**Consumer Input?**

**Substance Abuse Treatment Providers Talk the Talk and Walk the Talk!!**

By John York

During a recent conversation with a colleague from the mental health field, the topic of consumer input came up. My friend commented that there is a general belief among her peers (mental health folks) that the substance abuse field is somewhat lacking when it comes to providing opportunities for consumer input from the persons we serve - at least in comparison to the mental health field. She pointed to the public forums held across the state from time-to-time for consumers of mental health services and commented that the consumers of alcohol and drug abuse services have no comparable forums to provide input about treatment issues and to influence public policy.

I pointed out that, while the anonymity factor inherent in 12-step programs does tend to dampen public discussion about recovery among consumers, there are some forums where consumers of alcohol and drug abuse services can speak out and influence public policy. Those include the regional health councils that meet periodically in each of the county health departments (Continued on page 5

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**TAADAS Recovery Month Dinner 2004 – A Great Success**

By Julie Smith

**National Alcohol and Drug Addiction Recovery Month (Recovery Month) is celebrated each September. The month-long observance, sponsored by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) unites public- and private-sector partner organizations nationwide in an effort to highlight the societal benefits, importance, and effectiveness of alcohol and drug abuse treatment.**

September marked the 15th anniversary of Recovery Month and this year's theme “Join the Voices of Recovery... Now!” focused on encouraging support for effective, coordinated treatment and recovery services for those in need and emphasized that we should act without delay to improve Tennesseans' access to effective treatment and recovery services. **Recovery Month is celebrated to promote the message of recovery, applaud individuals and families in recovery and recognize the contributions of those who help facilitate recovery thereby effectively reducing the stigma associated with addiction treatment.**

On September 9, 2004, the Tennessee Association of Alcohol and Drug Abuse Services (TAADAS) held its' 3rd annual Recovery Month (Continued on page 2

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**“Statewide, 42% of treatment provider board members and 65% of management staff are ex-consumers.”**
Recovery Month Dinner...

(Continued from page 1)

A special guest speaker for TAADAS for the coming year was Coach Johnny T. Majors. Coach Majors discussed a variety of topics, but the underlying theme was the motivation to do the right thing, to maintain a steadfast resolve to help those in need, and to be moderate in our thinking to promote acceptance and hope. The evening closed with recognition to individuals who have given back to their communities by reaching out to those who are suffering from addiction, through the CEO of the Year Award and the Voice of Recovery Award.

Ms. Jackie Scott, Founder and Executive Director of the Jack Gean Shelter, of Savannah, was honored as the first recipient of the CEO of the Year Award. This award honors the CEO of a Sustaining Member Agency for their hard work and dedication to substance abuse services and highlights the importance of executive leadership in an organization's achievement of mission-related results.

Nominations were received and judged on the following criteria:

- Demonstrates strong leadership skills in working with staff, volunteers, and board members in fulfilling the organization's mission.
- Manages the operations of the organization in a manner that inspires, motivates, and leads the organization's people toward excellence.
- Makes best use of resources and works effectively with the board to acquire the necessary financial resources.
- Attracts, develops, and retains high performing staff and volunteers.
- Serves as a strong representative and spokesperson for his or her organization in the community and is resourceful in building awareness and support of his or her organization.

Ms. Scott began working in the alcohol and drug abuse treatment field in 1977. And from that very first job she began nurturing a dream - a dream to open a long term residential treatment facility for women. Without knowing it, she became a pioneer in advocating for women's treatment services long before it became a popular idea.

It took seven long years of work to marshal the financial, professional, and community resources to fulfill the dream, but in 1984, with a combination of personal finances and a special appropriation of $25,000 from the General Assembly, secured with the help of Lieutenant Governor John Wilder, Ms. Scott opened one of the first licensed alcohol and drug abuse treatment facilities exclusively for women in the State – the Jack Gean Shelter for Women.

Named after her late father, the Jack Gean Shelter began with a mission of providing treatment to women in need, regardless of ability to pay, and to this day, adheres to that mission. Those that have the honor to know Ms. Scott, know that her entire philosophy and focus has always been first and foremost on the client. In her down-to-earth style and demeanor, she conveys a message of hope to alcoholics and addicts who have lost all hope.

Her genuine care and concern for the client is best described by a true story from one of her ex-clients. A former Henderson, TN resident and now a successful building contractor, this gentleman completed six months at the Jack Gean Shelter for Men in 1998. These are his words,

"I had been to several drug and alcohol treatment programs before, without success. The first question they always ask you is ‘What kind of insurance do you have?’ But, when I arrived at the Jack Gean Shelter in Savannah, the first question Miss Jackie asked me was ‘Are you hungry?’ ‘Do you want something to eat, Honey?’ - And when clients express their gratitude to her, her usual reply is ‘Honey, you don’t owe me anything - just help someone else.’"

Under the leadership of Ms. Scott, the Jack Gean Shelter has grown from that initial $25,000 grant, to an agency whose budget approaches ½ million dollars. And under her leadership, its treatment capacity has expanded as well. In 1998 the Men’s Shelter was opened with 12 beds - and soon after that the Jack Gean Outpatient Program opened.

All told – counting the Women’s Program, Men’s Program and the Outpatient Program – almost a thousand clients have gone through the Jack Gean Shelter, saving an untold number of lives. Lives that may well have been lost, were it not for the leadership and vision of Ms. Jackie Scott.

The Voice of Recovery Award was established in 2000 and honors those who selflessly give of his or her time, energy, dedication, and expertise in service to those in need of assistance with substance abuse and addiction, making a significant impact in the battle against Tennessee’s number one health problem - substance abuse.

Voices for Recovery

Dr. Margaret Anderson, of Nashville, is the first recipient of the Voice of Recovery Award. Dr. Anderson is a consummate professional and广博的

The event to honor individuals in recovery and send the message to all Tennesseans that recovery from addiction is powerful and possible. TAADAS represents thousands of consumers in recovery, family members, healthcare professionals, and alcohol and drug abuse treatment and prevention professionals. This year's event was a dinner event held at the Millennium Maxwell House in the Crown Plaza Ballroom.

Approximately 200 individuals gathered to salute those in recovery and recovery support program officials who contributed to their success. The evening offered acknowledgement to the newly elected slate of officers for TAADAS for the coming year. The special guest speaker for the evening was Coach Johnny T. Majors. Coach Majors discussed a variety of topics, but the underlying theme was the motivation to do the right thing, to maintain a steadfast resolve to help those in need, and to be moderate in our thinking to promote acceptance and hope. The evening closed with recognition to individuals who have given back to their communities by reaching out to those who are suffering from addiction, through the CEO of the Year Award and the Voice of Recovery Award.

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Recovery Month Dinner

Past winners of the Voice of Recovery Award include: Lieutenant Governor John Wilder; TN Department of Health Assistant Commissioner Bureau of Alcohol and Drug Abuse Services, Dr. Stephanie Perry; Director of Finance and Systems, Bureau of Alcohol and Drug Abuse Services, Julie Smith; State Senator Thelma Harper; State Representative Rob Bradley; Safe and Drug-Free Schools and Communities Program Director, Mike Herrmann; and posthumously to the Executive Director of New Hope Recovery Center in Morristown, Dee Francis.

Nominations were received from across the state and judged on the following criteria:

- Significant contributions, either for a single contribution or for contributions over a long period of time.
- Demonstrating the commitment and dedication of time and talent to the substance abuse field in their organization/community.
- Being a strong representative and/or spokesperson for the substance abuse field in their organization/community.

Being resourceful in building awareness and attracting support for the substance abuse field in their organization/community.

Contributions enhance the goals of an organization or increase the quality of life in the community.

This year, the judges had their work cut out for them as they whittled through the mountain of nominations received. After long deliberations, finalists were chosen including Davidson County Sheriff Darren Hall, Hugh Bennett, Rick Bradley, Hilde Phipps, Rodney Bridges, Jim Roberts, Green County General Sessions Judge Tom Wright, Rev. Kaki Friskics-Warren, Nina Colvin, Dr. Robert Goodrich, and Tennessee Department of Health Commissioner Kenneth Robinson.

With such a list of deserving finalists, judges had a hard time coming up with just one winner. So they chose two! The Voice of Recovery Award winners for 2004 are the Reverend Kaki Friskics-Warren - former Executive Director of Renewal House in Nashville and Mr. Rick Bradley - Retired Deputy Assistant Commissioner Tennessee Department of Health, Bureau of Alcohol and Drug Abuse Services

Reverend Friskics-Warren nurtured a recovery program for addicted mothers and their children for eight years as the first Executive Director and helped to form it into the life-saving, community-benefiting agency that it is today. Hundreds of lives have been changed, and millions of taxpayer dollars have been saved because of the endless energy and concern for persons affected by addiction. Nominated by her successor and former staff members.

Kaki graciously accepted her award with a simple, "Thank You."

Mr. Rick Bradley was dedicated and conscientious in his efforts to represent the State of Tennessee, alcohol and drug abuse treatment and prevention service providers, and consumers of alcohol and drug abuse services. With his 'Can Do' attitude and ability to always get things done, Mr. Bradley cared deeply about the people he worked with and those he represented. Today in large part to his long stewardship, the State of Tennessee has a solid network of alcohol and drug abuse treatment and prevention service providers that provide quality services to those persons most in need. He retired earlier this year, after thirty-three years of dedicated service to the field of addiction services, but remains active in supporting public alcohol and drug abuse services in Tennessee.

Log onto the TAADAS website to see more pictures from the Celebration and Dinner. www.taadas.org. Click on "The Association" and then click on the "TAADAS Events" link on the left side.

Julie Smith is the Managing Director of TAADAS

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NEWS FROM CAPITOL HILL...

By Nathan Ridley

The tired and faded campaign signs are coming down, and folks are beginning to come to grips with the November election results. Not surprisingly, President Bush carried the state by fourteen percentage points. What is surprising is that after all the dust settled and several million dollars had been spent, only three seats in the General Assembly changed party affiliation.

Those three seats may well turn out to be a big deal. With two of the three being in the State Senate, for the first time since the Reconstruction Period, the Tennessee State Senate will have a majority of Republicans with a 17 to 16 margin. State Representative Diane Black defeated two term incumbent and Speaker Pro Temp Jo Ann Graves by about 2500 votes out of more than 80,000 cast. In Senate Graves's previous victories she relied on a strong margin in Robertson County to ensure her victory. While Senator Graves again carried Robertson County, her margin was not enough to overcome the huge Sumner County turnaround for President Bush, which he carried by almost a two to one margin. Challenger Jim Tracy defeated one term incumbent Larry Trail. Perhaps once again proving the adage that all politics is local, Tracy carried traditionally Democratic Bedford County by 1500 votes, and also went on to win by about 2500 votes out of almost 72,000 votes cast.

Even though the Republicans have a 17 to 16 margin now in the Senate, the gamblers still seem to be betting on John Wilder to retain his position as Speaker. Wilder has served as Speaker for 34 years, and he still knows how to cut a deal. While the pressure will be immense, four Republican senators have all given indications that they will support Wilder for Speaker. Oddly enough, three are presently serving as Wilder appointees to positions as committee chairs or a vice chair. The four are Tim Burchett, Randy McNally, Curtis Person, and Micheal Williams.

In the House, all the incumbents retained their seats with one notable exception. 18 year veteran and Finance Ways and Means Committee Chair, Tommy Head, from Clarkeville lost his seat to challenger Curtis Johnson by 2500 votes out of almost 24,000 cast. In a closely watched race, Speaker Jimmy Naifeh retained his House seat with comfortable margins in both Haywood and Tipton counties. In the House with the defeat of Representative Head, the Democrats will still have a 53-46 majority. While the loss of a single seat is not terribly significant in the overall scheme of things, ten years ago the Democratic majority in the Tennessee House was 63-36. Social issues such as abortion and gay marriage from the national level and the hangover from the effort to enact a state income tax continue to put state Democrats on the defensive. I would also suggest that our Republican friends have done a better job of encouraging participation in local government positions where candidates can be groomed for higher office.

Some have wondered aloud about the election's effects on Governor Bredesen. He assisted in fundraising efforts and in mail pieces. He even assisted by recording those automated telephone messages, we all enjoy. In short, he actively campaigned all across the state for (Continued on page 15)
NRADAN to Publish Study of Economic Benefits from Substance Abuse Treatment

Noted drug court expert Steven Belenko, Ph.D., of the Treatment Research Institute (TRI) is developing a paper entitled "The Economic Benefits of Drug Treatment: A Critical Review of the Evidence for Policy Makers." While not the first comprehensive review of its kind, the NRADAN report will be specifically directed to policy makers seeking to understand the research literature on the economic benefits of substance abuse treatment, and to provide economic justification for public support for substance abuse treatment services.

The Principal Investigator on the paper will be TRI's Steven Belenko, Ph.D., a noted expert on alternatives to incarceration for substance abusing offenders. Belenko developed two similar papers for drug courts while at the National Center on Addiction and Substance Abuse at Columbia University. Other nationally recognized participants include A. Thomas McLellan, Ph.D., TRI's Executive Director, and health economist Michael French, Ph.D., a leading researcher on the economics of treatment. The paper will be completed by the end of January 2005 and disseminated to State substance abuse agencies, treatment practitioners and legislators across the nation.

In announcing the project NRADAN Board member Jeffrey Kushner, also the Drug Court Administrator for the City of St. Louis, Missouri, noted that Belenko's Drug Court publications have had an enormous impact for the drug court field. "We are hopeful that a similar document directed at decision-makers across the country will result in a greater investment in public funding for treatment resources," he said.

Over the past decade, a number of studies have found that properly designed and delivered substance abuse treatment services can produce financial savings well in excess of the initial investment of taxpayer dollars. Most of these have not been broadly disseminated to practitioners and policy makers. Many are presented in highly technical, economic jargon that is not easily translated into a compelling argument for more treatment dollars.

The Treatment Research Institute is asking for copies of any research including fugitive research that has been completed and shows treatment cost-benefit that might meet criteria established by TRI for this publication. Agencies with cost-benefit studies should forward them to: Dr. Steven Belenko, Ph.D., Senior Scientist, Treatment Research Institute at the University of Pennsylvania, 600 Public Ledger Building, 150 South Independence Mall West, Philadelphia, PA 19106-3475 or Email at: sbelenko@tresearch.org.

The initiative, timed to coincide with NRADAN's 20th anniversary, was announced in June. Substantial funding support comes from the Scaife Family Foundation. The publication is scheduled to be printed and disseminated in January of 2005.

For more information about the study contact

Treatment Research Institute
at the University of Pennsylvania
600 Public Ledger Building
150 South Independence Mall West
Philadelphia, PA 19106

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Partially Funded by Tennessee Department of Health
Bureau of Alcohol & Drug Abuse Services
Des Moines Demand Treatment!
Starts Pretreatment Counseling

By Sarah Witham

At the 17th Cape Cod Symposium on Addictive Disorders, held September 9-12, 2004 in Hyannis, MA, the theme was "Linking Treatment: Before, During And After."

In a workshop sponsored by Employee & Family Resources (EFR), the lead agency for Des Moines Demand Treatment, and the Coalition for Outcomes-Based Benefits, Inc., the focus was on pre-treatment services.

Pretreatment services are designed to reduce the drop out rate of people referred to treatment that then have to wait weeks for a placement in a treatment program. In 2002, almost 41 percent of individuals meeting ASAM criteria and referred to treatment did not enter treatment once their intake date arrived. The staff at Employee & Family Resources in Des Moines, Iowa, saw an opportunity to keep people engaged during that crucial time period, hopefully making the transition to treatment easier and more effective for their clients.

After involving key stakeholders in the community, confirming service design and flow with providers, securing funding, and hiring staff, the program was off and running. When someone is referred to

Bradford Health Services understands the importance of living free from drugs and alcohol. We have been treating alcoholism and drug addiction for nearly a quarter of a century. Our mission is to bring hope to our patients and their families and lead them on a path of recovery. Bradford accepts TennCare and most major medical insurance.

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DECLINING STATE GOVERNMENT EMPHASIS ON SUBSTANCE ABUSE TREATMENT AND PREVENTION

By Rick Bradley

I am a concerned citizen who believes that Substance Abuse is the nation's and our state's number one health problem. To me it makes sense to spend public money on treatment of substance abuse and it is well documented on its cost effectiveness. It also strikes me that as a taxpayer more State dollars are needed for treating substance abuse which would lead to a huge savings (i.e. Less crime, incarceration, hospital visits) that could be used in other state initiatives.

I am disheartened to learn that the Substance Abuse Treatment and Prevention Program located in the Tennessee Department of Health has had State funding cut from its operating budget. As I understand it an amount of approximately $1,000,000 State funds in the current budget year has been taken from this program. I am aware that the state has been in a budgetary crisis but have difficulty understanding why this program would need to be reduced. It is my understanding that the Federal SAPT Block Grant requires a maintenance of effort for this program which means that if the State continues to reduce its funding for this program the Federal SAPT Block Grant will also be reduced in a like amount, dollar for dollar. So the total amount lost to the State this fiscal year will be $2,000,000. Why would the State of Tennessee sacrifice Federal SAPT Block Grant money needed to fund this already underfunded treatment and prevention program? I have a hard time following the logic that has led to a significant reduction in both State and Federal funding for this much needed program.

Let's do the right thing for our state's number one health problem. Restore State dollars to the Tennessee Department of Health and add more state dollars so we will not continue to lose Federal funding. We also need some long range thinking and planning regarding the Substance Abuse problem in our State. More funding for substance abuse treatment equates into taxpayer savings—a novel concept that Tennessee state government should jump at the chance to implement.

Rick Bradley is the Retired Deputy Assistant Commissioner, Tennessee Department of Health, Bureau of Alcohol and Drug Abuse Services.
TAADAS Holds First Clergy Training Event

By Vernon Martin

The first in a series of TAADAS Clergy Training events was held in Nashville on Thursday, September 23rd. Approximately 40 Clergy and other faith based attendees convened at the Alcohol and Drug Council of Middle Tennessee, a TAADAS member organization in the Nashville area. The topic was Alcoholism, Drug Addiction and Recovery in the Faith Community.

The agenda for the day included presentations on:
- The Disease of Alcoholism and Drug Addiction and How to Recognize it in your Congregation,
- Intervention Skills and Referral - Treatment Referral Sources,
- Recovery and the Church - Spiritual Issues in Addiction and Recovery / Understanding 12 Step Programs,
- Congregational Re-Entry: Dealing with Stigma and Shame; Developing a Recovery Supportive Church

Speakers and trainers for the sessions included Rev. John Ishee, Ed.D., Director of Pastoral Care at Cumberland Heights; Frances Clark, M.S., M.A.C., Director of Behavioral Health Services, Metropolitan Nashville Public Health Dept.; Rev. Dorothy H. Gager, M.Div., LCSW, Social Worker, Psychiatric Hospital at Vanderbilt, Vanderbilt University Medical Center; and Shirley Marks, M.C.J., LADAC a Nashville based Addictions Consultant.

In addition to the training handouts and presentation materials each participant received a copy of the newly developed TAADAS publication “Alcoholism, Drug Addiction and Recovery in the Faith Community: A Primer for Clergy and other Pastoral Ministers.”

TAADAS’s Clergy Training program is designed to help members of the Clergy develop the knowledge and skills to: (1) Recognize alcoholism, drug addiction and related problems within their respective congregations, (2) Appropriately intervene and make referrals, (3) Understand treatment, 12-Step programs and recovery, (4) Work supportively to reintegrate individuals in recovery back into their respective faith communities and (5) To develop Recovery Supportive / Recovery Sensitive Congregations. The TAADAS Clergy Training Community Outreach Initiative is funded in part by the Tennessee Department of Health, Bureau of Alcohol and Drug Abuse Services (BADAS). The goals for the project are taken from work done by the Substance Abuse and Mental Health Services Administration in its work Core Competencies for Clergy and Other Pastoral Ministers in Addressing Alcohol and Drug Dependence and the impact on Family Members, DHHS Pub. No. XXXX. Rockville, MD: Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, [2004].

The TAADAS Clergy training program is designed for Clergy, Pastoral Ministers and the Faith Community, but is open for any interested person to attend. The sessions are provided free of charge. Future trainings are scheduled for January - Chattanooga, February - Jackson, March - Knoxville, April - Tri-Cities Area, and May - Memphis.

To get additional information about the Clergy Training Program or to be involved with any of these events please contact Vernon Martin by phone at (615) 780-5901 Ext. 18 or via email at vernon@taadas.org.

Vernon Martin is the Community Outreach Director of TAADAS.

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Faith Based Recovery Services Database

As part of its Clergy Training and Faith Based Community Outreach Initiative, TAADAS is updating its database of clergy, clergy coalitions, and faith-based recovery services. If you would like to be listed in this database or would like to be on the Clergy Training and Faith Based Information list, please contact Vernon Martin by phone at (615) 780-5901 Ext. 18 or via email at vernon@taadas.org. In addition, if you are aware of ministerial associations, clergy groups or faith-based recovery services in your area please forward this information.
ADDRESSING ALCOHOL AND DRUG DEPENDENCE AND THE IMPACT ON FAMILY MEMBERS

These competencies are presented as a specific guide to the core knowledge, attitudes, and skills essential to the ability of clergy and pastoral ministers to meet the needs of persons with alcohol or drug dependence and their family members.

1. Be aware of the:
   - Generally accepted definition of alcohol and drug dependence
   - Societal stigma attached to alcohol and drug dependence
2. Be knowledgeable about the:
   - Signs of alcohol and drug dependence
   - Characteristics of withdrawal
   - Effects on the individual and the family
   - Characteristics of the stages of recovery
3. Be aware that possible indicators of the disease may include, among others: marital conflict, family violence (physical, emotional, and verbal), suicide, hospitalization, or encounters with the criminal justice system.
4. Understand that addiction erodes and blocks religious and spiritual development; and be able to effectively communicate the importance of spirituality and the practice of religion in recovery, using the scripture, traditions, and rituals of the faith community.
5. Be aware of the potential benefits of early intervention to the:
   - Addicted person
   - Family system
   - Affected children
6. Be aware of appropriate pastoral interactions with the:
   - Addicted person
   - Family system
   - Affected children
7. Be able to communicate and sustain:
   - An appropriate level of concern
   - Messages of hope and caring
8. Be familiar with and utilize available community resources to ensure a continuum of care for the:
   - Addicted person
   - Family system
   - Affected children
9. Have a general knowledge of and, where possible, exposure to:
   - The 12-step programs – AA, NA, Al-Anon, Nar-Anon, Alateen, A.C.O.A., etc.
   - Other groups
10. Be able to acknowledge and address values, issues, and attitudes regarding alcohol and drug use and dependence in:
    - Oneself
    - One’s own family
11. Be able to shape, form, and educate a caring congregation that welcomes and supports persons and families affected by alcohol and drug dependence.
12. Be aware of how prevention strategies can benefit the larger community.

Core Competencies for Clergy and Other Pastoral Ministers in Addressing Alcohol and Drug Dependence and the Impact on Family Members DHHS Pub. No. XXXX. Rockville, MD: Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, [2004].

CONSUMER INPUT CONTINUED...

(Continued from page 1)

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12. Be aware of how prevention strategies can benefit the larger community.

The Tennessee Association of Alcoholism and Drug Abuse Counselors (TAADAC) paid tribute to several individuals in the alcohol and drug abuse profession at the Journey Together Conference awards luncheon held on September 9, 2004.

The honorees included:

**Ms. Hilde Phipps**
2004 Tennessee Professional of the Year

**Mr. John Rollins**
2004 TAADAC George M. Allen Counselor of the Year

**Ms. Carrie Thornton-Akey**
2004 State Lifetime Achievement

**Mr. David "Boomer" Brown**
2004 State Lifetime Achievement

In addition, it was announced that NAADAC, the national association for addiction professionals honored Dr. Philip Guinsberg with the Mel Schulstad Professional of the Year Award for outstanding and sustained contributions to the advancement of the addiction counseling profession.


WORKSHOPS & TRAININGS

Our Families, Ourselves
Facilitator: Kathy Benson, Helen Ross McNabb Center, Knoxville, December 2, Contact Martha Culbertson, 865.329.9087

Dynamics of the Violence & Addiction Impacted Family
Facilitator: Kathy Benson, Helen Ross McNabb Center, Knoxville, December 3, Contact Martha Culbertson, 865.329.9087

The Use & Usefulness of the ASI in Chemical Dependency Treatment
Facilitator: Helen Yonts, Helen Ross McNabb Center, Knoxville, December 2, Contact Martha Culbertson, 865.329.9087

Recovery Zone
Facilitator: Patrick Carnes, A & D Council of Middle TN, Nashville, January 7-8, Contact Susan Young, 615.269.0029

Philosophy and Case Study Preparation
Facilitator: Karen Dennis, ACAR Center, Memphis, January 10, Contact Karen Dennis, 901.358.3748

Life Skills Refresher Course: Communication, Team-Building, and Group Dynamics
Facilitator: Life Development Center Staff, Helen Ross McNabb Center, Knoxville, January 14, Contact Martha Culbertson, 865.329.9087

Addiction Pharmacology Part 1
Facilitator: Karen Dennis, ACAR Center, Memphis, January 17, Contact Karen Dennis, 901.358.3748

FEATURED PUBLICATION:

A Family History of Alcoholism: Are You at Risk?

The 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 Clearinghouse. This month's feature is A Family History of Alcoholism: Are You at Risk?

This brochure discusses the genetics of Alcoholism and how it can affect family members; as well as outlines the characteristics of alcoholism. Should a person have a parent, grandparent, sibling, or even a distant relative who is an alcoholic (or questionably one) this is a concerning topic for them. Guidance is also given on ways that those at risk may take action to avoid alcohol dependence or alcoholism themselves.

This brochure contains information on how to get contact resources concerning alcoholism and alcoholism within families, such as Alcoholics Anonymous, Al-Anon, & ACOA. These support systems are for the alcoholic as well as for the families; should a family member be dealing with an active Alcoholic, a support group for them can be invaluable.

December is National 3D Month (Drinking & Drugged Driving) month, and February has National Children of Alcoholic's Week. Utilize The Clearinghouse as a resource for these topics; we have a plethora of publications!

To get your free copy of the featured publications, or any of the hundreds of other prevention materials, call The Clearinghouse at 615.780.5901 ext 5 or order online at www.taadas.org.

FEATURED VIDEO:

Getting Out of the Game: The Trap of DrugDealing

The Clearinghouse has over 800 videos on Substance Abuse and related issues. In each edition of the TAADAS Times, we feature one of our collection. This edition's Feature is Getting Out of the Game: The Trap of Drug Dealing.

Money, power, respect, popularity and glamour: They all come easy for the drug dealer, at least in the minds of many young recovering addicts. It's easy to understand why the lure of the dealing life style is so strong. But, hustling drugs inevitably becomes the first step on the path to addiction, prison or death. This video features a support group for people in recovery who face the temptation to return to dealing. The group grapples with real life issues such as: relationships with old friends, financial stress, the illusion that they can deal without using, the false belief that this time they won't get caught. The group participants also share the techniques and tools that have helped them stay out of the game such as: valuing their family above the street life, learning to be patient, using a support group, valuing earned money above illegal money, using memories of past negative experience to keep it green, understanding the negative impact on the community, and having a positive focus or goal.

Videos can be checked out free of charge for three (3) business days. UPS shipping is available for those checking out videos outside the Nashville area for $13.50. Call the Clearinghouse at 615.780.5901 ext 6 to check out this or any video.
GEORGE & BETTY ALLEN DONATE BOOKS TO THE TAADAS LIBRARY

TAADAS would like to extend a sincere thanks to Mr. & Mrs. George Allen. George is a pioneer in the field of alcohol and drug abuse services. He spent many years working at agencies in and around Nashville. In 1985, he was nationally awarded the "NAADAC Counselor of the Year". Although George has since retired, he still finds time and ways to battle substance abuse - he and his wife, Betty, donated over 50 books on substance abuse and related issues to the TAADAS library. Thank you George and Betty for all the books and all the years of support!

The TAADAS Substance Abuse Library has over 630 books available for check out. The library at TAADAS has books dealing with a wide array of topics that all relate in some way to alcohol, drugs, and other addictions. Library books are available for in house use and can be read in our new reading area, or they can be checked out for your convenience. The TAADAS library is open to the public, Monday–Friday from 8 am–5 pm.

WORKSHOPS & TRAININGS

Addiction Pharmacology Part 2
Facilitator: Karen Dennis, ACAR Center, Memphis, January 24, Contact Karen Dennis, 901.358.3748

Psychopharmacology
Facilitator: John Martens, A & D Council of Middle TN, Nashville, February, Contact Susan Young, 615.269.0029

Comprehensive Addiction Severity Index for Adolescents
Facilitator: Frances Clark, A & D Council of Middle TN, Nashville, February, Contact Susan Young, 615.269.0029

Mindfulness-Based Stress Reduction
Facilitator: Doris Kilgore, Helen Ross McNabb Center, Knoxville, February 2 and 16, Contact Martha Culbertson, 865.329.9087

Addiction Pharmacology Part 3
Facilitator: Karen Dennis, ACAR Center, Memphis, February 7, Contact Karen Dennis, 901.358.3748

NAADAC Exam Review
Facilitator: Karen Dennis, ACAR Center, Memphis, February 21 & 22, Contact Karen Dennis, 901.358.3748

Relationships, Sexuality, and Recovery
Facilitator: James Wilson, Helen Ross McNabb Center, Knoxville, February 24, Contact Martha Culbertson, 865.329.9087

NAADAC Exam Review
Facilitator: Karen Dennis, ACAR Center, Memphis, February 28 & 29, Contact Karen Dennis, 901.358.3748

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Survey Reveals Drop in Specialty Treatment Utilization

By Bob Curley

The latest National Household Survey on Drug Use and Health reported a decline in marijuana use, but also spotlighted a more-disturbing downward trend -- a falloff in the number of Americans receiving specialty treatment for alcohol and other drug addiction.

According to the survey, 22.2 million Americans -- 9.3 percent of the population -- needed addiction treatment in 2003. But just 3.3 million people received any kind of treatment last year, including the estimated 1.9 million individuals who took part in self-help groups like Alcoholics Anonymous.

Citing these numbers, the survey suggests little overall year-over-year change in the number of people getting "treatment" during the past year. But that's deceptive, says Ron Hunsicker, executive director of the National Association of Addiction Treatment Providers.

"Self-help should not be considered treatment," he said, "but the fact that it is an indication of how tenuous the notion is that this is a disease." Specialty treatment programs -- defined as inpatient or outpatient addiction rehabilitation centers, hospital-based inpatient programs, and mental-health centers offering addiction services -- treated a total of about 1.9 million people in 2003, or only 8.5 percent of those who actually needed care. This represented a significant decline from 2002, when an estimated 2.3 million Americans were treated in specialty programs -- down 17.3 percent in a single year.

"This decline was driven by a decrease in treatment among adults ages 26 and older, from 1.7 million in 2002 to 1.2 million in 2003," the report noted.

The definition of specialty treatment excludes treatment at hospital emergency rooms and hospital outpatient programs, private doctors' offices, self-help groups, and prisons or jails. David Gustafson, director of the Network for the Improvement of Addiction Treatment and the Paths to Recovery program at the University of Wisconsin at Madison, said any number of factors could explain the decline in use of specialized addiction programs, from patient dissatisfaction with specialty treatment to lack of insurance coverage.

"I don't think people are consciously making a decision," said Hunsicker. "I think they are being shifted -- they're being blocked from specialty treatment and seeking help elsewhere."

More treatment is being delivered via the criminal justice system, added Gustafson, and physician prescription of buprenorphine also could be having an impact on utilization of specialty treatment. "I think you could argue for any of these," he said.

The Household Survey noted that at least 273,000 people who felt they needed to get treatment in 2003 were unable to get it. About one-third of those who were ready to get treated said cost or insurance barriers prevented them from getting care; about 20 percent said they were deterred by stigma.

The barriers to treatment continue to mount, despite the spin that the federal government puts out about opening up more treatment slots," said Hunsicker.

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Pine Grove Behavioral Health and Addiction Services, The Alcohol and Drug Council of Middle Tennessee, Inc.

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Pretreatment Counseling

(Continued from page 6)

They have the opportunity to meet with Rick Rauzi, a Pretreatment Counselor. Rick gives them a warm welcome, followed by a description of the program and an invitation to participate.

The program is completely voluntary, and clients can choose their level of commitment. The process involves weekly phone calls by the counselor to check on clients and see if they have any questions about their upcoming treatment or if they have any general concerns. Group sessions that discuss specific topics such as 'what is treatment?', 'what do I want from treatment?', stages of change, conflict resolution, styles of communication, stress management, and goal setting/motivation are also held twice a week over the course of eight weeks.

EFR stresses that it is important to distinguish these groups from formal treatment groups or AA/NA meetings. Clients are also encouraged to drop in and see Rick at any time if they have questions or concerns.

From the period of September 2003 to July 2004, 784 clients have participated in the pretreatment program. Of this group, 574 have reached their treatment intake date and 417 have completed treatment (73 percent). The group hopes to have an independent evaluation of the program in the near future and also looks forward to testing the program in other communities.

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C ONSUMER INPUT CONCLUDED

(Continued from page 9)

total of 265 members on the boards of those agencies and 111 of those were ex-consumers. So, 42% of the board members of substance abuse treatment providers from across the state were people who were in recovery themselves. Additionally, there were 85 staff members in leadership positions at those agencies and 55 (66%) of those were in recovery.

So, while the mental health community is indeed to be commended for their public forums, where comments and ideas from their consumers are solicited, written down, and forwarded to the appropriate state officials for consideration, so too is the alcohol and drug abuse field to be commended for their history of providing consumer input by placing ex-consumers in decision-making positions on their governing bodies and in management positions in their programs.

Some would argue that this type of direct influence on policy and clinical practices is at least as effective, and certainly much more immediate and lasting than simply holding forums and promulgating reports for review by state officials.

But unquestioningly, each method plays an important role in ensuring that consumers are heard when decisions are being made about behavioral health treatment. And both the substance abuse field and the mental health field should continuously look for ways to expand these existing opportunities for consumer input as well as for new and creative ways to provide even more opportunity. I’m sure all would agree that any activity that increases input from the persons we serve is to be applauded.

John York is the Executive Director of Samaritan Recovery Community in Nashville and a TAADAS Sustaining member.

“The Hill… Continued....

(Continued from page 4)

Democratic candidates. He looked directly into the camera by himself in television spots for Senators Graves and Trail who both lost. He also campaigned for Representative Head, who lost. For our legislative friends who prevailed, they will be in his debt. For those he opposed, they will be miffed for a while, but they will recover when it comes time to ask for a favor from the 1st Floor of the Capitol.

I still encourage you to reach out to the newly elected legislative officials and those who have been reelected and offer your congratulations and thank them for their willingness to serve. Of course, that opportunity is also a perfect moment to convey to them the importance of substance abuse treatment for our communities. We all recognize the excitement level of presidential election years, but we also recognize that the women and men who serve in our state and local offices have a greater impact on our day-to-day lives.

This column was meant to include several thoughts about a proposal floating through the TennCare program to exclude TennCare reimbursement for Methadone. While we would have applauded that decision, recent days have revealed that TennCare as we know it, may well be on its deathbed. Governor Bredesen has announced his intentions to dismantle the program and restart a traditional Medicaid program. TennCare helps Tennessee lead the nation in two categories. First, TennCare covers 23.2% of Tennesseans, and TennCare uses 33.3% of our total state budget expenditures. Yet Tennesseans pay the 49th lowest taxes of any state in the country. The Governor feels that the program is unsustainable, and the Governor seems to have popular sentiment on his side. The disenrollment of 400,000 people, however, who are currently part of the TennCare expansion population will create severe stresses and strains on the state’s health care delivery system.

Nashville attorney Gordon Bonnyman, who has advocated on behalf of TennCare recipients and prevailed more than once in a judicial setting, has asked for one more week to continue to talk about this decision. His discussion and its repercussions now seem poised to dominate the 2005 legislative session.

Nathan Ridley is an attorney with Boult Cummings, Conners & Berry. P.O. Box 314, Nashville, Tennessee 37201. Email Nathan at nridley@boultcummins.com.


An Alabama doctor who lost a brother to methamphetamine addiction has formed a support group called Mothers Against Methamphetamine (MAMa), the Associated Press reported August 28.

"After he died, I started looking into it as a physician, as a scientist," said Dr. Mary Holley, an obstetrician in Albertville. "What is this drug that destroyed his life in just two years?"

Holley formed the group last year and there now are chapters in Tennessee (Memphis, Sparta, and Bradford), Georgia, Oklahoma, Missouri, and Ohio.

The group works with churches to form addiction-support groups. In addition, the MAMa website offers information that explains the dangers of meth.

"People don't realize what this drug is doing," Holley said. "One look at the brain scan in my pamphlets will change that attitude."

Holley, a Christian, said a religious approach to treating drug addiction is more effective than law enforcement. "Law enforcement is helpless. They can't possibly bust everyone. They can't keep them in jail long enough for them to heal," Holley said. "Education is helpless. They lack the resources and the moral authority to change the situation."

Holley said that when speaking with young people, she found that, "20 percent of meth users are basically healthy kids who made a bad decision. About 75 percent are broken, hurting people, abused and battered as kids. They use this drug because it works. It makes them feel better. They have been rejected and humiliated and miserable people all their lives. It just makes everything better. This stuff works."

For more information check the website www.mamasite.net.
TAADAS HIV/AIDS Outreach, Education, and Referral Program

By Vernon Martin

The HIV/AIDS Outreach, Education and Referral Program is a community education initiative of TAADAS and is funded in part by the Tennessee Department of Health.

The goal of the project is:
- To impact the spread of HIV and AIDS by providing education, information and outreach to communities, alcohol and drug service providers, the substance abusing population, State Departments and organizations, Community Prevention Initiative Programs, grass roots organizations, professionals, businesses, faith organizations, schools and private citizens.

The major objective of the project is:
- To raise awareness of the risk of HIV infection, and of resources for those infected with HIV and those who have developed AIDS.

TAADAS accomplishes this by:
- Providing HIV/AIDS information and education to the substance abusing population and the citizens of Tennessee in general through the distribution of literature via community events and health fairs, the Clearinghouse and REDLINE. Information is available to anyone and all contacts are confidential.
- Providing referrals to the substance abusing population for HIV/AIDS services via the REDLINE.
- Providing HIV/AIDS education and literature regarding the most current research and practices in HIV Intervention and HIV/AIDS services to alcohol and drug service providers and the HIV Early Intervention programs.

HIV/AIDS and Alcohol and Drugs

The primary focus of the TAADAS HIV/AIDS Outreach, Education and Referral Program is the relationship between HIV/AIDS and the use and abuse of alcohol and other drugs.

As reported by the HIV/AIDS Bureau of the US Health Resources and Services Administration (HRSA), "The spread of HIV disease in the United States is fueled in part by the use of illicit drugs. In addition to direct transmission through the sharing of needles, indirect transmission occurs through sexual contact with HIV-positive injection drug users. Moreover, the use of noninjected drugs increases risk for HIV because of its effect on decision making and sexual risk taking.

HRSA further reports that:
- In 2000, the exposure category for 27.4% of new adolescent and adult AIDS cases was injection drug use (IDU). In some jurisdictions, IDU is responsible for more than one-half of new HIV infections.
- Among women, 33% of new AIDS cases were attributed to IDU in 2000, and an additional 16.8% resulted from sexual contact with an IDU.
- Among men, IDU was the

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HIV/AIDS and Alcohol and Drugs

(Continued from page 16)

exposure category in 26% of cases, and an additional 2.9% resulted from sexual contact with an IDU; 6% were in the exposure category men who have sex with men and inject drugs (MSM/IDU).

Reference: HIV/AIDS Bureau, US Health Resources and Services Administration website. 10/04

The National Institute on Alcohol Abuse and Alcoholism reports: “People with alcohol use disorders are more likely than the general population to contract HIV (human immunodeficiency virus). Similarly, people with HIV are more likely to abuse alcohol at some time during their lives. Alcohol use is associated with high-risk sexual behaviors and injection drug use, two major modes of HIV transmission. Concerns about HIV have increased as recent trends suggest a resurgence of the epidemic among men who have sex with men, as well as dramatic increases in the proportion of cases transmitted heterosexually. In persons already infected, the combination of heavy drinking and HIV has been associated with increased medical and psychiatric complications, delays in seeking treatment, difficulties with HIV medication compliance and poorer HIV treatment outcomes. Decreasing alcohol use in people who have HIV or who are at risk for becoming infected reduces the spread of HIV and the diseases associated with it.”

Reference: National Institute on Alcohol Abuse and Alcoholism Publication No., 57 September 2002

Diane Stem Selected for Statewide Recognition

By Harvey Weiss

Several years ago I received a call from Diane Stem from Tennessee – she just lost her son Ricky Jr. to huffing. Diane and her husband Ricky Sr., as so many other parents who have gone similar tragedies, were determined to speak out to save other parents and families the pain of this soul-numbing ordeal. Diane spoke at one of the first DC news conferences hosted by the National Inhalants Prevention Coalition (NIPC) and she and Ricky Sr. speak to large and small groups throughout Tennessee. A year or so ago Diane had a career change and became a very successful realtor for Crye-Leike Realtors in TN.— and her advocacy efforts continued. Because of her commitment and activities Diane was nominated for the ‘Good Neighbor’ Award from the Tennessee Association of Realtors. About a month ago, in Memphis, Diane received the award – a cash award. What will Diane do with this? As a memorial to Ricky Jr. Diane will provide NIPAW local coordinator kits to schools and organizations throughout middle-Tennessee. To facilitate this effort the NIPC will be working with TAADAS and the TN Office of Safe & Drug Free Schools and Communities.

Harvey Weiss is the Executive Director of the National Inhalant Prevention Coalition. For more information about NI PC, log onto their website www.inhalants.org

Fast Facts...

- “Between 1995 and 2001, the proportion of substance abuse treatment admissions with co-occurring psychiatric disorders increased from 12 to 16 percent.” SAMHSA’s Treatment Episode Data Set (TEDS) report
- “In 2003, 20.3 million needed addiction treatment and did not get it.” SAMHSA’s 2003 National Survey on Drug Use and Health
By Vernon Martin

In September and October, TAADAS Staff worked with Vaughn Ownbey of the Partnership for a Drug-Free America (PDF) to distribute Prevention oriented public service announcements in the Nashville and Memphis markets. The PDFA Summer 2004 materials were released in late summer. As part of this endeavor, TAADAS has the materials localized and they are distributed to the media as the Partnership for a Drug-Free Tennessee and Partnership for a Drug-Free Memphis. TAADAS is the Tennessee affiliate of the PDFA and has been active in this program for a number of years.

TAADAS and PDFA staff met with representatives from the various TV and Radio broadcast groups in Nashville and Memphis and distributed broadcast quality tapes of 88 TV public service announcement spots and CD’s of 23 Radio PSA spots. Materials were distributed to the following broadcast media groups:

Nashville
Comcast Cable, WSMV TV, WXRN TV, WPX TV (PAX 28), WTVF TV, FOX 17 TV, WB 58, and UPN 30, Cumulus Radio, (WSM Radio, Star 97, WWTN, WQQK, Blazin’ 97)

Memphis
WHBQ TV (Fox), WREG TV, WMC TV, WPY ABC24, WLMT TV (UPN) and Warner Bros. TV, Infinity Broadcasting, ClearChannel Radio and the Memphis Radio Group. (Approximately 40 Radio Stations).

The Partnership for a Drug-Free America(PFDA) is a private, non-profit coalition of professionals from the communications industry. The PDFA is best known for its national, drug-education advertising campaign, such as the now famous “This is your brain; This is your brain on drugs!” spot. The Partnership exists to help kids and teens reject substance abuse by influencing attitudes through persuasive information. TAADAS is part of the PDFA’s State/City Alliance Program which supports the Partnership’s mission at the local level, reaching more than 96 percent of all U.S. television households.

The Partnership continues to make major national strides such as the advent of a relationship with Major League Baseball to have players from a number of teams appear in PDFA public service announcements. In addition, on October 16th, Comcast, the country’s leading cable and broadband communications provider, announced a three-year cross-channel advertising commitment on its cable systems in 35 states to help the Partnership for a Drug-Free America® and its affiliates increase exposure for anti-drug advertising. Valued at $50 million, this is the largest single upfront commitment of advertising from a major media company to The Partnership in the organization’s history. The majority of initial campaign messages will focus on educating viewers on Ecstasy and Methamphetamine abuse, as well as encouraging parents to make “knowing the whereabouts of their teens” a high priority. Over time, the campaign increasingly will focus on regional needs and drug threats. The Partnership’s messages will air on a wide range of cable networks on Comcast systems across a variety of viewing times, including prime time. With Comcast’s strong presence in Tennessee and the Nashville area, TAADAS’s Partnership for a Drug-Free Tennessee project will benefit from this affiliation. Per Vernon Martin, TAADAS’s Community Outreach Director, “This represents a great opportunity and the emphasis on “Meth” is particularly timely and needed. Comcast is to be applauded for its willingness to help the Partnership deliver its messages of ‘hope, help, and warning,’ to the youth and parents of Tennessee.”

As part of TAADAS’s participation in the state affiliate program, all Partnership materials are made available to TAADAS at no cost.

Vernon Martin is the Community Outreach Director at TAADAS.
TAADAS Members

TAADAS would like to thank each of the following members for their support and involvement in Championing the Cause!

Sustaining Members
- Agape, Inc., Knoxville
- APSU-TN Drug Council of Middle TN, Nashville
- Appling Manor, Jackson
- Buffalo Valley, Inc., Lebanon
- CADDAS, Chattanooga
- Comprehensive Community Services, Johnson City
- E.M. Jellison Center, Knoxville
- Grace House, Memphis
- Harbor House of Memphis, Memphis
- Hope of East Tennessee, Oak Ridge
- JACOA, Jackson
- Jack Trice Bank, Savannah
- Memphis Recovery Center, Memphis
- New Directions, Memphis
- The Pathfinders, Inc., Gallatin
- Place of Hope, Columbia
- Renewal House, Inc., Nashville
- Samaritan Recovery Community, Inc., Nashville
- Serenity Recovery Center, Memphis
- Synergy Treatment Center, Inc., Memphis
- Tony Rice Center, Shelbyville

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- Stacy Bernard
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- Dorothy Giger
- Ester Johnson
- Patsy Caullf
- Claudia Cornnell
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- Marcella Jordan
- Kenneth Jones
- Dr. Sarah Keed
- Deana Kinaman
- Dr. Morris Klass
- Judy Love
- Angela Lyons
- Shirley Marks
- Vernon Martin
- George Massengale
- Jennifer McEntee
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- Eileen White
- Tammy Williams
- Walter Williams
- Gary Woodyard-Smith
- John York

How do I join TAADAS?
To join TAADAS and influence the future of alcohol and drug services in Tennessee, simply fill out the Membership Application on the back page 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 allies statewide.

What is TAADAS?
TAADAS, the Tennessee Association of Alcohol, Drug and other Addiction Services, Inc., 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 and fostering a statewide association to promote common interest in prevention, control, and eradication of alcoholism and other drug dependency.”

Does TAADAS have any programs?
Yes. Through a grant from the Tennessee Department of Health, TAADAS operates 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 also 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 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.

Why should I join TAADAS?
Anybody can join TAADAS. The only 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.

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
- Free Subscription to the TAADAS Times, which is a quarterly newsletter bringing the latest news, agency profiles, training, and conference information
- Special discounted hotel rates in Nashville
- Discounts at Recovery Books & Things
- Job Postings
- Membership certificate suitable for framing

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Corporate Members
- Alcohol & Chemical Abuse Rehab Center
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- Clearinghouse Peace Health Services
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- Board of Directors
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- Keystone Recovery Center, Inc.
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- Magdalene House
- Nashville Drug Court Support Foundation
- New Hope Recovery Center
- Operation Stand Down Nashville
- PACE International Union
- Penansila Lighthouse
- Powell Enterprises
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- TN Professional Assistance Program
- Turn Around
- Xebec Management, Inc.

Student Members
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Mike McLoughlin, Vice President
Sharon Trammell, Secretary/Treasurer

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." TAADAS programs are funded in part by a grant from the Tennessee Department of Health, Bureau of Alcohol and Drug Abuse Services. For more information about becoming a member of TAADAS, contact the association at:

TAADAS
1800 Church Street, Suite 100
Nashville, TN 37203
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The TAADAS Times Newsletter is a quarterly publication edited and produced by TAADAS staff. It is distributed to over 2500 substance abuse professionals, Business Leaders, Legislators, and Concerned Citizens across Tennessee and published on the Internet, www.taadas.org. TAADAS accepts paid advertising for inclusion in the TAADAS Times and reserves the right to reject advertising that does not reflect our mission and purpose. 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:

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THE TENNESSEE ASSOCIATION OF ALCOHOL AND DRUG ABUSE SERVICES, INC.
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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: ___________________ Referring Member: (If Applicable) ______________

Level of Involvement: Student: $20 _____
                      Individual: $50 _____
                      Corporate: $2500 ______ $1000 ______ $500 ______ $100 ______ 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.