



# ATTC Tackles Treatment Workforce Issues

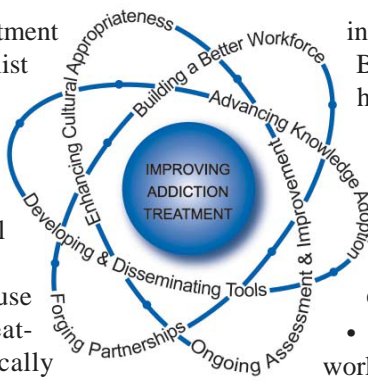
Ask any administrator at any treatment center in any area of the country to list his or her top three concerns for the next five years, and issues related to workforce development will certainly be mentioned. Recruiting and retaining qualified people is crucial to delivering competent treatment.

“The Center for Substance Abuse Treatment’s (CSAT) National Treatment Plan Initiative (NTP) specifically highlights workforce development as an integral part of creating a quality treatment system,” says Mary Beth Johnson, director of the ATTC National Office. “The ATTC Network is now taking concrete steps to address this area of focus.”

The treatment workforce by its very nature presents a number of challenges. For example: there are practitioners from many disciplines providing services; there are many different types of treatment settings; many educational venues offer training opportunities for practitioners; diverse client groups present unique needs and issues, and credentialing requirements vary from one discipline to another. All of these factors make creating consistent practices for recruiting, educating and maintaining a qualified workforce an imposing task.

To begin exploring how best to meet these challenges, staff from the ATTC Network and the Practice Improvement Collaboratives (PIC) spent a full day at a recent ATTC Network meeting learn-

ing about workforce-related issues. Below is some of the information highlighted that day.



## Current Treatment Workforce Demographics

- The substance abuse treatment workforce is estimated at 200,000 people
- Seventy percent of the workforce is female
- Of the entire workforce, 130,000 people are direct care staff
- The average counselor is a 45-year-old female who sees 29 clients in a 50-hour work week
- There is an under-representation of all racial and ethnic minority groups among licensed substance abuse counselors compared to their client counterparts

## Training the Workforce

- Each year over \$1000 per person is spent on training activities for the substance abuse treatment workforce. Of these, 34% are personal dollars spent by practitioners
- Dual diagnosis and adolescent issues are the most sought after training topics
- Time is the leading barrier to implementing new knowledge and skills learned in trainings

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## ATTC Network

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**Great Lakes ATTC**  
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**The greatest utility of Dr. Cherpitel's work will be the more universal adoption of alcohol screening by clinicians using questionnaires such as RAPS4-QF.**

**Hopefully universal screening in general health surveys, primary care offices and emergency departments will become the norm.**

- Robert Woolard,  
Chair of Brown  
Medical School's  
Section of  
Emergency  
Medicine

## Buprenorphine Receives Approval by FDA

In October 2002, two pill-based formularies of buprenorphine received approval from the Food and Drug Administration (FDA) for the treatment of opioid dependence. Following the approval, John Walters, director of National Drug Control Policy stated, "The FDA approval of buprenorphine is a significant advance in the treatment of opiate addiction. For the first time, physicians now have a medication they can use in an office-based

setting to treat those who are opiate dependent."

Subutex and Suboxone, the pill forms of buprenorphine, are expected to be available in pharmacies in the next few months. Federal officials plan to promote a national campaign encouraging physicians to complete an eight-hour training program in order to dispense these medications. For more information, visit [www.buprenorphine.samhsa.gov/bwns](http://www.buprenorphine.samhsa.gov/bwns).

## Comparing Screening Instruments for Alcohol Dependence and Abuse

*Each month the ATTC highlights research from the journal Alcoholism: Clinical and Experimental Research, the official journal of the Research Society on Alcoholism. The article below was written based on the following published research: Cherpitel, C.J. (November 2002). Screening for alcohol problems in the U.S. general population: Comparison of the CAGE, RAPS4 and RAPS4-QF by gender, ethnicity and services utilization. Alcoholism: Clinical and Experimental Research, 26(11), 1686-1691.*

In an effort to identify an effective and short screening instrument for alcohol-use disorders, a study in the November issue of *Alcoholism: Clinical and Experimental Research* compares the performance of two short screening instruments.

The Rapid Alcohol Problems Screen (RAPS) is a five-item instrument, derived from other screens, that is designed to maximize sensitivity while maintaining good specificity. The RAPS4, a further refinement of the RAPS, asks if an individual felt guilt after their drinking (Remorse), could not remember things said or done after drinking (Amnesia), failed to do what was normally expected after drinking (Perform), or had a morning drink (Starter).

The CAGE questionnaire is a short screening instrument commonly used in the clinical setting that asks if an individual has thought about Cutting down on their drinking, become Annoyed by criticism of their drinking, felt Guilty about their drinking, or had a morning drink as an 'Eye opener.'

The study compares performance of the RAPS4 and CAGE against the World Health Organization's International Classification of Disease (ICD-10)

and the Diagnostic and Statistical Manual of Mental Disorders – Fourth Edition (DSM-IV) criteria.

"Numerous screening instruments exist for alcohol-use disorders," explains Cheryl J.

Cherpitel, a senior scientist with the Alcohol Research Group and author of the study.

"Their usefulness may

be limited to certain populations, however, and for identifying alcohol dependence rather than harmful drinking. Little research

has been done on how well they work for women or among ethnic minorities in the U.S."

Researchers analyzed data from the Alcohol Research Group's 2000 National Alcohol Survey, gathered from 7,612 interviews with individuals from the U.S. general population, aged 18 and older.

In general, the RAPS4 outperformed CAGE among the population examined. When two quantity-frequency (QF) questions (drinking five or more drinks on an occasion and drinking as often as once a month) were added to the RAPS4, the RAPS4-QF performed significantly better for alcohol abuse, and outperformed CAGE across all gender, ethnic and service-utilization groups.

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# Counselor Reflections



Mar a Noelia Miranda

“People who believe that someone suffering from an addiction should have the opportunity to overcome it are the kind of people we need in this field,” states María Noelia Miranda. Ms. Miranda is committed to providing these opportunities for her clients everyday in a Puerto Rico community-based substance abuse and AIDS outreach program at the Center for Addiction Studies at the Universidad Central del Caribe, School of Medicine (UCC).

As project coordinator for this service project, Miranda makes overcoming addiction a reality by employing strategies of motivational interviewing coupled with a theory on the stages of change. This dynamic combination serves clients well by giving them opportunities to develop relapse prevention and self-efficacy skills.

Miranda believes that clients rely on counselors’ persistence in order to realize change. “No matter how long it takes a client to achieve his or her goal of sobriety, every conduct modification counts during the process of change,” she notes. “I think it is important to have that perspective, that no effort to change is in vain.”

Throughout her career, Miranda’s clients have been directly impacted by her own efforts to change through education. In 1989, Miranda entered the treatment field working as a nurse. Several years later she began attending seminars offered by the Caribbean Basin, Hispanic/Latino & U.S. Virgin Islands ATTC (Caribbean Basin), formerly called

the Puerto Rico & U.S. Virgin Islands ATTC. In 1998, thanks in part to a scholarship from

Caribbean Basin, Miranda completed a master’s in Health Science from UCC. Even today, Miranda continues to take advantage of educational opportunities offered through Caribbean Basin. She has attended classes on 12-step programs, criminal justice and substance abuse, motivational interviewing and the neurobiology of addiction.

As she watches the treatment field evolve, Miranda is concerned about its future. Her overall hope for the field is that there will be a shift in the focus of public policy. “The field should focus on prevention, treatment improvement and evaluation. Punishment is not the right way to treat people who are suffering from substance abuse or dependence,” she continues.

Miranda contributes to the growth of the field by training other substance abuse counselors. As a certified counselor herself, she also serves as president of the newly convened Puerto Rico Certification Commission for Substance Abuse Counselors affiliated with the UCC.

Miranda considers serving people who are suffering from addiction, and contributing to their change in health a privilege. “The most rewarding part of working in the field of substance abuse treatment is knowing that I am a facilitator.”

**No matter how long it takes a client to achieve his or her goal of sobriety, every conduct modification counts during the process of change.**

**I think it is important to have that perspective, that no effort to change is in vain.**

- Mar a Noelia  
Miranda

## Substance Abuse Web Resources

Community Anti-Drug Coalitions of America .....	www.cadca.org
Leadership to Keep Children Alcohol Free .....	www.alcoholfreechildren.org
Managing Anxiety in Times of Crisis .....	www.mentalhealth.samhsa.gov/cmhs/ChildrenAnxiety
Paths to Recovery .....	www.pathstorecovery.org
Working Partners for an Alcohol- and Drug-free Workplace .....	www.dol.gov/dol/workingpartners.htm
Substance Abuse and Mental Health Services Administration (SAMHSA) .....	www.samhsa.gov
Center for Substance Abuse Treatment (CSAT) .....	www.samhsa.gov/centers/csat2002
Center for Substance Abuse Prevention (CSAP) .....	www.samhsa.gov/centers/csap/csap.html
Center for Mental Health Services (CMHS) .....	www.samhsa.gov/centers/cmhs/cmhs.html

Networker

## Central East ATTC Investigates Needs of the Regional Workforce

To learn more about the Central East ATTC's projects, call 240-645-1145 or visit their Web site at [www.ceattc.org](http://www.ceattc.org).

Workforce development has become a prime focus for a number of organizations in the substance abuse treatment field, including CSAT and the ATTC Network. The Central East ATTC (Central East) has begun work in their region (Washington D.C., Delaware, Kentucky, Tennessee and Maryland) to define who the substance abuse treatment workforce is, and what is needed to recruit and retain qualified practitioners to the field.

Central East staff are currently working with Kentucky's Department of Mental Health/Mental Retardation and the Division of Substance Abuse to examine the substance abuse treatment workforce in that state. In October 2002, a survey was sent to approximately 400 state providers to collect information about practitioner demographics, staff turnover, barriers to entering the treatment field and job satisfaction.

Once collected, the survey data will be analyzed and Central East staff will work with a Kentucky Workforce Development Task Force to develop a strategic plan for recruiting and retaining qualified treatment workers. The task force's goal is to improve the quality of addiction treatment for citizens throughout Kentucky by continuing to build and develop a competent workforce.

"We can't make a plan until we have the data back, but I suspect there will be some trends that we already know about," says Linda Kaplan, director of Central East. "Salaries are typically an issue. We need to build a career ladder for counselors. They enter the field to work with people, but to move up they typically need to move into administrative or managerial functions. Many times they don't have any training in these areas."

Kaplan believes clinical supervision is also a problem, especially in rural areas. "We need to help counselors gain access to appropriate clinical supervision as mandated by certification

requirements," she continues.

Central East staff are considering developing an online leadership institute with both management and clinical supervision tracks to meet some of the educational needs of treatment practitioners in the region. They will also offer a technology conference in the next year to focus on teaching agency practitioners how to best utilize technology in their practice.

"I think getting a clear picture of who the current workforce is, and understanding what is needed to enhance the skills of new practitioners is critical. As data is collected, we will continue to work with the state of Kentucky to address concerns around training, technology, certification, clinical supervision and resource allocation," Kaplan notes.

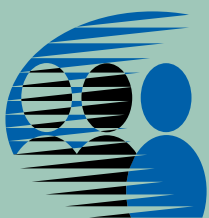
Similar initiatives are being developed for other states in the Central East region as well. Look for information about the results of this and other workforce development surveys in future issues of *The ATTC Networker*.

For more information about Central East initiatives and projects, visit their Web site at [www.ceattc.org](http://www.ceattc.org) or call 240-645-1145.



**Central East ATTC Staff (from left to right):**

Aaron Williams, Hanna Meyer, Val Robinson, Linda Kaplan, Kathleen Hauck, Glenda Clare



## CHHATT Reaches Out to Outreach Workers

One specific way the Central East ATTC (Central East) is working to enhance the workforce is through their Center for HIV, Hepatitis and Addiction Training and Technology (CHHATT). This program was developed to provide information about addiction-related HIV/AIDS, Hepatitis and other infectious diseases to outreach workers.

Outreach is an essential component of prevention efforts for out-of-treatment drug users and other hard-to-reach populations. It is a strategy for bringing services to the places where a group of people reside and work.

As a way to learn more about the outreach workforce in their community, CHHATT staff conducted focus groups in Wilmington, Delaware and the District of Columbia over a two-year period. Many issues were raised during these discussions, but the main issue centered on the inconsistency of training for outreach workers.

To address this problem, CHHATT staff formed a National Advisory Board for Outreach Standards. This group worked to develop an outline of the minimum competencies needed by outreach workers to be effective in the area of addiction and infectious diseases. Their end-product, called *Outreach Competencies-Minimum Standards for Conducting Street Outreach (Outreach Competencies)*, is a tool

for educators and curriculum developers to use in building resources and training packages.

The *Outreach Competencies* define the required knowledge, skills and attitudes needed by outreach workers. This document is currently being translated into Spanish by staff at the Caribbean Basin, Hispanic/Latino & U.S. Virgin Islands ATTC.

Additional outreach tools have also been developed by CHHATT staff including an online course, a toolkit for trainers of outreach workers and a manual for creating an effective mobile outreach prevention program.

One key training that CHHATT offers is an annual conference based on the *Outreach Competencies*. This year's *Keeping It Real 2002* conference focused on street level intervention strategies, HIV/HCV in the criminal justice population and strategies for mobilizing community leaders. "People are clamoring for information relating to outreach," says Linda Kaplan, director of Central East. "More than 150 participants attended this year's conference, and we are planning to offer additional outreach workshops in the next year."

To learn more about CHHATT trainings and products, visit the Central East Web site at [www.ceattc.org](http://www.ceattc.org), or call 240-645-1145.

## ATTC Provides Free, Monthly E-Magazine

For more than two years now, the ATTC has provided a valuable monthly resource to treatment professionals. *Eye on the Field*, an electronic magazine (e-zine) with more than 6,400 subscribers, features hot topics in treatment such as new research, grant and funding opportunities, resources in Spanish, national events and links.

Anyone with e-mail can subscribe to *Eye the Field* for free. When you subscribe, you'll receive the publication as an e-mail with a table of contents once a month. Articles are grouped into categories, and you simply click on links to select topics for reading.

To view recent editions of *Eye on the Field* or to subscribe, visit the ATTC Network Web site at [www.nattc.org](http://www.nattc.org). To have something highlighted in this publication, send an e-mail to [no@nattc.org](mailto:no@nattc.org).

### The Change Book

*A Blueprint for Technology Transfer*



*"Thank you for helping structure my thinking, and providing an invaluable tool for my everyday work."*

*The Change Book: A Blueprint for Technology Transfer* has earned widespread acclaim for its innovative approach to implementing change in agency settings.

Using case study examples to demonstrate the

approach, this step-by-step guide addresses the unique needs of treatment administrators, staff, educators and policy makers.

See for yourself why so many people are using *The Change Book*. Download a free copy at [www.nattc.org](http://www.nattc.org).

ATTC National Office

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## Workforce Issues - from pg 1

According to H. Westley Clark, MD, JD, MPH, director of CSAT, the workforce of the future must be “broad based in nature and scope; involve health care physicians from multiple disciplines, involve health professionals across specialties; and involve care givers who individually and collaboratively provide services.” Realizing this vision, and assembling and serving this population will require creativity with limited resources.

To learn how best to utilize these resources, Brooks Holtom, Ph.D., an expert on general workforce issues from Georgetown University, presented his perspective on how to achieve these long-term goals. Holtom believes resources would best be spent in the following areas:

- **Recruitment:** Maximizing the pool of qualified applicants
- **Readiness:** Selecting the most ready and qualified applicants
- **Rewards:** Rewarding performance appropriately
- **Retention:** Keeping qualified staff in the workforce
- **Job Embeddedness:** Examining why people stay in an organization or field; focusing on fit, links, and sacrifices

Based on information gained at this meeting, ATTC staff will continue working to address the needs of the current workforce, and to develop and recruit qualified practitioners for the field. Look for more information about workforce development initiatives in future issues of *The ATTC Networker*.

## Screening Instruments - from pg 2

The RAPS4-QF also appeared to be most sensitive for alcohol abuse reporting emergency-room (ER) use.

“Patients with mild alcohol problems [such as] harmful drinking will respond to a doctor’s advice or brief counseling session(s),” explains Robert Woolard, chair of Brown Medical School’s section of emergency medicine. “By intervening early when or before negative consequences arise from drinking, the poor outcomes associated with dependence, as well as progression of alcohol abuse to dependence, can be avoided.”

“Given the findings reported in this article,” says Cherpitel, “and previous findings from ER studies, I think the RAPS4 and RAPS4-QF hold a great deal of promise for use in brief screening for alcohol dependence and harmful drinking. For the average [person, this] means that a few questions can help the doctor or nurse determine who may have a drinking problem which could be helped.”

“Busy clinicians need reliable and short screening tests,” concurred Woolard. “[But] the greatest utility of Dr. Cherpitel’s work will be the more universal adoption of alcohol screening by clinicians using questionnaires such as RAPS4-QF. Hopefully universal screening in general health surveys, primary care offices and emergency departments will become the norm.”

*To view the complete article, visit the ATTC Network Web site at [www.nattc.org](http://www.nattc.org). Click the “Addiction Science Made Easy” link.*

## Mental Health/Juvenile Justice Center Established

Recent findings show that large numbers of youth in the juvenile justice system have serious mental health disorders. Many also have a co-occurring substance use disorder. Often effective treatment and diversion programs that would result in better outcomes for these youth and their families, and less recidivism back into the criminal justice system, are simply not available.

To respond to these needs, a National Center for Mental Health and Juvenile Justice

(NCMHJJ) has been established with major support from the John D. and Catherine T. MacArthur Foundation and the Office of Juvenile Justice and Delinquency Prevention.

The Center promotes awareness of the mental health needs of youth in the juvenile justice system and assists the field in developing improved policies and programs based on the best research and practice available.

To learn more about this project, visit [www.ncmhjj.com](http://www.ncmhjj.com) or call 1-866-9NCMHJJ.

# 2003 Awareness Calendar

*Calendar compiled by the National Council on Alcoholism and Drug Dependence, Inc.*

## FEBRUARY

**9-15 • National Children of Alcoholics Week**  
National Association for Children of Alcoholics • [www.nacoa.org](http://www.nacoa.org)

## MARCH

**16-22 • National Inhalants and Poisons Awareness Week**  
National Inhalant Prevention Coalition • [www.inhalants.org](http://www.inhalants.org)

## APRIL

**1-30 • Alcohol Awareness Month**  
National Council on Alcoholism and Drug Dependence, Inc. (NCADD) • [www.ncadd.org](http://www.ncadd.org)

**1-30 • Child Abuse Prevention Month**  
Prevent Child Abuse America • [www.preventchildabuse.org](http://www.preventchildabuse.org)

**4-6 • Alcohol-Free Weekend**  
National Council on Alcoholism and Drug Dependence, Inc. (NCADD) • [www.ncadd.org](http://www.ncadd.org)

**10 • National Alcohol Screening Day**  
Screening for Mental Health, Inc. • [www.mentalhealthscreening.org/alcohol.htm](http://www.mentalhealthscreening.org/alcohol.htm)

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### The ATTC Networker

*is a quarterly publication of the Addiction Technology Transfer Center (ATTC) Network designed to deliver information about ATTC projects and the substance abuse treatment field.*

*The ATTC Network serves all 50 states, the District of Columbia, the Pacific Trust Territories, Puerto Rico and the U.S. Virgin Islands.*

*Direct comments regarding this publication to Angie Olson, editor at [angieo@kc.rr.com](mailto:angieo@kc.rr.com) or call the ATTC National Office at (816) 482-1200.*

## Online Prevention Tools Available from CSAP

[www.soyunica.gov/adults](http://www.soyunica.gov/adults)

Talking to kids about the dangers of alcohol and drug abuse is a challenge for anyone. In addition, if you are Hispanic/Latino, finding materials that speak to you can be a struggle. In an effort to alleviate these difficulties, the Center for Substance Abuse Prevention (CSAP) is proud to introduce its first bilingual parenting site – Hablemos en Confianza.

The culturally appropriate site is designed to encourage dialogue between Hispanic/Latino parents and children. It offers advice about listening/talking with children, parenting tips and information on alcohol, tobacco and illicit drugs.

*It's On  
the Web!*

[www.samhsa.gov/preventionpartners](http://www.samhsa.gov/preventionpartners)

Another important prevention Web site sponsored by the Center for Substance Abuse Prevention (CSAP) is called Partners for Substance Abuse Prevention. The site gives prevention-related organizations a voice and a centralized location for resources to enhance their work. The goal is to help these groups network and partner to leverage resources, magnify their impact and expand their reach in preventing substance use and abuse.

Some of the tools available on the site include a nationwide list of organizations involved in addiction prevention, a virtual meeting place to exchange information, a monthly topic focus area, a voices from the field section and prevention links.