

**MINUTES**  
**Of the organizational meeting of the**  
**Society for Adolescent Substance Abuse Treatment Effectiveness (SASATE)**  
A Satellite Meeting of the College on Problems of Drug  
Dependence (CPDD) Conference  
Quebec City, Quebec, Canada  
June 10, 2002, 7:30pm-10:30pm

**Objectives**

1. Define the objectives and mission of SASATE.
2. Continue the process of learning more about what we are each doing.
3. Identify next steps we can take to facilitate the mission of SASATE and its participants.

**Agenda**

Introduction  
Organizational Genesis  
Mission  
Specific Presentations  
Next Steps

**Introductions**

Dr. Michael Dennis (chair) <mdennis@chestnut.org> welcomed the participants (approximately 60-70 people in attendance) and noted that this organizational meeting would be a formative process to identify common ground in a diverse group. Dr. Dennis also paid special thanks to Randy Muck <rmuck@samhsa.gov> of the Center for Substance Abuse Treatment (CSAT), who through a contract with Northrop Grumman Information Technology (NGIT), has provided the support for the SASATE e-mail list server <sasate@listmgr.row.com>.

Each participant then took a turn telling the group the following information: a) Where they were from, b) What they study or do, and c) What they hope to get out of SASATE. The participants were diverse in terms of where they came from organizationally, geographically, and in terms of training. Some of the key things they hoped to get out of SASATE include:

- Colleagues to discuss and help solve methodological issues in doing good treatment research on adolescents
- Information on training and workforce issues related to adopting evidence-based practice and providing effective care.
- More information and training on issues related to
  - Assessment strategies (instruments and adoption strategies) and information on co-occurring disorders
  - Chronic nature of abuse/addiction and long-term recovery rates
  - Effective models of family-based therapy
  - Effective models of aftercare/continuity of care

- Working with people in other systems (child welfare, criminal justice, etc.)

Dr. Dennis noted that the charge for the group was to discuss the mission, structure, and affiliations (e.g., satellite meetings at CPDD or other conferences) to be pursued by SASATE. But that first it made some sense to talk about how we got here.

### **Organizational Genesis and Context**

Dr. Howard Liddle <hliddle@med.miami.edu> spoke about the organizational genesis of SASATE. In the Fall of 2002, the University of Miami, Center for Treatment Research on Adolescent Drug Abuse, convened a National Institute on Drug Abuse (NIDA) sponsored conference on the state of the science of adolescent substance abuse treatment that was attended by close to 150 researchers and practitioners. A group of presenters and participants got together at this conference and talked about the need for a means to maintain momentum around adolescent substance abuse issues. The idea for a membership organization was proposed there and floated again in subsequent e-mail in what became an “ad hoc” organizational committee. This committee requested and received support from CSAT and the College of Problems on Drug Dependence (CPDD) to create a list server and to hold this organizational meeting.

Dr. Dennis also talked about the sudden increase in capacity of the adolescent treatment system in the U.S. (which increased by 53% between 1992 and 1998 then leveled off) and created a new demand for effective models of treatment (and people working in this area). While less than two dozen studies had been published in 1997, in the past five years the results of NIDA’s Drug Abuse Treatment Outcome Study of Adolescents started being released, CSAT’s large (n=600) Cannabis Youth Treatment (CYT) experiment evaluating 5 different types of outpatient treatment was completed, CSAT’s Adolescent Treatment Model (ATM) program funded the manualization and evaluation of 10 existing outpatient, step down, and therapeutic community programs was completed, and CSAT, National Institute on Alcohol Abuse and Alcoholism (NIAAA) and NIDA have funded over two dozen other grants related to adolescent treatment effectiveness. During this and the coming year several new projects have or are starting, including 12-20 CSAT Strengthening Communities for Youth (SCY) grants, 14-20 CSAT Adolescent Residential Treatment (ART) grants, 10 Robert Wood Johnson Foundation (RWJF) Reclaiming the Future (RTF) diversion grants. NIDA is also planning major adolescent treatment studies as part of its Clinical Trials Network (CTN) and Criminal Justice Drug Abuse Treatment Services (CJ-DATS) research network. Thus the timing for SASATE seemed just right.

### **Mission**

Dr. Dennis proposed that the mission of SASATE should be *“To facilitate the development, evaluation and research, and implementation of effective models of adolescent substance abuse treatment through a multi-disciplinary effort that bridges the gap between research and practice.”* Several participants were concerned that this was too broad, but differed in the subset of issues they thought should be the focus. Some of the alternative areas of focus proposed included:

- Focus on creating a smaller and more informal group of researchers in the area to help brainstorm on how to do develop and evaluate more effective models of care.
- Create an organization that can “speak” for the field of adolescent treatment and advance policies and programs that will advance the field.
- Build more on existing infrastructures (e.g., ATTCs, CTN, CPDD, or RSA) for supporting these activities.
- Provide a multi-disciplinary (and safe) forum to discuss the “burning issues” in the field and to provide an introduction/training for new investigators on them.

An alternative theme was to question whether we wanted to have a specific mission statement/organizational structure or whether this should be a more informal network. Dr. Kaminer noted that the Contingency Management Group was meeting across the hall and that they have been meeting at CPDD for the past several years. This group provides an example of a “low key/structure” organization that has sustained itself over the years. Drs. Holly Waldron <hwaldron@ori.org> and Hy Hopps <hy@ori.org> gave another example of a less formal group, the Social Learning and the Family. While not an official AABT special interest group, this group has an informal meeting right before or after AABT (discussed further below). *The decision was to let the mission of the organization stay relative informal for now and to evolve.*

### **Structure/Activities**

Given the informal and evolving nature of SASATE, the structure is obviously something that needs to evolve as well. At least initially, the structure will be determined by the needs/on-going activities of the participants. Some of the specific structures/activities the group talked about (and who to contact about them) are listed below.

Maintain the SASATE e-mail list server. Gina Wolery <gwolery@northropgrumman.com> from Northrop Grumman Information Technologies (NGIT) gave a very brief overview of the SASATE e-mail list server. For the near future, CSAT will continue to provide support for the list server through its subcontractor, NGIT. This forum provides a useful opportunity for communication between researchers and providers in this area. Several people mentioned finding information on recently released protocols and articles there; others talked about the possibilities for brainstorming or recruitment of sites. There was agreement that we should continue the list server. There was also support for encouraging funders (e.g., CSAT, NIAAA, NIDA, RWJF and others) to promote funding opportunities through it; organizations to promote relevant conferences/meeting or training positions through it; and for representatives from related groups (e.g., ATTC, CJDATS, CTN, etc) to periodically provide the list with an update on their activities related to adolescents. (Contact Lisa Calhoun <lcalhoun@hq.row.com> if you want to add/drop or change a subscription from/to digest.)

An Annual Meeting. In response to a request from Dr. Kaminer, CPDD has agreed to provide us with space for a satellite meeting at the next CPDD conference (June 14-19, 2003, Sheraton Bal Harbour, Bal Harbour, FL). It will be either the day before or

the day after. They will also provide us with a symposium during the conference and try to schedule the adolescent symposium/posters either in the beginning or the end of the week (to be closer to the satellite meeting). Some of the things that people talked about happening at this meeting included: a) a business session to talk further about the mission, structure, and evolution of SASATE; b) providing a short synopsis of research findings to facilitate dissemination; c) provide a forum of both researchers and clinicians for discussing the hot issues in the field; and d) providing a forum for researchers to present their preliminary findings and get feedback/help from others in the field. Dr. Waldron agreed to organize the meeting for 2003 and will be sending out more information on this.

Develop a Simple Website. Several people raised the issue of setting up a website where members and non-members could find things related to adolescent substance abuse treatment, like a bibliography, registry of studies, presentations, SASATE membership roster (which includes researchers, policy makers, and clinicians), links to related work by the ATTCs, CJDATS, CTN, and other websites/resources on this topic.

NGIT has reserved the SASATE.org domain name and Gina Wolery <GWOLERY@northropgrumman.com> provided addresses for web sites that SASATE might consider as samples or models if the group decides to pursue funding for a web site. RWJF has tentatively expressed some interest in helping to support the website, but only if has a clear purpose and is not duplicative of existing work. We now need a group to help develop the content and funding to support putting it together. (If you are interested in leading or helping with this, please contact Dr. Dennis <mdennis@chestnut.org>.)

Hold Meeting on Organizational and Workforce Issues. Kristin Schubert <KSCHUBE@rwjf.org> from the Robert Wood Johnson Foundation (RWJF) announced that RWJF was working with CSAT to convene a summit on adolescent treatment issues. The summit will be held September 26-27 in the Washington, DC, metropolitan area, and the agenda would include four tracks during which workforce development, knowledge translation/adoption, systems of care, and financing will be addressed. A major goal of the summit will be to generate papers on each of the four topic areas for a special issue of the Journal of Psychoactive Drugs.

Hold a Technical Review. Dr. Holly Waldron <hwaldron@ori.org> suggested that it would also be useful to more of a technical review of the issue involved in doing adolescent treatment research. A key point here is that many of the new people coming into the field do not have experience working with adolescents and would benefit by a good review of issues related to development, family, and systems (e.g., school, welfare, criminal justice issues) as they pertain to treatment, research design and analysis. She envision this as a smaller group that would produce a special issue, monograph or book for others to use. She will look into the possibility of working with NIAAA, NIDA or others to fund this.

General Education. Frank Tims <FTIMS@aol.com> suggested that SASATE may also be able to fill the need for practitioners and policy makers to have a general

resource or place to see information on how to make adolescent substance abuse treatment more effective. Much of what was talked about above was passive; he suggested that we also collectively identify key issues/need and promote them to policy makers to help create the programs and opportunities that would be required to address them. He stressed the importance of being able to present the science in a way that non-scientists can understand.

There was also some discussion about studies or work that was still needed in the field. Some of the specific suggestions included doing more research on: a) how to move evidence based protocols from research to practice; b) more studies of continuing care and recovery management; and c) more study on how to improve workforce issues (training, supervision, retention).

### **Key Decisions and Next Steps**

- Participants agreed that SASATE is not ready to articulate a formal structure or a mission statement and that they should continue to be relatively informal and evolve.
- CSAT, through its contract with NGIT, will continue to support the e-mail list server.
- Dr. Holly Waldron will coordinate the next SASATE meeting, to be a 1-day meeting right before or after CPDD.
- Dr. Dennis will try to identify a group of people to support the development of content and funding for a website.
- Ms. Schubert will report back on RWJF's meeting in September
- SASATE will encourage others to periodically report to the list server on their activities related to adolescent substance abuse treatment.
- Drs. Waldron and Dennis will look into the possibility of funding a technical review/monograph on doing adolescent treatment research.