcohol and prescription drugs, among adults ages 60 and older presents a costly challenge for the health care system. As the number of older adults who have these disorders is increasing, the problem remains underestimated, underidentified, underdiagnosed, and undertreated (Blow 1998; Dowling et al. 2008; Simoni-Wastila and Yang 2006). Older adults have unique patterns of and health consequences from substance abuse and, therefore, require unique approaches to addiction, diagnosis, and treatment. In this chapter, we review problems related to alcohol abuse, nicotine dependence, prescription medication abuse, and illicit drug use among older adults, who for the purposes of this chapter are defined as persons ages 60 and older. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Addiction](#)
[*Drug Abuse](#)
[Aging](#)
[Alcohol Abuse](#)
[Prescription Drugs](#)

Source: PsycINFO

80. Social work interventions with alcohol and other drug problems.

Citation: Theory and practice in clinical social work (2nd ed.), 2011(525-559) (2011)

Author(s): Amodeo, Maryann; Lopez, Luz Marilis

Institution: Amodeo, Maryann: Department of Clinical Practice, Boston University School of Social Work, Boston, MA; Lopez, Luz Marilis: Boston University School of Social Work, Boston, MA

Language: English

Abstract: (from the chapter) Alcohol and other drug (AOD) problems can be life threatening, especially when they have progressed to the chronic stage, but death can also be caused in the earlier stages or with only occasional use by particularly vulnerable individuals such as the elderly, teens and preteens, and those with medical conditions exacerbated by alcohol and other drug use. Social work's ecological perspective increases the likelihood that workers will adopt a holistic approach in assessing and intervening with AOD problems. Rather than assuming that the problem resides only in the individual or only in the environment, the ecological perspective looks at the interaction between them. It is a person-in-environment and environment-in-person perspective. Social work training provides specific skills that are needed for effective work with alcohol-and drug-involved clients. Among those skills are family outreach and intervention; group therapy skills; working with a range of defenses, including denial, avoidance, and intellectualization; working through loss and grief to resolution and recovery; the ability to use differential approaches to treatment, including cognitive, behavioral, psychodynamic, and family systems; and an appreciation of the role of self-help programs, natural support networks, and indigenous healers in client recovery. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Intervention](#)
[*Social Casework](#)

Source: PsycINFO