The TAADAS Board of Directors has elected new officers for 2001-2002. Soon-to-be Past-President John York, leaves office October 1, 2001, following a year of an “incredible and exciting time of change and accomplishment,” York says. The newly elected officer’s will guide TAADAS into the next level of commitment and service.

Frank Kolinsky, Executive Director of E.M. Jellinek Center in Knoxville was elected President, Allen Richardson, Executive Director of Serenity Recovery Centers in Memphis was elected Vice-President, and Terry Shapiro, Executive Director of Council for Alcohol and Drug Abuse Services (CADAS) in Chattanooga was elected Secretary/Treasurer.

The operative word for this line-up could be “teamwork”, for each individual has a proven track record of being a team player. Kolinsky was a standout tackle on the University of Tennessee football team and a veteran of the United States Army. Richardson (old #44) was “all world” in High School and an outstanding linebacker at the University of Memphis. Shapiro, a former scout with the Atlanta Braves, still pitches for a Chattanooga area baseball team. The impressive, newly elected “TAADAS TEAM Leadership” has the strength of diversity and commonality, vision and practicality, along with an awareness and understanding that comes from a collective 53 years experience in alcohol and drug abuse services.

Kolinsky said, “I am totally committed to the mission of the new TAADAS, and I look forward to doing what I can to help.” Richardson said, “as the TAADAS individual and corporate membership grows, the impact of the ‘Voice of Alcohol and Drug Abuse Services in Tennessee,’ will be substantial.” Shapiro said, “We will continue in the direction set by John York, and our focus will continue to be to save lives and to change the lives of addicts and alcoholics, which is why we exist.”

The TennCare benefit package doesn’t cover residential services for A & D clients.

The BHO’s have the perspective that a client needs to fail at outpatient treatment before they will be approved for a residential stay.

The limited number of days authorized for residential services - One or two days are not enough to provide an appropriate level of treatment.

The BHO’s need to recognize that adolescents need longer-term residential treatment—longer than a few days and then released for outpatient care.

The association (TAADAS) is not clear what substance abuse, recognized by the BHO’s? The TennCare benefit package doesn’t cover residential services for A & D clients.

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Many of us wake up in a new world every day, and occasionally a new world wakes up in us. Most of the time this is something like a personal revelation, a new awareness or understanding, or maybe even something bordering on enlightenment. September 11, 2001, was different. Every human being of good will on the face of the earth was forever changed by the horrific tragedy in New York City. The pain of those directly affected is incomprehensible, but our response as a civilized world is very much understandable. My thoughts and prayers go out to all who suffer. We all share the grief.

The terrorist attack has resulted in an unprecedented unity of the civilized world. Terrorism will be eradicated from the earth. There will be no more terrorism. Our freedom and liberty will be preserved. No doubt about it. I wonder what the outcome would be if we focused that kind of energy on the spiritual terrorism of alcohol and drug abuse?

**Partnership for a Drug-Free Tennessee**

A new prevention arm has been added to the TAADAS programs. Along with the Tennessee Department of Health, Bureau of Alcohol and Drug Abuse Services, TAADAS has stepped up to the plate by bringing the national media spotlight into Tennessee in the form of the Partnership for a Drug-Free Tennessee and the Partnership for a Drug-Free Memphis. This is the localized version of the highly successful and award winning national media campaign of the Partnership for a Drug-Free America (PDFA). This ongoing program began more than 20 years ago in the form of television Public Service Announcements (PSA’s). Today, the PSA’s appear in the print media, radio, and outdoor advertising, as well as television. Most will remember the egg and the frying pan; “This is your brain. This is your brain on drugs.” There have been hundreds more since then, all donated by the best creative minds and organizations in the business. Any PDFA spot you see on TV, is produced without charge to PDFA. All actors appearing in the spots donate their time and talent, and all stations run the spots without charge. The reason? These spots are the most effective means ever devised of molding attitudes and behavior of kids toward drugs. Many of the spots are also aimed toward empowering parents with effective ways to help their children resist cultural drug use pressures.

The TAADAS web site and RED-LINE number now appears at the end of many of the PSA’s. Watch for them and know that this is yet another way TAADAS is serving the community as the “Voice of Alcohol and Drug Abuse Services in Tennessee.”

Blessings To All.

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**UT Called Nation’s Top Party School**

College students voted the University of Tennessee (UT) the top party school in the United States, the Associated Press reported Aug. 20.

University officials weren’t pleased to hear about the distinction, especially since the 28,000-student school is trying to obtain more funding from the state and is currently searching for a new president.

“We’ve always wanted to be on somebody’s short list,” joked Richard Rhoda, executive director of the Tennessee Higher Education Commission. “Will there be fallout? I would imagine we will be ridiculed by some over the ranking. But I would hope not in serious circles.”

UT-Knoxville Student President Bradford Bricken added, “There are some students here who do party very hard. But there are some students that study all the time, too.”

The random survey of 65,000 college students was conducted by the Princeton Review. Students are asked to rate their own schools regarding alcohol consumption, marijuana use, and other criteria.

The rest of the top 20 party schools based on the poll: Louisiana State University; University of California-Santa Cruz; Florida State University; University of Colorado; University of Alabama; St. Bonaventure University; Ohio State University; University of Wisconsin; University of Florida; University of New Hampshire; University of Georgia; University of Texas; Tulane University; Lehigh University; New York University; Colgate University; University of Vermont; Southern Methodist University; and the University of California-Santa Barbara.

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**Study: 4% of Population Treated for Behavioral Problems**

Information from the federal Integrated Data Base pilot project in Delaware, Oklahoma, and Washington indicated that 4 percent of the population was treated for addiction, mental illness, or both by state agencies and Medicaid in 1996, Substance Abuse Funding News reported Aug. 14.

The study further showed that of the 4 percent who got help, 21 percent received addiction services only, 68 percent received mental-health services only, and 11 percent received services related to both.

The majority of individuals with addictions were treated by state-funded treatment agencies.

The Center for Substance Abuse Treatment and Center for Mental Health Services (CMHS) are conducting the pilot.

CMHS Director Bernard Arons said the data would help determine which state and local government agencies are buying addiction and mental-health services. The data will allow states to coordinate services so resources can be used to serve more individuals.
Thoughts from Outgoing President John York

By: John York
TAADAS President 2000-2001

As my term as TAADAS president comes to an end (and at Rogers request), I thought I’d share a few thoughts from my perspective about where we’ve been and what may be on the horizon for our future.

As I look back over the past year, my first impression is that it has been an incredible and exciting time of change for TAADAS. A little over a year ago, our membership had dwindled to six or seven members, we had gone several years without an executive director, we had no place we could really call home, and, because of all of these things, our only funded program (The Clearinghouse) was in a state of neglect and low employee morale. But with the help of each and every one of you, all of that has changed. We now have a total of 18 sustaining member agencies and have recently opened up new categories of membership, which are steadily growing. With the additional membership revenue we were able to hire an extremely qualified executive director with the skills needed to lead us into the future. We now have beautiful offices and we’re able to compensate the Clearinghouse staff at a much more competitive level. And they have all responded by taking on a variety of additional responsibilities which is reflected in a much improved website, a top quality newsletter which, instead of costing us, is generating significant ad revenue, and many other “value added” improvements in the daily operations.

On the external front, I feel our relationship with the A&D Bureau and the Department of Health is better than it has been for some time and we’ve also opened dialog with TAMHO and the Tennessee Psychological Association who wrote a letter to the Commissioner of TDMHMR supporting our Title 33 stance. We’ve established a viable and functioning committee structure and have hired a lobbyist to help keep us abreast of what’s happening at the legislature and to give us more influence in that arena. We changed the name and designed a new logo to reflect our new direction for the future. And I feel that we have made great strides in achieving our goal of becoming the leading advocate and voice for alcohol and drug abuse providers, professionals and consumers in Tennessee.

As our momentum and influence continues to build, there also continues to be significant challenges for the future. For an association to thrive it must continually strive to create value for its members. Our executive director and his staff have shown that they are creative in this regard, and attention to membership services must always be a priority. Likewise, we should all look for ways to make TAADAS more inclusive and expand our influence by partnering with other organizations.

(Continued on page 7)
NEWS FROM CAPITOL HILL…

By: Nathan Ridley

In the wake of last week’s horrific tragedy, our state’s public policymakers, like the rest of us, struggled to make sense of the events. Various thoughts surfaced; have the meeting because we must go on, cancel the meeting because it is not important now, give blood, pray. Like you, I share the grief of this trying time for our nation, and I further understand that given the size and reach of our extended families many of you have been touched by this tragedy in deeply personal ways. My thoughts and prayers are with you.

This past week, the Senate Finance Ways and Means Committee Chair Douglas Henry of Nashville, gavelled his committee to order for two days to examine past budget growth and spending priorities to work ahead on the 2002–2003 fiscal year budget. Senator Henry is assuming that once again the General Assembly will find no consensus on a revenue proposal and will adopt another “no new taxes budget”. That assumption will contain budget cuts because, the General Assembly’s current budget spends funds that will not recur on expenses that will recur. The presentation to the committee revealed that when adjusted for inflation and population growth, spending on state programs from 1988 to 2000 has not increased. The exceptions were TennCare and K-12 education; TennCare had a 5.9% adjusted average growth rate and K-12 education had a 2.1% adjusted average growth rate. While 5.9% may seem high, one must remember that Medicaid’s average annual growth rate was more than 20% from 1988 to 1993, which was why the state established the TennCare program in the first place.

Some might wonder why the Senate Finance Committee would need to meet after a seemingly endless legislative session. One of Senator Henry’s goals is to develop a simpler budget. State taxes bring in about $8 billion a year. Our talk radio friends constantly harp on the $19.5 billion figure for the 2001-2002 fiscal year as bloated and out of control. That number includes the many federal matching dollars in the TennCare and the road programs. It also includes license fees such as those paid by alcohol and drug abuse counselors. It includes state college tuition payments, state collected child support, rent paid by state agencies to another state agency for the use of a state building, and it even includes UT athletic department revenues. While these inclusions may be sound accounting practices, most folks do not consider an increase in UT football ticket prices to be a state spending issue. Senator Henry believes that a simpler budget may lead to greater understanding and hopefully greater trust in our state’s policymakers.

Legislative Tidbit: Many have heard me say that the most important election is the next one. Generally this year, we have looked forward to the 2002 elections. For portions of Williamson and Cheatham counties, in Middle Tennessee, Republicans Glen Casada and Jeff Cassman and Democrat Gene Cotton have qualified to run for special election to fill the unexpired term of State Representative Mike Williams who has retired to be the director of the TN Petroleum Council. The primaries will be October 23, and the general election will be December 11. For those of you who provide services in Middle TN, I encourage you to get to know these folks. My experience has been that candidates seeking election are much more likely to listen than officials who already hold offices.

News from Capitol Hill comes from Attorney Nathan Ridley with the Nashville firm of Boult Cummings Conners & Berry, PLC. Contact him by e-mail nridley@boultcummings.com
Journey Together Conference a Success!

By: Kathryn Benson LADC, NCAC II

In the midst of grief last week MTAADAC, believing that it was crucial to continue our lives with as much normalcy as possible, made the decision to carry on with the Journey Together Conference. It was a decision that proved to be one of the most healing and joining together decisions we could have made. This conference saw the largest turn-out of participants that we have ever had. They came together in grief, fear, determination, and the strong need to be both supported and to support. By Wednesday afternoon we confirmed that most of our main speakers would be unable to attend because of the inability to fly. As a group this was announced and plans were made by the participants themselves to subsidize the training schedule. This allowed all participants to receive additional choice of innovative, quality programs while also receiving the CEUs they needed. We are very grateful for the flexibility, adaptability and caring for one another that we all experienced together.

We want to say thank you to all the participants, planned speakers, exhibitors, hotel staff, and conference committee members. We want to say a special thank you to the professionals who stepped forward and provided hugely successful workshops with minimal notice and preparation time, they are: Luanne Overton, Phil Guinsburg, Umaru Jutte, Sharon Trammell, Tim Hamilton, and Doug Jones.

We are so grateful that we made the decision to carry on with our plan. Many participants said that the very fact they were together instead of rushing back to work allowed them to fully feel and process the tragedy of September 11th. As I write this article a conference participant called to say “thank you for the powerful and healing time with my colleagues and friends”. So put us on your schedule together.

We are so grateful that we made the decision to carry on with our plan. Many participants said that the very fact they were together instead of rushing back to work allowed them to fully feel and process the tragedy of September 11th. As I write this article a conference participant called to say “thank you for the powerful and healing time with my colleagues and friends”. So put us on your schedule for next year, September 11-13, 2002 and we will look forward to continuing on our Journey Together.

TAADAC Elects New Officers

At the Journey Together Conference TAADAC held its annual meeting. The membership elected its 2001-2002 officers. They are:

President
David Cunningham, Knoxville

Vice-President/President Elect
Carrie Thornton, Memphis

Secretary
Gene Marie Rutkauskas, Knoxville

Treasurer
Phil Guinsburg, Nashville

TAADAC Honors Its Members

Congratulations to the professionals nominated and selected as recipients for TAADAC’s annual awards. It is quite an honor to be nominated by your colleagues. It is an additional honor to be selected for the TAADAC awards! The 2001-2002 recipients of these awards are:

Counselor of the Year
Sally Dobson, NCAC I

Professional of the Year
Gene Marie Rutkauskas, NCAC II

Lifetime Achievement
Angela Masini, NCAC II

MTAADAC Training Schedule October—January 2002

Membership meetings are always held at 10:30. Meetings are held at the A&D Council of Middle Tennessee located 2612 Westwood Dr. in Nashville.

**Sexual Behavior Disorder**

October 16, 2001 11:30 - 1:30
Presenter: Ginger Manley, MSN, Certified Sex Therapist

**Chemical Dependency & the Homeless**

December 18, 2001 11:30 - 1:30
Presenters: Ruthe Creighton, NCAC II Claudine Jefferson, LADAC

**Identifying “Other” Addictions for Referral and Treatment**

January 15, 2001 11:30 - 1:30
Presenter: Murray Smith, MD, Addictionologist

**Strengthening Families in Dual Recovery**

November 20, 2001 11:30 - 1:30
Comprehensive Community Services
Confidential Services for Adolescents & Adults

Adolescent Residential Treatment
(Co-Ed, Ages 12-18)

Alcohol and Drug Services
(Prevention, Intervention, Counseling, Assessments, Drug Screening)

Educational Services
(DUI School, Moral Reconciliation Therapy, Driver Improvement,
Anger Management, Tobacco Free Teens, Life Skills)

Outpatient Counseling Services
(Individual, Group, Family)

Probation Services
(Supervision, Electronic Monitoring)

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Unicoi County
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Knox County
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Knoxville, TN 37901
865-207-4001

Washington County
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Johnson City, TN 37604
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423-746-9901

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Sevier County
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Sevierville, TN 37864
865-428-6110

Carter County
P.O. Box 913
Elizabethton, TN 37644
423-742-4001

Hawkins County
423-920-1100
thoughts continued...

(Continued from page 3) 

tions and speaking with one voice on issues that affect all of us who treat persons suffering from chemical abuse and addiction. I believe that this can be accomplished without abandoning or deviating from our core mission of “educating the public and influencing public policy in order to improve services to those who are affected by alcoholism and/or drug addiction.” Issues such as TennCare, adequate state and federal funding, licensure rules, etc. will require ongoing attention and I know our new officers are well equipped to lead us as we continue to address these things and whatever else the future may hold. And I, as I’m sure all of you do, pledge my wholehearted support to them.

As mentioned earlier, none of our accomplishments over the past year or so would have been possible without the help and support from all of our members and our extremely capable executive director. I sincerely thank each of you for your hard work and demonstrated commitment to the new TAADAS. Because of you folks, it has been a pleasure to serve as president and I look forward to even bigger and better things in our future.

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“Partially funded by Tennessee Department of Health”
Nearly 75 percent of all illegal drug users are employed in full- or part-time jobs. To help employers and employees combat the challenges, the Substance Abuse and Mental Health Services Administration (SAMHSA) launched a new web site www.drugfreeworkplace.gov to increase access to information on creating drug free workplaces.

"Whether you are a corporate CEO or a small business owner, you can take simple, low-cost steps to reduce substance abuse and increase workplace safety and productivity," Health and Human Services Secretary Tommy G. Thompson said. "Investing in a drug-free workplace pays real dividends for employees and their families as well as businesses."

"Workers who use illicit drugs take more unexcused absences, change jobs more often, and are more likely to quit or be fired than those who do not use drugs," said SAMHSA Acting Administrator Joseph H. Autry III, M.D. "One of the most effective measures an employer can take to reduce drug abuse on the job is to implement a comprehensive drug-free workplace program. We are pleased to make this new tool available to assist workplaces big and small."

The web site, named the Workplace Resource Center, is operated by SAMHSA's Center for Substance Abuse Prevention (CSAP). "The web site contains searchable resources and links on how to establish and maintain an effective, comprehensive drug-free workplace program, including drug testing guidelines that govern federally regulated employees, guidance for Medical Review Officers, related laws and regulations, the latest research findings and related information on employee assistance programs," said CSAP Director Ruth Sanchez-Way, Ph.D.

Some of the web site features include:

⇒ An organized and searchable database of all of the Department of Health and Human Services technical drug testing guidance including the Current List of Laboratories that meet minimum standards to engage in urine drug testing for federal agencies. In many cases, the guidance also applies to the industries regulated by the Department of Transportation and the Nuclear Regulatory Commission.

⇒ An overview of the Federal Drug-Free Workplace Program as it applies to agencies in the Executive Branch - This section provides background information and policy guidance, as well as links to several other federal agency web sites containing related information.

⇒ Comprehensive program guidance developed by CSAP on the design, implementation, and maintenance of a drug-free workplace program, including special guidance for small employers, and guidance from other federal agencies.

⇒ Answers to commonly asked questions of employers wanting to establish a drug-free workplace program, including "Can I legally require my employees to take a drug test?" and "What is considered an ideal policy for an employer to adopt in order to deal with substance abuse problems in the workplace?"

⇒ Access to CSAP's Workplace Helpline - phone: (800) 967-5752 o r E-mail at helpline@samhsa.gov through which employers can receive consultation that is free to them on how to address substance abuse in their workplace. Assistance, including examples and "models," is provided to help employers develop and implement a comprehensive written policy that includes access to employee assistance program services, supervisor training, employee education, drug-testing and other effective no- or low-cost initiatives designed to reduce or eliminate the substance abuse problems and help ensure safe and healthy workplaces. Publications related to drug-free workplace programs are also available by phone from TAADAS' Statewide Clearinghouse at (800)889-9789.

⇒ Multi-media Briefings that include online video clips and electronic slide presentations with researchers, practitioners, health-care providers and government administrators on how to manage and evaluate workplace substance abuse prevention programs.

⇒ Workplace Resources in Spanish.

The on-line Workplace Resource Center is managed by CSAP's Division of Workplace Programs (DWP). DWP provides oversight of the Federal Drug-Free Workplace Program, an initiative aimed at eliminating illicit drug use in the federal workforce, as mandated...
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by Executive Order and public law. DWP also provides oversight for the National Laboratory Certification Program, an organization that sets quality assurance standards and certifies and inspects laboratories that analyze drug tests of federal employees and employees of federally regulated industries.

CSAP is a component of the Substance Abuse and Mental Health Services Administration (SAMHSA), a public health agency within the U.S. Department of Health and Human Services. SAMHSA is the lead federal agency for improving the quality and availability of substance abuse prevention, addiction treatment and mental health services in the United States. Information on SAMHSA's programs is available at www.samhsa.gov.

RED RIBBON WEEK

OCTOBER 23-31

It starts with the smallest gesture: a child pinning a red ribbon to his shirt, a girl wearing a red ribbon wristband, a classroom planting red tulips, a business displaying a red ribbon banner, a community hosting a red ribbon family event. Though these acts are simple, their significance is tremendous. Each red ribbon has the potential to reach a boy, a girl, a caring adult or a family in a profound way. The red ribbon is a catalyst and symbol for millions of Americans who show that ribbon by ribbon, neighbor by neighbor, they are united for drug-free youth.

Since its beginning in 1986, the Red Ribbon Celebration had touched the lives of more and more people each year. It all began with the brutal murder of Enrique "Kiki" Camarena, a Drug Enforcement Agent assigned to a case in Mexico. Enrique was shockingly close to uncovering the identities of key members of a Mexican drug cartel. He was kidnapped, brutally tortured and killed just days before he was to identify kingpins of the illegal business in Mexico.

Angered by Kiki's death and the destruction caused by drug and alcohol use in America, the young people of Kiki's hometown in Calexico, California began wearing Red Ribbons in honor of the fallen hero. The National Family Partnership (NFP) and its affiliated organizations soon began to wear Red Ribbons as a symbol of their commitment to fight the illegal use of drugs. Today, the red ribbon is the symbol for drug, alcohol and tobacco prevention across America. The Theme for Red Ribbon Week 2001 is "Plant the Promise to Keep Kids Drug-Free"

Annually, every October 23rd - 31st more than 80 million young people and adults show their commitment to a healthy, drug-free life by wearing or displaying the red ribbon. Since 1988, The NFP has provided national leadership for this exciting event. This nationwide celebration has become a major force for raising public awareness and mobilizing communities to combat alcohol and drug use among youth. The TAADAS Clearinghouse has materials appropriate for Red Ribbon celebrations. Call today to order your materials. 615.780.5901

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STUDY COMPARES PRISON AND NON-PRISON TREATMENT

A new study shows that women receive different types of benefits from prison-based addiction treatment programs and those located off prison grounds, Substance Abuse Funding News reported Aug. 14.

Elizabeth Hall, project director of the Forever Free Substance Abuse Treatment Program Outcomes Study at the University of California, said the study found that women who received prison-based treatment initially did better on parole and with cutting drug use. On the other hand, women in the non-prison program fared better finding jobs.

But a year later, when researchers conducted a review of study participants, they found that 35 percent of the prison group had used alcohol or other drugs during the month before the interview, compared with 8 percent of the non-prison group.

Also, 75 percent of the prison group reported using alcohol or other drugs at some time during their parole period, compared with half of the non-prison group.

The study's findings were presented at the recent National Institute of Justice's Research & Evaluation Conference in Washington, D.C.

OXYCONTIN BEING REFORMULATED

Purdue Pharma, the company that makes OxyContin, is reformulating the painkiller to prevent future misuse of the drug, the Associated Press reported Aug. 24.

Dr. J. David Haddox, a senior medical official with Purdue Pharma, reported to a Virginia state task force that the company is working on reformulating OxyContin with a chemical safeguard naloxone, which is used in other painkillers.

"This idea has sort of been on the shelf for a while," Haddox said.

Misuse of OxyContin has been growing since the painkiller's introduction. Thefts of the drug are on the rise, as are the number of deaths from overdoses. The Tennessee REDLINE has reported an increasing number of callers seeking treatment services for OxyContin use. The calls have been mainly in the East Tennessee area, but have ventured into Middle Tennessee in recent weeks.

People who misuse OxyContin crush the pill into a powder and either snort or inject it to get a high. Naloxone, a narcotic antagonist, is designed to prevent intravenous abuse.

Initially, Purdue Pharma decided against using naloxone in OxyContin because it could induce withdrawal or create a "ceiling" effect, limiting the painkiller's effectiveness.
Agape is a therapeutic community for women learning to live in recovery from alcohol and drug addiction. Agape is a Greek word meaning "Godly or unconditional love," which is the highest form of love, and this aptly describes the environment created 30 years ago and continues to this day. One visit to the campus will communicate that HEALING HAPPENS HERE.

For women recovering from alcoholism and drug abuse, this is a safe and supportive place. The atmosphere created three decades ago, still exists today. The programs structure accommodates for individual needs, as clients move from a life centered in addiction to a life of responsible freedom...liberated from a need for mind-altering substances, and open to exploration and love of self, sensitive to the needs of others.

To effect this transition, Agape provides a challenging recovery program of education, counseling and guidance designed to nurture and empower recovering women in the most essential aspects of their physical, emotional, mental and spiritual health.

Agape's primary focus is on expanding awareness and understanding of self and learning how to live free of mind-altering substances. At Agape, residents gain experience in learning how to feel, how to express themselves, how to respect their own needs and those of others, and thereby arrive at a belief in their own capacity to determine their individual destiny.

Central to the Agape experience is the 12-Step Programs of Alcoholics Anonymous and Narcotics Anonymous. Residents regularly attend AA/NA meetings, join in Book Study Groups, and spend time in quiet meditation, and learn to apply 12-Step principles in every aspect of their lives.

In Agape's recovery program, women progress at their own pace through a series of levels that demand increasingly greater personal accountability and responsibility while simultaneously allowing more personal freedom.

Newcomers entering Agape from treatment centers or other experiences of early recovery begin learning the rules, responsibilities, and expectations of the program. During this period they have continuous contact with professional staff that help them to focus on needs and wants and develop a treatment plan. Newcomers also have time for quiet contemplation as they prepare for the more demanding requirements of succeeding levels.

The program’s five higher levels focus on continuing personal growth in important areas such as relationships, career development, life skills, and values clarification. Residents progress naturally from one level to the next, gaining greater control over their own lives and becoming less dependent on the external controls of earlier levels.

All elements of the Agape experience are conducive to healing, restoring and strengthening of the women's lives. www.agapeinc.org

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**Advertise in the TAADAS Times!**

The TAADAS Times is a bimonthly newsletter produced by the Tennessee Association of Alcohol and Drug Abuse Services six times a year used to increase the awareness of substance abuse and substance abuse related issues across the state of Tennessee. It is distributed to 2800 substance abuse professionals across Tennessee and published on the internet, www.taadas.org.

TAADAS accepts paid advertising for inclusion in the TAADAS Times for products and/or services, which are related to the purposes of TAADAS. The products and/or services advertised in the TAADAS Times do not necessarily imply endorsement by TAADAS or its membership.

Ads can vary in size from full page, half page, 1/4 page, 1/8 page or business card size. Prices range anywhere from $24–$300 per edition. Special discounts are available for those choosing to advertise for an entire year.

For a full listing of ad rates, contact Tammy Williams at the TAADAS office. You can reach her by phone, 615-780-5901 or via email, taadas-times@taadas.org.

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**Member Agency Spotlight: AGAPE, INC.**

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Addiction Severity Index
Facilitator: Frances Clark, Lentz Health Center, Nashville, October 11-12, Contact Susan Young 615-269-0029

Foundations of Chemical Dependency
Facilitator: Fred Lunce, JACOA, Jackson, October 12, Contact Adam Webster 731-423-3653

Getting Better Acquainted with the Social Work Code of Ethics
Facilitator: Deborah Wolkhamer, United Way, Knoxville, October 12, Contact Martha Culbertson 865-541-6676

Dual Diagnosis
Facilitator: Ken Henderson, Purdue Center for Hope, Memphis, October 13, Contact Jane Abraham 901-272-1657

The Art of Communicating in Our World Today
Facilitator: Fred Lunce, Wesley United Methodist Church, Johnson City, October 15, Contact Louise Verran 423-639-7777

Use of Metaphors and Experiential Techniques with Basic Addictions Treatment Issues
Facilitator: Bobby Chapman, HR McNabb C&Y Center, Knoxville, October 18-19, Contact Adam Webster 865-541-6676

Neurochemistry of Addiction
Facilitator: Fred Lunce, JACOA, Jackson, October 26, Contact Adam Webster 731-423-3653

How Groups Work
Facilitators: Leadership Knoxville, HR McNabb C&Y Center, Knoxville, October 26, Contact Martha Culbertson 865-541-6676

Embracing Diversity, Eliminating Disparities
TN Public Health Association, Cool Springs Marriott, Franklin, October 31—November 2 615-741-0235

Volunteer Office Help Needed
TAADAS is looking for a few good volunteers to assist in the office on an as needed basis. From time to time, additional help is needed with special projects such as typing/data entry, phone answering, etc., restocking the resource library, as well as staffing the TAADAS Recovery Books and Things Bookstore. If you would like to be on a call list to assist in the office when needed, please contact the TAADAS office at 615.780.5901 or via email at mail@tnclearinghouse.com.

Currently, volunteers are needed in the office to make calls verifying information in the Tennessee REDLINE referral database. This is an important task and any help would be greatly appreciated. Please contact the TAADAS office if you’d be able to give us a hand.

Featured Publication:

How Drug Abuse Takes Profit out of Business: How Drug Treatment Helps Put It Back

The TAADAS Clearinghouse resource center has numerous publications on Substance Abuse and related issues. In each edition of the TAADAS Times, we feature one of the publications from the resource center. This edition’s feature is: How Drug Abuse Takes Profit out of Business: How Drug Treatment Helps Put It Back

This booklet explains briefly how drug-abusing employees cost U.S. businesses billions of dollars in absences, accidents, medical costs and performance. It explains how treatment reduces demand for drugs, makes people more productive, (more likely to be employed and not involved with crime), pay taxes, and use fewer social services. This ultimately helps reduce tax burdens on businesses. The demand for treatment is higher than the supply, but considering the expenses such as the cost involved with hiring a new employee, treatment plans are a worthwhile investment.

To get your free copy of this publication, call the TAADAS Clearinghouse at 615.780.5901. * This publication is available in bulk quantities. Call for details. *
FEATURED VIDEO:

SLIPPING INTO THE DARKNESS

The TAADAS Statewide Clearinghouse has over 700 videos on Substance Abuse and Substance Abuse related issues. In each edition of the TAADAS Times, we feature one of our collection. This edition's Feature is Slipping Into The Darkness. In this 17 minute video, the dangerous dynamics of relapse are presented in this powerful documentary. Real stories of relapse and the resultant destruction are presented, told by addicts who have experienced its horror firsthand, and have struggled back into recovery. Drug Counselors speak of their experiences working with addicts and alcoholics who have relapsed. This program tells the real stories of relapse: the subtle, often unnoticed symptoms, the denial, and the frightening experiences.

Videos can be checked out from the TAADAS Clearinghouse free of charge for three (3) business days. UPS shipping is available for those wanting to check out videos outside the Nashville area for $12.50. Call the TAADAS Statewide Clearinghouse at 615.780.5901 to check out this or one of the other videos in our collection.

WORKSHOPS & TRAININGS

Weight, Body Image, And Recovery
Facilitators: Judith Burr, HR McNabb C&Y Center, Knoxville, November 5, Contact Martha Culbertson 865-541-6676

A Counselors Course in Pharmacology
Facilitator: Jeannette Norden, Alcohol & Drug Council of Middle TN, Nashville, November 2, Contact Susan Young 615-269-0029

Team Building
Facilitator: Hilde Phipps, Wesley United Methodist Church, Johnson City, November 5, Contact Louise Verran 423-637-7777

Life Skills
Facilitator: Ursula Thomas, Purdue Center for Hope, Memphis, November 14, Contact Jane Abraham 901-272-1657

Women's Issues
Facilitator: Finney Clarkson, Wesley United Methodist Church, Johnson City, November 15, Contact Louise Verran 423-637-7777

ASAM Patient Placement Criteria
Facilitator: Frances Clark, Lentz Health Center, Nashville, November 15-16, Contact Susan Young 615-269-0029

ASI
Facilitator: Karen Dennis, Purdue Center for Hope, Memphis, November 17, Contact Jane Abraham 901-272-1657

Pharmacology
Facilitator: Karen Dennis, Purdue Center for Hope, Memphis, November 28-30, Contact Jane Abraham 901-272-1657

Understanding And Managing Anger
Facilitators: Bob Burr, United Way, Knoxville, December 3, Contact Martha Culbertson 865-541-6676

For all of your Recovery Gift Needs

Featuring Recovery Greeting Cards, T-Shirts, Hats, Medallions, Coin Holders, Book Covers for Big Book and Basic Text, Custom Made Recovery Jewelry, Big Book, Basic Text, 12 x 12 and It Works: How & Why on Cassette Tape, Inspirational and relaxation tapes and CD’s, Sun Catchers, Lapel Pins, Bookmarks, Verse Cards, Bumpers Stickers, Coffee Mugs, Key Tags and lots of books.

Featured Books for October & November:

✦ The Ice Storm & Healing an Angry Heart — C.C. Nuckols
✦ Staying Sober — Terrance Gorski
✦ Daily Affirmations — Rokelle Lerner
✦ Out of the Fog — John Kelly
✦ Husband’s Little Black Book & Silent Sons — Robert J. Ackerman
✦ Language of Letting Go — Melody Beattie
✦ Choices and Consequences — Dick Schaefer
✦ How Can I Help — Ram Dass & Paul Gorman

When in Nashville, Visit them in person at the Nashville House located on One Vantage Way, Suite B-240. Or coming soon, you can shop online from the comfort of your
Healthy Children and Mothers Are the Results of Substance Abuse Treatment; Alcohol, Drug Abuse and Crime Decline Dramatically

Drug and alcohol dependent women who are pregnant or who have children significantly reduce their alcohol or drug use as well as criminal behavior following residential substance abuse treatment programs according to a new report issued today by the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Treatment (CSAT). The study, "1993-2000 Residential Treatment Programs for Pregnant and Parenting Women," evaluated substance abuse treatment programs designed for pregnant women or women with infants or children.

Use of crack declined from 51% of the women studied six months before treatment to 27% six months after treatment. Similar declines were noted in the use of marijuana (48% dropped to 15%); powder cocaine (34% to 9%); methamphetamine (21% to 6%); heroin (17% to 6%); and alcohol (65% to 27%).

"There's no question that treatment provides a second chance to mothers and children, and we need to do everything we can to give them that opportunity," said Health and Human Services Secretary Tommy G. Thompson. "We must continue to make effective community-based treatment programs available to those who need it."

The study also found that the rates of premature delivery, low birth weight and infant mortality were improved for women who participated in long-term residential substance abuse treatment while pregnant.

The report was released as part of the kick off event for the 12th annual National Alcohol and Drug Addiction Recovery Month observance, held to applaud the courage of people in recovery and recognize the progress made in substance abuse treatment services.

Acting SAMHSA Administrator Joseph H. Autry III, M.D., pointed out "Addiction tears families apart. We know effective treatment can bring families together. Our job now is to continue to put what we have learned into the hands of community-based treatment providers."

"These programs indicate that substance abuse treatment can save taxpayers money that otherwise would be spent on other medical costs," said H. Westley Clark, M.D., J.D., M.P.H., CSAT Director. "Data in a 1998 study on drug exposed infants indicate that it cost an additional $7,700 in medical care before these babies leave the hospital. The infants in our study, whose mothers were in residential substance abuse treatment, avoided low birth weight, premature delivery and death at rates better than the rates for all U.S. pregnancy outcomes. This saves not only dollars, but heartache and misery for the family, friends and community."

The programs achieved a rate of premature delivery among clients in treatment of 7.3%, representing a 70% risk reduction as compared to an expected 24.0% rate of premature deliveries among untreated alcohol or drug abusers.

Over 60% of the clients reported being completely free of alcohol and drugs throughout the six months following discharge. An additional 13% relapsed at some time since discharge, but were completely alcohol and drug free in the 30 days prior to being interviewed. Six months following discharge, clients who stayed in treatment longer than three months were more likely to remain alcohol and drug free; less likely to be arrested; more likely to report employment as their main source of income; and more likely to report having custody of one or more of their children.

Faith Plan Has Little Impact on Addiction Field

Despite the Bush administration's attempts to increase government support of religious charities, addiction experts say the efforts have had no major impact on the field, Alcoholism & Drug Abuse Weekly reported Sept. 3.

Last month's resignation of John Dilulio as head of the White House Office of Faith-Based and Community Initiatives, combined with struggling faith-based legislation, has some addiction treatment and prevention advocates questioning the future of the plan.

"This could be an opportunity for a graceful exit or a more scaled-back, back-burner operation," said Ronald J. Hunsicker, president and chief executive of the National Association of Addiction Treatment Providers. The Community Solutions Act of 2001 is designed to open more government funding to religious charities. While Bush's initiative called for the Department of Health and Human Services and other cabinet-level departments to establish faith-based centers, no new ground has been broken to enable faith-based groups to receive federal funds for addiction treatment.

Linda Wolf Jones, D.S.W., executive director of Therapeutic Communities of America further noted that discussions about the science of addiction, licensing and credentialing sparked by the faith-based initiative made little headway. Hunsicker agreed, saying that, "There was some sort of opportunity if they wanted to take it, to have a pretty open discussion. But that appears not to be the style of this White House."

With all the political conflict surrounding the faith-based initiative and more pressing issues like the failing economy, addiction experts are concerned that the plan will be pushed to the back burner.

Wolf Jones said the missed opportunities will continue "until if and when they delve more deeper into the issues."
What is TAADAS?
TAADAS is the Tennessee Association of Alcohol and Drug Abuse Services, Inc. It is a statewide advocacy association whose mission is to educate the public and influence state/national policy decisions in order to improve services to those who are affected by alcoholism and/or drug addiction.

How long has TAADAS been in existence?
March of 2001 marked ‘TAADAS’ 25th anniversary. TAADAS began March 26, 1976 when a group of concerned Tennesseans joined together in Chattanooga for the purpose of creating a statewide association to promote common interest in prevention, control, and eradication of alcoholism and other drug dependencies.

Does TAADAS have any programs?
Yes. Through a grant from the Tennessee Department of Health, TAADAS operates two programs—The Statewide Clearinghouse and the Tennessee REDLINE. The Clearinghouse is a resource center for substance abuse related materials. The Clearinghouse includes a lending library of both books and videos, free literature for the general public as well as clinicians, and a research area. The Tennessee REDLINE is a confidential information line to help people find available substance abuse services in their area. TAADAS serves as the host organization for the Partnership for a Drug-Free Tennessee, the Tennessee state alliance for the Partnership for a Drug-Free America. TAADAS also is the home of Recovery Books & Things—A store featuring self help and recovery oriented books as well as recovery gift and novelty items.

What does TAADAS do?
TAADAS’ purpose is to promote the common interest in the prevention, control and eradication of alcoholism and drug dependency and to promote such other programs as approved by the Association: to work in close cooperation with agencies interested in alcohol and drug problems; to further a sense of fellowship and helpful relationships among members of The Association; to facilitate cooperation with all agencies interested in the health and welfare of the community; to impact legislation regarding alcohol and drug abuse; to educate the community regarding alcohol and drug abuse issues; to encourage and support development of alcohol and drug services in areas that are underserved; to enhance the quality of services provided by TAADAS members.

Who can join TAADAS?
Anybody can join TAADAS. The only real requirement is that you have a desire to be part of the movement to improve services for those affected by alcoholism and substance abuse. There are various levels of membership in the Association including Students, Individuals, Corporate and Sustaining.

Why should I join TAADAS?
TAADAS wants to keep alcohol and drug abuse issues in the forefront when funding decisions are made and legislative agendas are developed. As an association we need your opinion and input on the direction of the substance abuse field in Tennessee.

There truly is “strength in numbers”!!

What are some of the benefits of Membership in TAADAS?
- Advocacy
- First Generation Information on policy issues
- Strong voice for parity issues
- Unparalleled Networking opportunities with others in the Substance Abuse Community across the state
- Monthly meetings to network and join forces with others in the field. Quarterly Regional meetings
- Free Subscription to the TAADAS Times, which is a bi-monthly newsletter bringing the latest news, agency profiles, training, and conference information
- Special discounted hotel rates in Nashville
- Discounts at Recovery Books & Things
- Job Postings
- Web Design Consulting
- Grant Consulting
- Membership certificate suitable for framing

How do I join TAADAS?
Want to be a part of the future of alcohol and drug abuse services? Consider becoming a member of the Tennessee Association of Alcohol and Drug Abuse Services, Inc. Fill out the Membership Application and return it to the TAADAS office. Be part of a “fresh approach” dealing with the issues that affect service providers, substance abuse professionals, the recovery community, their families, friends, and...
Tennessee Association of Alcohol and Drug Abuse Services, Inc
Nashville House, Suite B-240
One Vantage Way
Nashville, TN 37228-1562
Phone: 615.780.5901
Fax: 615.780.5905
Email: taadas@taadas.org

Address or Name Changes?? Forward them to the TAADAS office via phone 615.780.5901, fax 615.780.5905, or email them to taadastimes@taadas.org

TAADAS Board Officers
Frank Kolinsky, President
Allen Richardson, Vice President
Terry Shapiro, Secretary/Treasurer
Rogers Thomson, Executive Director

The Tennessee Association of Alcohol and Drug Abuse Services (TAADAS) began March 26, 1976 when a group of concerned Tennesseans joined together in Chattanooga for the purpose of "creating and fostering a statewide association to promote common interest in prevention, control, and eradication of alcoholism and other drug dependency."
For more information about becoming a member of TAADAS, contact Rogers at:

TAADAS
One Vantage Way, Suite B-240
Nashville, TN 37228-1562
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The TAADAS Times Newsletter is a Bi-Monthly publication edited and produced by TAADAS staff. TAADAS accepts paid advertising for inclusion in the TAADAS Times for products and/or services which are related to the purposes of TAADAS and its members. The products and services advertised in TAADAS publications do not necessarily imply endorsement by TAADAS or its membership. For more information about placing an ad or article in the TAADAS Times, contact:

TAADAS Times, Editor
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615.780.5901
Fax 615.780.5905
Taadastimes@taadas.org

APPLICATION FOR MEMBERSHIP IN TAADAS

Joining TAADAS entitles you to a host of benefits not the least of which is recognition as an active supporter of the voice of Alcohol and Drug Abuse Services in Tennessee. There are various levels of membership in TAADAS, varying from student-sustaining membership. Fill out the application and return it to the TAADAS office if you'd like to join TAADAS in providing accurate information about alcohol, tobacco and other drugs, and influencing public policy decisions that support credible education, prevention, and treatment services in Tennessee. Your support will help develop a positive and creative prevention and treatment strategy that will end the 'shoveling up' of the wreckage caused by alcohol and other drug abuse in Tennessee.

Date: _____________________

Level of Involvement: Student: $20 ___
Individual: $50 ___
Corporate: $100 ___ $500 ___ $1000 ___ Other $ ______
Sustaining / Voting: $500 ___ $2500 ___ $5000 ___ Other $ ______

Name: _____________________________________________________________________________

Agency: ___________________________________________________________________________

Address: ___________________________________________________________________________

City: __________________________________ State: ____________ Zip Code: _________________

Phone: ___________________ Toll Free: ___________________ Fax: ___________________

Website: ___________________ Email address: ___________________

Card Holder’s Name: ___________________ Visa/Mastercard #: ___________________

Card Holder's Signature: ___________________ Exp Date: ____________

TAADAS’ Mission

To educate the public and influence state and national policy decisions in order to improve services to those who are affected by alcoholism and/or drug addiction.