THE ALMACAN

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An International Association of Professionals in Employee Assistance Programs — February 1984

Texas EAP Symposium Sets Record Attendance

The occupational programming field in Texas took another major step forward in January this year with the presentation of the Texas EAP Symposium IV. A record number of participants took part in the many workshops and networking opportunities which were provided at the conference. The symposium was held January 9, 10, and 11 in the beautiful Hyatt Regency Hotel, located on the southern shore of the Colorado River in Austin.

The Texas EAP Symposium was originated in 1980 by the Texas Commission on Alcoholism, the Workers Assistance Program of Texas, and the Texas Association for the Prevention of Alcohol and Drug Abuse. It is now an ongoing function of the Texas Commission on Alcoholism and is sponsored by the Texas AFL-CIO, the Texas Association of Business, the ALMACA chapters of Houston and North Texas, and the Texas Association of Occupational Health Nurses.

Those attending the symposium were offered a choice of two workshop tracks. The core curriculum was designed to meet the educational needs of the new professional in the EAP field or those who had not had the advantage of a comprehensive course in EAP fundamentals. The core curriculum workshops provided an overview of marketing, implementation, and maintenance of employee assistance programs and was presented as a continuous three-day workshop concurrently with other workshops at the symposium. Dick Groepper, national EAP director, Crawford Rehabilitation Service, coordinated the core track and presented most of its material.

The electives track was designed to hone the skills of the seasoned EAP professional by offering a selection of the in-depth workshops, which covered new research, innovations, areas, and standard popular topics in occupational programming. The following is a sample of the many electives workshops: "Legal, Quasi-Legal, and Policy Issues—A Key to EAP Survival," presented by Brenda Blair, president, Blair Associates; "EAP Professionals—Who Are We?," presented by Dr. Paul Roman, sociology professor, Tulane University; and "Marketing EAP in a Tight Economy," presented by Don Sandin, president, Donald Sandin and Associates. Symposium participants had a choice of three workshops (not including the core curriculum) in all time-slots during the three days of the conference.

Aside from the two workshop tracks, the symposium also featured a keynote address by Gary Atkins, EAP coordinator, Lockheed Missile & Space Company; special addresses by Don Sandin and Don Sparks, EAP manager, McDonnell Douglas Corporation; and a panel discussion by the national ALMACA executive committee and executive director.

Symposium participants could choose from several special events, which included a showing of new films on occu-

(See TEXAS, p. 3)

Executive Committee Completes Winter Business

The ALMACA executive committee held its regular winter meeting on January 10 and 11 in Austin, Texas. The committee approved the appointments of four new members to the board of directors (see article elsewhere in this issue). They also approved the holding of the 1985 annual meeting in Boston and the 1986 annual meeting in Texas. Although the specific 1986 city still has to be selected by staff, the committee indicated a strong preference for Dallas.

In other actions, the executive committee voted to embrace the phrase "An International Association of Professionals in Employee Assistance Programs." This phrase was included in the ALMACA brochure produced by the development committee last summer. It is further recognized that ALMACA has grown with the occupational alcoholism field and now is the representative professional organization in the employee assistance field.

The executive committee reviewed the

(See Committee, p. 12)

ALMACA Legislative Chairman Dies

James F. Edwards, chairman of the ALMACA legislative committee and a member of the board of directors, died suddenly and unexpectedly at his home on Thursday, January 19. In addition to his service on the board, he had been very active with the eastern regional conference and had handled the arrangements for its exhibits. He was also a member of the Delaware Valley ALMACA Chapter.

(See Edwards Obituary, p. 4)

New Board Members

ALMACA National President Thomas P. O'Connor has appointed four persons to the ALMACA Board of Directors. These appointments fill vacancies which resulted from the expiration of three-year terms by the previous incumbent. All four of these appointments are for three-year terms ending at the Annual Business Meeting in the fall of 1986. These appointments were also approved by the Executive Committee at its meeting in Austin, Texas, on January 10, 1984.

Dr. Daniel J. Anderson, president of the Hazelden Foundation in Center City, MN, has been named chairperson of the Treatment Committee. The outgoing committee chairperson is Uwe Gunnersen who is the Executive Director of Azure Acres in Walnut Creek, CA.

Gary Atkins, Coordinator of the employee assistance program for the Lockheed Missile and Space Company in Sunnyvale, CA, has been appointed chairperson of the Education and Training Committee. The outgoing committee chairperson is Ms.

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Executive Director's Comment

By TOM DELANEY

During my first couple of years as ALMACA executive director, I visited many chapters by attending chapter meetings or stopping in to see chapter officers. During 1983 a heavy administrative workload necessitated my staying closer to the office. These administrative tasks included working on chapter projects such as developing the ALMACA Chapter Exchange (ACE) which is sent to each chapter officer, and reviewing every chapter bylaw. Lately, however, I have been getting out to more chapters and have several other visits planned in the spring.

This has led me to think about how we can keep in touch with the chapters in a changing organization. An obvious change is the growth in the number of chapters. When I went to work with ALMACA in January, 1981, ALMACA had 23 chapters and now we have 55. This means that we have more chapters that are less than three years old than over three years old and there are new officers who do not have experienced "old hands" to look to for advice. They look to nearby chapters, regional officers, and the national staff.

In that time period, the ALMACA regions have become more active. The eastern region had regional conferences in 1979 and 1980, and they have grown in strength and stature since then. By the way, the chairman of the 1983 New Jersey regional conferences, Joan Tracey of the New Jersey chapter, recently presented national ALMACA with a check for $7,500 from the regional conference. On behalf of the national board, I want to publicly thank Joan and the eastern region. The central region had its second conference in 1983 and the western region had its first conference. The national executive committee and office staff are represented at these conferences and they provide an opportunity to work with chapter officers.

A number of chapters have state conferences. There is an article elsewhere in this issue about the Texas EAP symposium held last month in Austin. The Dallas and Houston chapters were among the co-sponsors. The Georgia ALMACA chapter will again, this spring, be co-sponsoring the Southeastern EAP Forum in Atlanta. Whenever there are regional conferences or special chapter events which attract EAP practitioners from beyond the immediate chapter area, this is a chance for regional and national officers and national staff to get to meet and share with chapter members and officers. With the increasing size of ALMACA, I find such meetings an efficient way to maintain a personal contact with chapters.

The national office regularly receives most chapter newsletters, which I find are an excellent way to keep up with chapter activities and concerns. We also receive minutes of most chapter meetings and these are equally helpful. Most chapters immediately let us know the names of new chapter officers. Since chapter elections are held at different times of the year, these can be difficult to keep track of and I ask that out-going presidents or secretaries make it a point to let the national office know the names of new chapter officers. The ACE is designed to be a vehicle for chapter officers to share opinions and experiences with each other and the national office regularly solicits contributions from chapter officers. Unsolicited articles are welcome.

Having national officers and staff attend chapter meetings is still an excellent way for us to support chapters. We will probably do as much as before, but it's just with more chapters there will be a smaller percentage visited. There are now eight chapters in California with other western region chapters in Oregon, Washington, Alaska, and Colorado, and forming chapters in Arizona and Hawaii. The western Canada chapter is based in British Columbia and is also west coast. I have found that two or three one week trips a year to the west coast are the best way to service this group and the regional board members, Duane Rogers and Jack Rose, have been helpful in coordinating these.

As ALMACA grows, so do all of its components, including the chapter. The chapters are the focal point for EAP information in the area. For national to serve the EAP field, there has to be constant communication between national and chapters and I wanted to share with you some of the ways that are current. Please let me know if there are others that you would like to see. □

NIAAA's Godwin To Be Honored

Puerto Rico's department of addiction services will honor Donald F. Godwin, head of occupational programs at NIAAA, for his "leadership, cooperation, and enthusiasm" in helping develop employee assistance programs in Puerto Rico.

The award will be presented at the department's annual seminar on "Stress and Occupational Problems" February 17 at the Condado Beach Hotel.

The award was announced by Jose Ramon Rodriquez, secretary of Puerto Rico's Departamento de Servicios Contra La Adiccion, who also said Puerto Rico Gov. Carlos Barcelo has approved the idea of an executive order directing the establishment of an EAP for all public agencies in Puerto Rico.

"Without your professional and moral assistance, it would have been impossible to achieve this goal for the benefit of our labor force," Rodriquez told Godwin in the letter announcing the award. □

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pational programming from several production companies, a sightseeing tour of Austin, and visiting the symposium exhibits displayed throughout the three-day conference.

The registration fee of $75 included two luncheons and an evening reception. The first luncheon and the evening reception were designed to provide networking opportunities for the symposium participants. The second luncheon was the first all-state ALMACA luncheon and featured a special address by Dr. Madeleine Tramm, director, Health Assistance Program, ACTWU. The ALMACA luncheon also included the presentation of awards to the members of the Texas EAP Symposium planning committee. The master of ceremonies for the ALMACA luncheon was Dick Stanford, executive director, Workers Assistance Program of Texas and secretary, national ALMACA. □

Speakers at the Texas EAP Symposium included Dr. Madeleine Tramm, director, Health Assistance Program, ACTWU, and Gary Atkins, EAP coordinator, Lockheed Missile & Space Co. A planning committee award was presented to Dick Stanford, executive director, Workers Assistance Program of Texas, and national ALMACA secretary, presented by Ross Newby, executive director, Texas Commission on Alcoholism.

Pasco Selected for Key Program Position

The United Auto Workers - Ford Motor Company Joint Employee Development and Training Program has selected Thomas J. Pasco as the executive director of the UAW - Ford National Development and Training Center. Tom Pasco had been the Director of the UAW Members' Assistance Program. While serving in that capacity, he had been active in ALMACA and had served on the ALMACA national board of directors, first as chairperson of the bylaws committee and then as chairperson of the labor committe.

The Employee Development and Training Program (EDTP) is a key element of the mutual growth framework of the 1982 Ford - UAW Collective Bargaining Agreement, which charters the Program to ". . . promote training, retraining and development activities and efforts, and in the process . . . contribute to the competitiveness and well-being of the Company—aspects which are essential to the job security, personal growth and development of Ford employees."

Soon after Pasco assumed his new position, UAW and Ford announced a new project, "New Avenues for Employee Growth," which will be part of the EDTP. it is a program for 109,000 active UAW represented Ford workers in the United States. The program's objective is to improve and build on existing employee education and training approaches and go beyond traditional efforts by emphasizing opportunities for personal development and growth. Under the program, active work force education and training and development opportunities will follow six basic approaches. Ford workers will be able to select a program suited to their background, interest, and goals. The programs include:

- Prepaid tuition assistance for formal education and training,
- Career and educational counseling and guidance,
- Basic skills education and enhancement,
- Specially tailored college-level associate degree program,
- Pre-retirement counseling, and
- Other special targeted education.

In addition to the new program for active employees, the company and the union will intensify and expand efforts currently in place for laid-off employees. Plans are now under way to launch three re-employment assistance centers to offer services to more than 13,000 laid-off UAW - Ford workers in southeastern Michigan with recall rights. The centers' principal focus will be on individuals who have little prospect of returning to Ford and who are actively seeking assistance. These centers will offer UAW - Ford sponsored services such as vocational and educational counseling, selectively targeted and accelerated retraining programs and prepaid tuition assistance, as well as referrals to community service agencies and programs, as appropriate. Ford Motor Company and the UAW already operate two re-employment assistance centers for some 3,000 employees displaced by plant closings in Sheffield, AL and San Jose, CA. In addition, nearly 5,000 individuals on layoff from other Ford locations throughout the country have participated in one or more forms of counseling, training and other services since they became available over a year ago under the Employee Development and Training Program.

Before joining UAW, Tom Pasco had been chief of the casefinding section of the Department of Public Health, Office of Substance Abuse Services, State of Michigan. Among his many activities in the alcoholism field, Tom has been heavily involved in the development of the Midwest School of Alcohol Studies. It has sponsored summer schools throughout the Midwest for several years and sponsored its first winter session last November in Rockford, IL.

Tom Pasco will be missed in ALMACA. Fortunately, long time UAW and ALMACA member Andy Anderson from Kansas City has agreed to serve out the remaining time of his term as chairperson of the ALMACA labor committee. □

BOARD **(From p. 1)**

Sandra Turner, who is EAP Representative with United Airlines in Cleveland, OH.

Ms. Candice Bibby, President of Employee Support Systems in Santa Ana, CA, has been appointed to fill the at-large position of the Board, which functions as chairperson of the Consultants Committee. The outgoing chairperson is James Roth, who is a consultant with Contact, Inc., in Phoenix, AZ.

Professor Bradley Googins of the School of Social Work at Boston University has been appointed chairperson of the Research Committee. The outgoing chairperson is Professor Walter Reichman of Baruch College of the City University of New York.

ALMACA Mourns Death Of James Edwards

(cont'd from page 1)

Jim Edwards was noted for the enthusiasm and dedication with which he met every challenge, particularly those involving alcoholism programs. Recently, he had submitted statements to House and Senate subcommittees of the United States Congress advocating a restoration of health insurance coverage for the treatment of alcoholism for federal government employees, and was the leader for workshops on legislative procedures at several ALMACA annual meetings.

His activity with the ALMACA legislative committee came naturally from his political involvement in his home state of Delaware. He ran for the Delaware House of Representatives in 1978 but was defeated. However, he was elected in 1980 and served as chairman of the health services subcommittee. Although defeated for reelection in 1982, he remained active in Republican politics in Delaware.

For the past six years, Jim had been director of development at Seabrook House Alcoholism Treatment Center in Seabrook, New Jersey.

"He was very, very energetic, an aggressive person who never stopped," according to his friend, Superior Court Judge Clarence W. Taylor.

"He carried on many (community) activities over and above his job . . . he was a person always interested in other people's problems," Taylor said.

As chairman of the governor's advisory council on alcoholism, he charged in 1978 that the state Bureau of Alcohol and Drug Abuse officials "do not understand the disease of alcoholism" and "are not planning an overall approach to treat it." He told the legislature's joint finance committee at the time to withhold funding of the bureau until an investigation into its management and services was conducted.

As state representative, he sponsored legislation in 1982 to modernize the state Nurse Practice Act. He also served as chairman of the committee that wrote the 1980 to 1985 state health plan for Delaware.

He was director of Harbour House in Milford, Delaware's first private alcoholism rehabilitation center, from 1977 until the program closed due to lack of funds in 1978.

Edwards, a native of Southington, CT., was a graduate of Mount St. Mary's College in Emmitsburg, MD, and Sacred Heart High School in Waterbury, CT.

He was a past instructor in the AFL-CIO community service workers and a former volunteer probation officer. He was a fourth-degree Knight with the Christopher Council of the Knights of Columbus and a member of Holy Rosary Catholic Church in Claymont, Delaware. He was past president and vice president of the Northridge Civic Association. He was a member of the Claymont Fire Company.

Jim was only 49 years old at the time of his death. He had many friends in ALMACA and other alcoholism organizations. We will all miss him and extend our deepest sympathies to his wife Carol, and their four children and his mother and brothers. The family has suggested that donations may be made in Jim's memory to Seabrook House, P.O. Box 55, Seabrook, N.J. 08302. □

DENVER IS ALMACA '84

ADPA Issues Impaired Driver Policy Paper

The Alcohol and Drug Problems Association of North America, Inc. (ADPA), has issued a new "policy paper on the drinking and drug using driver problems," which the paper states "is a problem with no easy solutions because of many varying factors."

The paper states nonetheless that "alcohol and drug abuse professionals have a key responsibility to provide needed leadership" in management of the problem.

The entirety of the ADPA policy paper follows.

I. Introduction

National attention to the crisis of drinking and driving has reached high levels in recent time. It is a problem that reaches into local communities and strikes at families when least expected. It is a problem with no easy solutions because of many varying factors. It is a problem that demands high level attention and the active involvement of professionals trained to respond in a timely manner. Alcohol and drug abuse professionals have a key responsibility to provide needed leadership to the drinking (and more recently identified drug) driving problem.

Attention to the problem has reached high levels of concern on the part of local citizens and national policy makers. The facts of the drinking/drug driving problem compel alcohol and drug abuse professionals to become involved in developing comprehensive approaches to reducing the consequences of alcohol and drug usage in conjunction with driving.

A review of the facts points to the seriousness of the problem.

- Each year over 25,000 Americans are killed in highway accidents involving alcohol. This is over half of all highway deaths.
- A conservative estimate of the total economic cost of drinking and driving is put at $24 billion.
- In between 40 and 55 percent of alcohol related crashes, the driver had blood alcohol concentration (BAC) greater than .10.
- It is estimated that on a nightly basis, between one in five hundred (1/500) and one in two thousand (1/2000) drivers on the road are arrested with an average BAC of .20 percent.
- Young drivers (ages 16 to 24 years) were involved in accidents resulting in 48 percent of alcohol related fatalities in 1981.
- Teenage drivers are killed in one out of every five fatal accidents that involve the use of alcohol.
- While little is known about the extent of drug impairment and its relationship to highway fatalities, extensive evidence exists to demonstrate that there is a relationship between improper drug usage and ability to properly use an automobile.
- One survey showed that 16 percent of the blood samples of 2,000 drivers arrested for alcohol impairment also contained THC, the active ingredient in marijuana.

This policy paper discusses the complex issues that surround approaches to addressing the drinking/drugged driving problem. The Alcohol and Drug Problems Association (ADPA) has developed guidelines to assist alcohol and drug problem professionals in determining appropriate approaches for developing comprehensive drinking/drugged driving problems.

This issue has seen massive amounts of national attention from voluntary groups and the media. The Congress and the President have acted with swiftness from the political pressure brought about by concerned citizens. Like many issues that gain national attention, we are concerned that public interest in the drinking/drug driving issues will begin to wane. Professionals in the alcohol and drug abuse field have a public responsibility to sustain the support of citizens and carry out these important programs. If this country and society are truly interested in dealing effectively with this problem over the long

(See ADPA, p. 6)

term, then solutions must be institutionalized. Professionals and volunteers must work together to achieve this.

Another significant value to be gained from the meaningful involvement of professionals is that their networks and systems for responding to the drinking/drugged driving problem is already in place. The effective DWI program is comprehensive in scope and fully integrated in the community.

II. General Policy Issues

In addressing the drinking/drugged driving issues, ADPA supports five areas of general policy. These are comprehensive in nature and directly affect the concerns of field professionals.

(1) The maximum possible utilization of professional workers in both the public and private sector, including those in the alcohol and drug abuse field.
(2) The inclusion of treatment and rehabilitation services within a comprehensive and integrated community approach, which includes enforcement and deterrence.
(3) The operation of effective long term education and prevention programs designed to inform drivers of the dangers of driving under the influence of alcohol and other drugs.
(4) The need for ongoing data collection, information dissemination, research, and technical assistance at the federal level, that is available to assist states, communities, and individuals at the local level.
(5) The recognition of and attention to the growing use of drugs other than alcohol by drivers on our highways.

These general policy issues will be discussed in more detail in the next section, which offers specific policy recommendations.

III. Specific Policy Recommendations

Enforcement and Adjudication

(1) ADPA supports general deterrence enforcement efforts that result in the identification and arrest of persons who drive while impaired by alcohol and/or other drugs.
(2) ADPA supports enactment of state laws which prohibit the operation of motor vehicles by drivers with .10 BAC or greater.

Comment: Often referred to as "per se" laws, these provisions appear to simplify the adjudication of drunk/drugged driving arrests.

(3) ADPA supports laws encouraging preliminary breath testing of drivers including implied consent provisions identical to those applicable to the refusal of evidentiary tests.

Comment: These laws have been enacted in about half the states. They seem to offer a significant aid to law enforcement officials and have good potential to increase the rate of drunk driving arrests.

(4) ADPA supports enactment of laws that mandate blood alcohol testing of drivers involved in traffic accidents and high-risk moving violations when the police officer has reason to believe that alcohol or another drug might be implicated. Test administration should not interfere with medical treatment. Blood tests should be administered on injured or deceased persons at a medical facility.
(5) ADPA supports the swift adjudication of arrested drivers. Sanctions should be imposed within 45 days of arrest and should be strong and sure. Courts should have discretion in the imposition of mandatory minimum sentences and plea bargaining should be discouraged. ADPA strongly believes that education and/or treatment of the drinking or drug using driver is a necessary and important part of the sanctions package.
(6) ADPA supports enactment of laws that provide more severe sanctions for repeated offenses.

Education and Treatment

(7) All state and local laws should contain provisions that require a presentence evaluation of the convicted DWI driver. This information should be available to the judge in making his sentencing decision.
(8) All persons not assessed as needing alcoholism/drug abuse treatment should be required to complete a state approved education program.
(9) Mandatory participation in alcoholism/drug abuse treatment is appropriate when indicated by a com-

petent assessment. In some instances treatment can be used as a constructive alternative to incarceration.

(10) ADPA strongly encourages states to develop and maintain high standards for education and treatment programs for DWI offenders. ADPA believes that standards should be developed by the states, with assistance from appropriate federal agencies.

Comment: Research has shown that education and treatment can be effective in reducing recidivism and arrest rates. It is imperative, however, that states set quality assurance standards and retain an ability to identify programs which meet these standards.

(11) ADPA supports the operation of long term community prevention and education programs directed toward the drinking/drug using driver population. States should require high school and other driver education programs to include information about the problem of driving under the influence of alcohol to foster student attitudes against driving while under the influence of alcohol and/or drugs.

General

(12) The single state agency should actively participate and provide leadership to alcohol and drug countermeasure programs. They should work in a coordinated inter-agency effort with such areas as transportation, law enforcement, the courts, and education.

(13) The development and operation of counter-measure programs is a state and local responsibility. Programs must have strong citizen support, including local civic and community organizations.

(14) Alcohol and drug abuse professionals have a responsibility to work with local community resources to address the drinking/drugged driving problem.

(15) The federal government has a responsibility to provide technical assistance, conduct national research, monitor international research, encourage national and local enforcement efforts, and evaluate counter-measure programs for effectiveness. The national driver records registry should be improved as soon as possible.

(16) Programs directed toward the drinking and drug using driver should be partially financed through fines and fees imposed upon those convicted of drunk driving.

(17) States and communities should form task forces to develop local programs that include active field professional involvement.

(18) ADPA calls for increased research on the drinking and drug using driver problem. Research priorities should include but not be limited to:

- Evaluation and testing of treatment programs designed specifically for the alcohol and drug abusing driver.
- Evaluation of strong enforcement approaches to determine their long term effectiveness.
- Development of procedures to identify the drug impaired driver.
- Empirical analysis of the alcohol crash problem to identify local target groups for the purposes of better understanding the relationship between drinking and drug usage and highway accidents.

(19) ADPA calls for continued training and education of law enforcement and court officials on the problem of intoxicated and drugged drivers.

(20) ADPA supports programs that experiment with alternative short term and long term detention facilities. In-patient alcohol and drug treatment programs can offer special facilities to accommodate this need.

IV. Conclusion

The drinking/drug using driver problem is not one that is easily solved. It will take a long term concerted effort by professionals and volunteers, dedicated to reducing the dangers on our highways. The policy recommendations offered by ADPA signify the ready commitment alcohol and drug professionals are ready to offer. □

Young Drinkers in the Work Site Targeted

The Second National Conference for Youth on Drinking and Driving, scheduled for April 27-30 at the National 4-H Center in Chevy Chase, MD, will focus specifically on young people and drinking in the work site.

The conference will be held under the auspices of the Department of Health and Human Services Secretarial Initiative on Teenage Alcohol Abuse. The 1983 conference under the Initiative focused on activities related to high school.

It is expected that about 300 young people, 100 adult sponsors/leaders, and 50 youth presentors will attend next April's conference.

Presentors at the 1984 conference will consist of people operating antidrinking/driving programs based in the work site, and/or cross-age prevention/intervention programs.

The purpose of the national conference will be to identify or design programs for youth, and make the programs available nationally, to stimulate participants' involvement in teen-oriented community or work site programs, to heighten employer awareness of the problem, and to identify and discuss ways and means of implementing and maintaining these programs.

Since the beginning of the Initiative, some 3,000 young people have participated in 15 regional youth alcohol treatment conferences. Follow-up activities being planned and implemented at the state and local levels include the convening of statewide and regional conferences and task forces whose goals have been to strengthen the continuum of care, increase community awareness, assess current service availability, recommend to policy makers and lawmakers ways to close identified gaps, establish work groups to strengthen referral networks, and publication of resource directories.

Organizations working with the Department of Health and Human Services (DHHS) in programming for the Initiative project include National Youth Work, National Federation of Parents for Drug Free Youth, Association of Labor-Management Administrators and Consultants on Alcoholism (ALMACA), the National Council on Alcoholism, the Deerfield Citizens for Drug Awareness, and the National Association of State Alcohol and Drug Abuse Directors (NASADAD).

Additionally, various federal agencies—Departments of Transportation, Commerce, Labor, Education, and Agriculture—as well as such private sector organizations as Marriott, McDonald's, Pizza Hut, and Metropolitan Life—are involved in the planning process.

The planning group met November 29, 1983, and decided that State Alcohol Authorities would select those persons to participate in the national conference. It is expected that each state will designate six people aged 16 to 19, and two adults to officially represent the states at the conference.

Selection criteria for youth participants are that they must be between 16 and 19 years of age; must be employed either full- or part-time; should be able to work together as a team prior to, during, and after the conference; should be identified as a leader either in an organizational or personal sense, since participants will be expected to design and implement programs, with the the support of the adults who accompany them, their employers and community organizations; have past and/or present knowledge of and involvement in alcohol, traffic safety, or general health promotion activities; and should have some unifying force within the team, that is, they should either be linked together by a common work site location, common geographic area, or common responsibilities within a larger program.

Selection criteria of adult participants will depend upon the type of youth selected. For example, if a young person from a single work site is selected, it would be helpful if one of the adults came from

(See YOUNG, p. 9)

YOUNG (From p. 8)

that employing organization. Or, if a young person is chosen from a single geographic area, with multiple employers, the adult would need to have influence at one of the work sites. Or, if a young person is chosen from an operating community-based program with potential for impact in the work place, at least one of the adults should represent this program and one should represent a major employer that appears to be interested in instituting or strengthening a program in this area.

The planning group is also soliciting the public and private sectors at large for profiles of successful prevention and drinking/driving programs focusing on youth in the work force. Contributors are asked to call the Secretarial Initiative on Teenage Alcohol Abuse at (301) 443-4640. □

Youth Alcohol Problem Prevention Manual Available

An estimated 8,000 youths are killed in alcohol-related highway deaths each year. At least 25 percent of deaths of young Americans between ages of 15 and 24 are alcohol-related. An estimated 3.3 million youths age 14–17 have problems resulting from drinking. This problem is growing. If you are interested in increasing your knowledge about drinking, if you want to help reduce drinking-related accidents, if you want to be more involved in alcohol-free activities, and if you want to help promote a positive change in the attitudes of young people regarding alcohol problems, *Is Beer A Four Letter Word?* may be very helpful to you. *Is Beer* suggests strategies to involve community resources, develop student support centers, increase understanding of the court system, organize a drinking and driving demonstration, and open a "dry" disco. For more information, send for a free copy of *Is Beer A Four Letter Word?* (PH 95), from the National Clearinghouse for Alcohol Information, Dept. FF, P.O. Box 2345, Rockville, MD 20852. □

Attitudes of Counselors Toward the Alcoholic

The attitudes of counselors toward the alcoholic versus traditional populations in the rehabilitation field are examined. This study compared attitudes of mental health and rehabilitation conselors toward alcoholics with their attitudes toward homosexuals, public offenders, the mentally retarded, the physically disabled, and the mentally ill. The results from the Semantic Differential Scale demonstrated that attitudes toward the alcoholic were significantly lower than those toward each of the other groups. 8 Ref.

Allen, H.A.; Peterson, J.S.; Keating, G. Southern Illinois University, Carbondale. Rehabilitation Counseling Bulletin 25(3):162–164, 1982.

Young Workers At High Risk

High school seniors who work 21 or more hours per week are at substantial risk for harmful involvement with alcohol or other drugs, according to a recent survey by the University of Michigan Institute for Social Research.

Survey findings indicate that 47.8 percent of this population had been involved in a heavy drinking episode at least once in the preceding two weeks, and 33.4 percent had been engaged in heavy drinking episodes at least twice in the preceding two weeks.

Comparative data for high school seniors who do not work are 32.2 percent and 21.8 percent, respectively.

One of the more interesting findings in the survey is that high school seniors who go on to college apparently become harmfully involved with alcohol or other drugs during their first year out of high school, while those high school seniors who enter the work world seem to decrease their use of alcohol and other drugs.

The incidence of heavy alcohol intake, for example, increases 7.4 percent among those who go on to college, but decreases by 2.9 percent among those who remain in the work world.

New Chapter Officers

New Chapter officers for the Minnesota Chapter of ALMACA are:

President, Patrick Foss, Deluxe Check Printers, Inc.;

Vice President, Bob Haven, Twin Town Treatment Center;

Vice President, Pam Banta, Northwestern Bell Telephone Company;

Secretary, Barb Glander, *Minneapolis Star and Tribune*;

Treasurer, Ed Dougherty, Bemis Company;

Immediate Past President, Diane F. Olson, Ph.D., Affiliated Psychological Services, Inc.; and

Central Regional Vice President, Glenn Horstman, *Minneapolis Star and Tribune*.

New Orange County California Chapter officers are:

President, Dorothy Jones, McDonnell Douglas Corp.;

Vice President, Program and By-Laws, Phyllis Tuttle, St. Joseph's Hospital;

Secretary, Sylvia Lemnitzer, Reach;

Treasurer, Mary Denkers, ITT Cannon. □

DENVER is ALMACA '84

Children of Alcoholics—Young and Adult

By Joan Wielgus, CAC
Education Coordinator
The National Council on Alcoholism of Monmouth County
Red Bank, NJ

More and more public focus is being given to children of alcoholics. In a recent study it was found that in Monmouth County alone, there are more than 12,000 children growing up in alcoholic families; there are an estimated 30 million American adults who have at least one alcoholic parent.

How are children of alcoholics different from other kids? Children of alcholics are more likely to be expelled from school, to leave high school prior to graduation, and to receive school counseling for psychological problems. They are also more likely to experience serious illness, accidents, and problems with the police or courts. Impaired peer relationships are frequently reported in the child and there is consistent evidence of a lack of close friendships even in adulthood.

Any major change or crisis in a family or parent can be quite threatening to an adolescent in search of identity. Even a positive change such as recovery from a disease process can be frightening and confusing. Childhood, and especially adolescence, is a time of major internal changes of feelings, thoughts, and urges that threaten a fragile self-concept. Disruption and inconsistency by external, unchosen changes are often greeted with hostility. No matter how chaotic or unpleasant life in the alcoholic family might have been, an adolescent who has survived in that environment had adapted to it and has come to define his or her identity in relation to that environment.

Here are some examples of identities established within the alcoholic family: "I've heard so many times that I'm a lousy, no good—I guess that's what I am.". . . "I'll be good, I'll be quiet when daddy/mommy comes home. Then he/she won't drink.". . . "I'm not afraid, angry, embarrassed or lonely. I'm a survivor. I can do it alone.". . . "of course I'm responsible! I even take care of the other kids and the house."

When an alcoholic parent begins recovery, everything changes. Adolescents (especially) who have defined themselves in part by their parents' responses to them, and in part by their feelings toward their parents, feel like they have had the rug, however worn and ugly, pulled out from under them. There is confusion and resentment at being faced with having to change at an inconvenient time. Remember, the youth has had a life controlled by the chaos of parental alcoholism.

These youth who survive by taking on adult tasks at a tender age, grow up with abnormally high expectations. They are capable of winding themselves up like clock springs, tighter and tighter, as they aim for perfection. As adults, their high level of anxiety may lead them to depend on tranquilizers and/or alcohol—as self-medication.

Children of alcoholics are at high risk for developing alcoholism themselves or marrying someone who becomes alcoholic. They are prone to experience a range of psychological difficulties, including learning disabilities, anxiety, attempted and completed suicide, eating disorders and compulsive achieving. They rarely reach out, seeking help only when life threatens to go too far out of control.

The youth often adapts to the chaos and inconsistency of an alcoholic home by developing an inability to trust, an extreme need to control others, excessive sense of responsibility, and denial of feelings; all of which result in low self-esteem, depression, isolation, guilt, and difficulty maintaining satisfying relationships.

It should be noted that in up to 90 percent of child abuse cases, alcohol is a significant factor. Children of alcoholics are also frequently victims of incest, child neglect, and forms of violence and exploitation. It is no surprise that adult children of alcoholics guess at what "normal" is, lie when it would be just as easy to tell the truth, feel that they are different from other people, behave impulsively, and over-react to changes over which they have no control. They will tend to have difficulty in following a project through from beginning to end, judge themselves without mercy, and have difficulty having fun mostly because they take themselves too seriously.

Surprisingly, the young individuals who from their early years were seen as hostile, withdrawn, sullen, or acting out, may be the real survivors. They became visible to the public eye by being delinquent, alcohol or drug dependent, pregnant—anything to call attention to their pain. Some are referred to the juvenile justice system, courts and prisons, or mental health facilities. But the problems of most children of alcoholics remain invisible because their coping behavior tends to be approval seeking and socially acceptable.

As one adult child of an alcoholic states, "I was too smart to get caught. I was just too good of a manipulator." They are the "innocent victims" and "forgotten adult children" in schools, churches, professions, youth groups, hospitals, etc. They are reinforced daily for being responsible doctors, strong lawyers, kind teachers, no-trouble students, funny bartenders, cute friends, etc. They carry the burden of the family secret in their hearts. Some are developing alcoholism, some are not. Regardless, many of us can now help lighten that burden. □

Coping With Unemployment

The loss of a job is a major event that often has a negative effect not only on workers but upon their families and close friends as well. Research indicates that providing emotional support and networking, and obtaining the necessary economic, legal, and social resources, buffer the impact of the stressful experience of unemployment.

Dr. Sheila H. Akabas, director, and Ms. Vi Pirie, project associate of the Industrial Social Welfare Center of Columbia University School of Social Work, have prepared a manual for mental health professionals entitled "Unemployed Workers' Support Program." It offers ideas for organizing and delivering systematic training to small groups on how to obtain and/or create economic resources, deal with the emotional impact of unemployment, and find another job. The focus of the manual is on the immediate emotional, economic, and job-search needs of unemployed workers. The large numbers of persons who face unemployment at some time during any given year can benefit from such structured assistance.

The material in this manual is characterized as suitable for a wide range of unemployed persons, be they among the never employed, recently disabled members of society, in groups of professional, skilled, semi-skilled, or unskilled workers. All share many common problems and concerns regarding unemployment. The manual also includes ideas specific to particular populations whenever relevant.

Efforts to mitigate the impact of unemployment are best organized *before* layoff or immediately following termination. Although helping maintain workers on the job is preferred, those faced with outplacement responsibility will find the manual's content particularly relevant.

The unemployed workers' program is a structured group learning experience that combines cognitive and affective teaching methods. The three sessions cover:

- Presentation on ways to locate and obtain available jobs. Discussion includes assessing skills and interests, the job search, completing application and interview tips.
- Help with deciding future options, i.e., educational and training alternatives.
- Presentation on economic resources available to the unemployed worker and his/her family. Discussion includes ways to obtain the entitled services.
- Time management problems and possible solutions.
- Problem-solving approaches to mitigate emotional impact of unemployment on worker and his/her family.

The manual helps the mental health professional identify assistive resources in the community. It includes an extensive bibliography to enhance a group leader's knowledge, and skill in imparting information.

The manual is available by sending $3 to Dr. Sheila H. Akabas, Director, Industrial Social Welfare Center, Columbia University School of Social Work, 622 West 113th Street, New York, N.Y. 10025. □

Ballots Mailed

On January 20, ballots were mailed to all individual, voting members of ALMACA asking them to vote for or against the establishment of the Committee on Women's Issues as a standing committee of the ALMACA board of directors. The deadline for postmark of return ballots is March 5.

The package of material that included the ballot also included a detailed explanation of what sections of the ALMACA bylaws would be amended to implement this change, as well as a short explanatory memo describing the choices on the ballot.

In addition to the question of establishing the Committee on Women's Issues as a standing committee, the ballot asks the voting members to express their preference on one of two methods of implementing the change in board make-up, if there is a favorable vote on the standing committee. One method is to increase the size of the board of directors by one, while the other keeps the board at its present size of 30 by reducing the number of at-large board members by one and replacing it with the chairperson of the Committee on Women's Issues.

The proposal to change the Committee on Women's Issues from an ad hoc committee to a standing committee was proposed at the 1982 annual meeting in Philadelphia. A resolution to this effect was approved by the ALMACA board at its spring, 1983, meeting in Akron, Ohio, subject to final approval by the membership. □

ACTWU Shifts Insuror

Madeleine Tramm, Ph.D., has relocated the Health Assistance Program, EAP for the International Amalgamated Clothing and Textile Workers Union, to the Amalgamated Life Insurance Company.

The insurance company is a management-funded independent affiliate of the ACTWU, providing a variety of insurance for employees in the apparel, textile, xerographic, show, and millinery industries. The program's new direction will constitute a significant development by an insurance carrier to systematically develop EAP services for all policy holders, numbering nationally approximately one-half million including dependents. Dr. Tramm reports directly to the president.

Expanded Business Meeting Planned

The ALMACA board of directors has approved a return to the two-hour format for the annual business meeting in 1984. The action came following a review by the board of the role of the annual business meeting and on a motion by Vice President—Operations Jack Hennessy.

During the last few years, the business meeting has been compacted into an increasingly smaller time frame. The 1983 business meeting was allocated only one hour because the 1981 and 1982 meetings had not used the allotted two hours. In reviewing the 1983 business meeting, it became apparent that the membership desires more than one hour to conduct this meeting, which is the corporate business meeting and is akin to a stockholders meeting in private business.

Article III, Section 12 of the ALMACA by-laws provides for ALMACA to have an annual business meeting and lays out the procedure for establishing the agenda. Agenda items have to be set 60 days in advance except that the executive committee may add items, in an emergency, up to 10 days before the meeting. Given these restrictions, the board discussion affirmed that motions from the floor are not in order. This protects the rights of members who cannot travel to the meeting. However, the board emphasized that the business meeting should encourage comments and suggestions from the membership and is a place for the membership to make requests and question the board. The sense of the board is that the executive committee and staff should plan 1984's business meeting to encourage this. □

COMMITTEE (From p. 1)

invitation from the National Association of Alcoholism Treatment Programs for ALMACA to be a member of the task force advising the Joint Commission on the Accreditation of Hospitals (J.C.A.H.). The committee decided this joint participation would be enhanced by presenting it to the full board of its next meeting in Burbank, California in April. The executive committee heartily endorsed this effort.

Dick Stanford, ALMACA national secretary, proposed that Adolph (Sully) Sullivan be approved for honorary membership in ALMACA. This was approved by the full executive committee, which noted Sullivan's long service to ALMACA and the occupational alcoholism field. After a long career at Standard Oil of California, which included service as the second national president of ALMACA, he retired in 1978. However, he did not retire from ALMACA and in 1982 and 1983 was the moving force behind the organization of the new California Central Coast Chapter.

Swift Elected Chairman Of ADPA Council

Harold A. Swift, administrator of the Hazelden Foundation, has been elected chairman of the Agency Council of the Alcohol and Drug Problems Association (ADPA).

Swift, administrator of the Hazelden Foundation since 1976, has participated on numerous chemical dependency-related boards and councils over the past two decades. Recently, he was also reappointed for the third term to the Professional and Technical Advisory Committee to the Psychiatric Council of the Joint Commission on Accreditation of Hospitals. In that role he represents a coalition of the National Association of Alcoholism Treatment Programs, Alcohol and Drug Problems Association of North America, the National Council on Alcoholism, and ALMACA. □

Criteria for Articles Submitted to ALMACAN

The *ALMACAN* is intended as a vehicle for keeping ALMACA members informed in all areas of interest to them. This involves more than merely printing news affecting the field. It involves service as a platform for the exchange of views and for the statement of informed opinion by individual ALMACA members.

Persons wishing to submit articles to the *ALMACAN* are requested to follow these criteria:

1. **Do not submit materials that have been or will be published elsewhere.**
2. **If there is a time element, such as desired publication in a given month, state this in the covering letter.**
3. **Submit 1 copy only, typewritten and double-spaced.**
4. **Take whatever space you need to tell the story. However, understand that space obligations may cause the article to be edited before publication. Therefore, state all the essential material in the beginning of the story.**
5. **For the author's information, 1½ pages of typewritten copy equal approximately 1 column of typeset copy.**
6. **Photographs are very desirable. They MUST be accompanied by a caption.**
7. **The copy deadline is the 15th of the month preceding issue.**
8. **Send your manuscript to the Editor, the *ALMACAN*.**
9. **Consult a copy of the *ALMACAN* to see style and format used.**

The Washington Arena: A Roundup of Political News and Views

By Jay Lewis, Editor
The Alcoholism Report
A Johnson Institute Publication
1100 17th N.W., Suite 312
Washington, DC 20036
Phone: 202/293-2734

President Reagan submitted an election-year budget which calls for an increase of more than $10 million in the alcohol, drug abuse, and mental health services (ADMS) block grant in fiscal year 1985 (FY-85), and a hike of nearly $5 million in alcoholism research funding by the National Institute on Alcohol Abuse and Alcoholism (NIAAA).

The FY-85 budget message, delivered to Congress on February 1, would boost funding for treatment and prevention services through the ADMS block grant to a level of $472,300,000 in the fiscal year beginning next October 1. Although only $10.3 million above the amount appropriated by Congress this year, the request was received by most sectors of the field as good news in light of previous budget estimates submitted by the President. Last spring, the Administration made a revised request of only $430 million this fiscal year for the ADMS block.

The NIAAA research request would increase funding from the current appropriations of $42,866,000 to $47,835,000 for a new high in that line item. However, the request represents an end to the dramatic increments proposed by the Administration in recent years, which have seen a doubling of alcohol research funding since FY-82. These increases were in line with the 1980 report on alcohol research by the prestigious Institute of Medicine, which declared NIAAA research "grossly underfunded" and recommended 50 percent annual increments over a three-year period.

NIAAA would receive a total $60,471,000 under the President's request. In addition to the research amount, $1,086,000 would be allocated to research training and $11,550,000 for direct operations. The latter line item funds most of the Institute's prevention activities, including the big contract for the National Clearinghouse for Alcohol Information.

The Administration requested no funds for clinical training at NIAAA, the National Institute on Drug Abuse (NIDA), or the National Institute of Mental Health (NIMH)—in keeping with its policy to terminate such support. Congress last year appropriated more than $20 million for NIMH clinical training, but ignored NIDA and NIAAA. A push is expected during this year's round of appropriations hearings to restore the clinical training budgets for both NIAAA and NIDA. Past support under the clinical training budget has gone to the career teachers program, the project to establish nationally recognized standards and procedures for alcoholism counselors, and the state manpower development program.

The fact that NIAAA research funding goes beyond support for biomedical studies is again emphasized by the proposed internal allocation of the FY-85 request. Treatment and treatment assessment research would be accorded an increase from $4,781,000 this fiscal year to $5,652,000 next, while prevention research would receive $3.8 million next year compared to $3.5 million this year.

NIDA's funding is pegged at $79,270,000 under the FY-85 request, including $63.5 million for research. NIMH would receive a total $226.3 million, of which $177.6 million is projected for research.

• The Senate Subcommittee on Alcoholism and Drug Abuse has a new chairperson—Sen. Paula Hawkins (R-FL)—following the sudden departure of the previous incumbent, Sen. Gordon Humphrey (R-NH). Humphrey, it was disclosed early in February, is moving from the parent Labor and Human Resources Committee to take a slot on the Senate Banking Committee.

Hawkins, a conservative Republican, has been supportive of alcoholism and drug abuse efforts in the past. She led a successful effort in 1982 to raise the research authorization for NIAAA, declaring at that time that there was a "tremendous need for better understanding into the causes and effects of substance abuse."

Humphrey, one of the staunchest fiscal conservatives in the Senate, had chaired the Alcoholism and Drug Abuse Subcommittee since January, 1979, when the Republicans took control of the Senate. He had been a minority member of the panel for two years prior to becoming its head. Humphrey's tenure as chairman has been marked by a series of hearings on significant topics ranging from employee assistance programs to fetal alcohol syndrome. On the eve of his departure, hearings had been planned for March on children of alcoholics.

Hawkins is the fifth Senator to head the subcommittee since its inception in the early 1970s when Harold Hughes, the primary legislative architect of the federal alcoholism effort, first chaired the panel. Following Hughes' retirement from the Senate in 1974, Sen. William Hathaway (D-ME) became its chairman. Hathaway was succeeded by Sen. Donald Riegle (R-MI) following the former's defeat in his re-election bid in 1978.

In the committee membership changes involving Humphrey's move, Sen. Strom Thurmond (R-SC) joins the Labor and Human Resources Committee. Thurmond is the Senate's foremost advocate of warning labels on alcoholic beverages. It was not immediately known whether he would bid for a seat on the Alcoholism and Drug Abuse Subcommittee. Hawkins has in the past co-sponsored warning label legislation.

The Senate Subcommittee has no precise counterpart on the House side, where primary authorizing jurisdiction for the federal alcoholism and drug abuse efforts resides with the Commerce Subcommittee on Health and the Environment, chaired by Rep. Henry Waxman (D-CA). The alcohol and drug focus of the Waxman subcommittee is diffused by the fact that it encompasses not only the universe of

health issues but broad environmental concerns too.

• The Health Care Financing Administration (HCFA) issued final regulations on the new prospective payment program for Medicare that were described as "almost an ideal outcome" by NIAAA Director Robert Niven.

The regulations, published January 3 in the *Federal Register*, provide alcoholism and drug abuse units and speciality hospitals an exemption until October 1, 1985, from the new system, which would peg reimbursement to diagnosis-related groups (DRGs). Field interests, including ALMACA, had protested the DRG for alcohol dependence on grounds it did not realistically provide for alcoholism rehabilitation stays. The alcohol DRG was framed on the basis of an 8.1 day mean length of stay and would result in an average payment of about $2,250.

The HCFA regulations spell out discrete program and staff standards for those hospital units and specialty hospitals to be exempt—criteria distinct from psychiatric programs which were excluded from the DRG system by statute. The standards include the direction of the program by a physician who has had education or experience in the alcohol/drug field, and inclusion on the staff of a certified alcohol/drug counselor. Also required would be coordination with community organizations, such as halfway houses, the Salvation Army, Alcoholics Anonymous, and Alateen.

NIAAA and HCFA will be collaborating in the coming months to see how the DRGs may be modified when the exemption expires in 1985. An effort may be made to provide separate DRGs for detoxification and rehabilitation—the lack of which was a major focus of criticism by field groups responding to the initial HCFA plan announced last September.

More than 900 comments related to the alcohol/drug DRGs were filed with HCFA out of a total of some 2,700 comments on the September announcement, which dealt with the whole range of hospital services offered under Medicare.

• A Florida pediatrician with a strong personal commitment to alcohol and drug abuse prevention efforts aimed at youth appears to be the frontrunning candidate to succeed William Mayer as Administrator of the Alcohol, Drug Abuse, and Mental Health Administration.

He is Donald Ian Macdonald, who is the choice of White House Special Assistant Carlton Turner for the ADAMHA job vacated when Mayer became Assistant Secretary of Defense for Health Affairs in November. Macdonald has the strong backing of the National Federation of Parents for Drug-Free Youth, but has encountered stiff opposition from mental health groups who are pushing for a nominee with psychiatric credentials.

Macdonald's past and current affiliations include Director of Clinical Research for Straight, Inc., St. Petersburg, FL, a program whose tough treatment approach for teenagers has engendered some controversy; the American Council on Marijuana; and the Florida Medical Association's Drug Abuse Committee.

As the *ALMACAN* went to press, the Senate, which must confirm the nomination, had not yet received any formal papers on Macdonald, although he has already touched bases with key Senate staff as well as representatives of constituency groups. Macdonald, 52, has been in private practice and has had no experience in government.

The ADAMHA job has no statutory requirements for psychiatric, or even medical credentials. The first ADAMHA Administrator, James Isbister, was a nonphysician with a graduate degree in public administration.

• The prestigious American Assembly—a nonprofit affiliate of Columbia University—is planning a major national conference on alcohol issues April 26–29 in Harriman, NY.

NIAAA has awarded the Assembly a $95,000 grant for the conference, which will be followed by regional and local meetings across the nation with the overall objective of framing consensus positions and strategies for preventing alcohol-related problems. The Assembly plans to raise at least $100,000 more from private sources to conduct the follow-up activities, which will include broad dissemination of

(See WASHINGTON, p. 15)

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published materials emanating from the conference.

As outlined in the NIAAA grant summary, the conference will focus on: health issues, including the impact of alcohol on general health and lifestyles, and various approaches to deal with alcohol-related health problems; societal issues, including attitudes toward alcohol use and effects of alcohol on family life, the work place, public safety, and the legal system; economic issues, including the alcoholic beverage industry, advertising, insurance, and health care costs; and political issues, including civil and human rights issues, the legal premises for regulation, and prospects for achieving community based policies.

Project director under the NIAAA grant is Louis Jolyon West, of the UCLA Neuropsychiatric Institute in Los Angeles. William Sullivan is president of the American Assembly which periodically selects a topic of national significance as its focus. □

ALMACA Chapter Officers Elected

ALMACA chapters in Michigan, Maine, and New York State have elected new officers.

New officers of the Hudson Valley Chapter in New York State are: President, Raymond A. Griffin, Westchester County Employee Assistance Program, White Plains; Vice President, Gerard Rooney, Westchester County Employee Assistance Program; Secretary, Marcia Nagle, Longview Associates; and Treasurer, Albert Dorsey, Sr., PAR Coordinator, White Plains.

New officers of the Mid-Michigan Chapter are: President, Tom James, labor liaison with C.A.R.E.S, Lansing; Vice President, Patricia Marciniak, St. Lawrence Dimondale Stress Reduction Center, Dimondale; and Secretary/Treasurer, Darold Oxender, Board of Water and Light, Lansing.

New officers of the Maine Chapter are: President, Earle R. Loomer, Jr., National Council on Alcoholism in Maine, Inc., Augusta; Vice President, John Howland, Georgia Pacific Corporation, Woodland; Secretary, Kevin Michael Parker, consultant, Portland; and Treasurer, John Kasten, Community Counseling and Health Services, Bangor.

New officers of the Western New England Chapter are: President, Tim Rabbitt, City of Springfield; Vice President, Ron Sawyer, Belchertown; Secretary, Marge Babkiewicz, Baystate Medical Center, Springfield; and Treasurer, Bob Tetrault, PAR office, Chicopee.

All across America, alcoholics, drug abusers and their families are finding a new hope. They are discovering a New Beginning.

The New Beginnings program has been created by Recovery Centers of America as a national network of high quality health care treatment centers, to better serve the complex needs of the victims of alcoholism and other drug dependencies.

Drawing on the strengths of well-known existing treatment facilities, New Beginnings represents a joining together of expertise in a broad range of areas. Expertise in inpatient and comprehensive aftercare. In family treatment and involvement. In on-going research. In education. And in serving as an important community resource.

But at the heart of the New Beginnings program is a commitment to each patient and their families. A commitment to provide the highest quality treatment, administered by leading professionals in a positive and caring atmosphere.

In this way, at New Beginnings we feel we can best attain our goal. That is, to return the alcoholic, drug abuser and their families to the vital, healthy lives they once had. By treating one person at a time. One day at a time.

New Beginnings

A program of Recovery Centers of America/A Subsidiary of National Medical Enterprises, Inc.

Corporate Headquarters
Washington, D.C. 20007
(202) 298-3230

Fair Oaks South
Lakehurst, NJ/(201) 657-4800

Fenwick Hall
Johns Island, SC/(803) 559-2461

Alisal Community Hospital
Salinas, CA/(408) 424-5663

Century City Hospital
Los Angeles, CA/(213) 277-4248

Dominguez Valley Hospital
Compton, CA/(213) 639-2664

The Meadows Recovery Center
Gambrils, MD/(301) 923-6022

Serenity Lodge
Chesapeake, VA/(804) 543-6888

Doctors Hospital of Pinole
Pinole, CA/(415) 724-1520

Ojai Valley Community Hospital
Ojai, CA/(805) 646-5567

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Fully accredited by the Joint Commission on Accreditation of Hospitals. Approved by participating private individual & group hospital insurance plans & by most Medicare & CHAMPUS.

Central States Announces Workshops

Central States Institute, in cooperation with St. Xavier College, announces its winter/spring, 1984, series of workshops on "Successful Assessment and Treatment of Addiction." This series is structured so that participants may attend as many workshops as they wish. These workshops are helpful for alcoholism counselors and other professionals who work with chemically addicted clients.

Application has been made with the Illinois Alcoholism Counselors Cetification Board for Category I continuing education credits for the workshops. All participants will receive a certificate upon completion of the workshops.

The workshops and their delivery dates are: February 10 and 11, The Dynamics of Alcoholism; March 9 and 10, The Dynamics of Chemical Dependency; and April 6 and 7, Treating Multiple Addictions.

Reservations are required. For more information, call Stella Nicholson or Mary Wannop-Catelain at (312) 266-6100 Ext. 352 or Debbie Pitlack at St. Xavier College (312) 779-3300. □

Hospital EAPs Organize Group

At the ALMACA annual meeting in Minneapolis, an association of employee assistance programs that provide services to hospitals was formed. The purpose of this organization is to be a resource for such programs—sharing information, develop standards, and providing general support. We are just in the beginning stages of development and warmly invite others to join us.

If you would like to join or want further information, call or write: Elizabeth Thorpe, Coordinator, Employee Assistance Program, Good Samaritan Hospital & Health Center, 2222 Philadelphia Drive, Dayton, Ohio 45406; (513) 278-2612, Ext. 2344, or Ray Karesky, Director, Employee Assistance Program, St. Luke's Medical Center, 1800 E. Van Buren, Phoenix, Arizona 85006; (602) 251-8372. □

Metrolina Occupational Programs Conference

The Occupational Health Services, a division of the Charlotte Council on Alcoholism, which provides employee assistance program services for the Mecklenburg County area, is again putting together the Metrolina Occupational Programs Conference at the University of North Carolina at Charlotte in March, 1984.

It will be the fifth Metrolina Occupational Programs Conference. Scheduled for March 8–9, its theme will be "EAP's: Quality Cost Containment." It will be held at the University of N.C. at Charlotte, College of Business Administration. Conference fee is $60.

For further information, call (704) 376-7465. □

Meeting Dates Changed

The ALMACA San Fernando Valley Chapter will meet regularly at Sorrentino's restaurant in Toluca Lake. The luncheon and meeting will be changed to the first Tuesday of each month. Lunch will remain at $9 for members. □

NAATP Annual Meeting Outlined

Concurrent seminars on the diverse issues of clinical supervision, third-party reimbursement, and mergers, acquisitions and management contracts will be the lead activities at "Provider Preparedness: '84," the 1984 annual meeting of the National Association of Alcoholism Treatment Programs (NAATP) , May 14–17 at the Fairmont Hotel in Denver, CO. The conclave will also see a repeat of the popular "Issues Roundtable," where alcoholism treatment field professionals from all over the country share perceptions and information on the key issue of their choice.

According to Allen Drum of Presbyterian-St. Luke's Medical Corporation of Denver, who is serving as 1984 Annual Meeting Program Chairman, "Much has happened in the past year for NAATP and for the field in general. By offering three concurrent and distinct state-of-the-art seminars, NAATP is attempting to reach all clinical and management levels at treatment programs with educational offerings designed exclusively for them. As the field of addiction treatment grows in stature and recognition," Drum said, "so does our responsibility to strive for excellence with ethics, compassion and intelligence. 'Provider Preparedness: '84' offers us the opportunity to exercise that responsibility."

The seminar on clinical supervision will present up-to-date techniques in planning, organizing, and delivering quality patient care. The competency-based workshop features a specially-written manual and will cover tasks and functions of clinical supervision, the role of clinical supervision in various systems, the scope of clinical supervision in planning, organizing and in-patient care, and the tools available to the clinical supervisor.

Third-party reimbursement will be geared exclusively to reimbursement issues in alcoholism treatment as is appropriate for program administrators, financial staff, and others with responsibility in this area. In addition to looking at the mechanics of third-party reimbursement—from medicare to the Blues—the presentors' approach will be that an improved knowledge of and facility with the reimbursement picture serves as an excellent management tool.

Mergers, acquisitions and management contracts will concentrate on decision-making systems, negotiating techniques, legal aspects, financial considerations, and opportunity analysis, with special case studies specific to alcoholism treatment providers.

For more information on "Provider Preparedness: '84," call or write Vicki Kotecki, NAATP Manager, Administrative Services, 2082 Michelson Drive, Suite 200, Irvine, CA 92715; (714) 975-0104. □

Education/Conferences

April

The Hazelden Foundation is co-sponsoring ALC. 84, an international conference on alcoholism and drug addiction, at the University of Kent at Canterbury, England, April 2–7. Other sponsors include: Broadway Lodge, England; the American Medical Society on Alcoholism, New York; and the International Council on Alcohol and Addictions, Switzerland. ALC. 84 will provide a forum for the exchange of ideas on all aspects of alcoholism and drug addiction. Presenters represent a wide variety of background and experience—medicine, psychology, social work, industry, government, armed forces, education, law and self-help groups. Registration deadline is March 1, 1984. For further information, contact Beth Johnson at Hazelden (800-328-9000 continental U.S.), or (612-257-4010 Minnesota and outside continental U.S.).

The National Council on Alcoholism's National Alcoholism Forum, will be held April 12–15 at the Westin Hotel in Detroit. The Theme of this year's Forum is NCA's 40th Anniversary Celebrating Prevention. Please direct inquiries to: Forum Coordinator, National Council on Alcoholism, 733 Third Avenue, New York, NY 10017.

April 16–17, Twin Bridges Marriott Hotel, Arlington, VA, (Washington, DC) "Alcoholism, Other Drug Dependence, and Family Systems Theory," a Johnson Institute Seminar to explore the effects of alcoholism or other drug dependencies on the family as a system. For further information, contact Office of Field Education, Johnson Institute, 10700 Olson Memorial Highway, Minneapolis, MN 55441–6199; telephone (612) 544-4165.

The Fifth Regional Conference on substance abuse, "Innovations in Prevention and Treatment," will be held on April 18, 19, and 20, 1984, in Cincinnati, OH. The event is sponsored by the central community health board. For more information, contact: Ann Blankenhorn, M.A., Central Community Health Board, 532 Maxwell Avenue, Cincinnati, OH 45219; telephone (513) 559-2016

The Georgia ALMACA Chapter is sponsoring the Ninth Southeastern EAP Institute in Atlanta, Georgia from April 29 through May 4. This conference is a leading conference in the occupational alcoholism field focusing on education and research. This year's theme is "Health Cost Containment: The Employee Assistance Strategy." Further information may be obtained from the President of the Georgia ALMACA Chapter, Dr. Howard Grimes, Director of Employee Assistance Program, University Plaza, Atlanta, GA 30303.

June

June 4–6, The New York State School of Industrial and Labor Relations, Cornell University, annual summer conference on EAP/Alcoholism programs, to be held at the Conference Center on the Ithaca campus. For more information, write Cornell University, P.O. Box 1000, Ithaca, NY 14853.

June 4–7, The Fifth Annual National Conference on Employee Assistance Programming. Contact Bethany Medical Center, The EAP Conference, 51 North 12th Street, Kansas City, Kansas 66102; telephone (913) 281-7648.

June 11–15, Central States Institute of Addiction, Chicago, a 5-day program on counseling skills, medical aspects, treatment modalities, and specialty areas, such as sexuality, stress, nutrition, and spirituality, and employee assistance programming. For further information, contact Stella M. Nicholson or Mary E. Wannop-Catelain, Central States Institute of Addiction, 120 West Huron Street, Chicago, IL 60610; telephone (312) 266-6100.

June 18–29, Seattle University's 35th Annual Symposium on Alcoholism, "Alcoholism: Past, Present, and Future." Guest lecturers. plus short courses on anorexia and alcoholism, education and prevention strategies for teachers, an alcoholism schools workshop, and Alcoholics Anonymous as a resource for professionals. Regular 8-week summer session (June 18–August 10) will offer other courses required for the Basic Certificate in Alcohol Studies. For more information, contact Alcohol Studies Program, Seattle University, Seattle, WA, 98122; telephone (206) 626-6498. □

Employment Opportunities

EMPLOYEE ASSISTANCE PROGRAM

CONSULTING SEMINARS

WHAT YOU WILL LEARN

EAP BASICS (First Day)

How to write the policy statement (sample provided)
How to write the employee brochure (sample provided)
How to write the supervisors guide (sample provided)
How to conduct supervisory training (outline provided)
How to train the senior managers (outline provided)
How to identify and evaluate provider organizations
How to ensure effective labor-management interface
How to develop a reporting format (sample provided)
How to determine the EAP's staffing requirements
How to develop the EAP implementation schedule
How to effectively manage dispersed populations
How to monitor treatment and aftercare effectively
How to promote and market the EAP within the company
How to establish a case management system
How to deal with the issues of confidentiality
How to predict types of impairments in a work group

EAP CONSULTING (Second Day)

How to add EAP Consulting to your practice
How to acquire commercial accounts
How to value your services and establish fees
How to market yourself and your services
How to get good professional exposure
How to develop good centers of influence
How to prepare a proposal (sample provided)
How to write the contract (sample provided)
How to ensure contract renewal
How to find and qualify good prospects
How to spot a bad consulting opportunity
How to close the sale
How to deal with the business community
How to keep operating costs and overhead low
How to gain and maintain credibility
How to ensure high standards of ethics

CITIES AND DATES

Hartford	January	10-11
Boston	January	12-13
Los Angeles	January	24-25
San Francisco	January	26-27
Austin	February	7-8
Dallas/Fort Worth	February	9-10
Chicago	February	14-15
New York	February	16-17
Detroit	February	28-29
Cleveland	March	1-2
Philadelphia	March	13-14
Washington, DC	March	15-16
Atlanta	March	27-28
Orlando	March	29-30

SEMINAR LEADERS

The Jernberg Corporation is nationally recognized in Employee Assistance Programming and has served diverse industries throughout the country. Their growth can be attributed to their unique capability to handle huge and prestigious companies, fulfilling the clients' needs within their economic parameters.

SEMINAR FEES (Tax Deductible)

EAP Basics	First Day	$185
EAP Consulting	Second Day	$185
EAP Basics & Consulting		$325

FOR MORE INFORMATION AND REGISTRATION

Call: Toll Free (800) 343-3028
In Mass. (617)754-1770

Write: The Jernberg Corporation
390 Main Street
Worcester, MA 01608

Preregistration is required.
Seating will be limited.

The Professional's Guide To Picking The Most Effective Alcoholism Treatment Center.

Privacy

Brookwood Lodges Alcoholism Treatment Centers offer a secluded, residential environment. Each lodge is a free-standing facility which assures the patient's confidentiality.

Progress Documentation

Brookwood Lodges offers weekly in-patient reports to make sure you are aware of each phase of treatment from primary care to aftercare. And to establish an open line of communication not often found in many programs.

Professionalism

We provide the best known treatment methods; experienced, certified counselors; and support systems to achieve our primary goal—the patient's return to a productive life.

But treating the alcoholic is not enough. We also offer one of the most extensive in-patient family treatment programs available.

We're a subsidiary of American Medical International. All facilities have been J.C.A.H. accredited for three years.

Please call or write to our headquarters or one of our lodges for information that will further explain why Brookwood Lodges is one of the most effective alcoholism treatment centers available for your people.

When You Think There's Nowhere To Turn, Turn To Brookwood Lodges.

Brookwood Lodges

Orlando, Florida; Dallas, Texas; Mobile, Alabama; Birmingham, Alabama; San Antonio, Texas; Dublin, Georgia; Columbus, Ohio.
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