THE ALMACAN

The most challenging problem we face in the field of occupational alcoholism is to bring about the bankruptcy of the alibi structure in the drinker long before it would occur in the ordinary course of events.

Volume No. 8, Issue 2 **Published monthly by: Association of Labor-Management Administrators and Consultants on Alcoholism** **February 1978**

ALMACANS EXPRESS VIEWS ON NIAAA'S 5-YEAR PLAN

ALMACA's views on future government plans for occupational alcoholism were expressed at a constituency-input meeting called by NIAAA Director Ernest P. Noble January 13 to discuss the agency's proposed five-year plan.

President Paul Sherman and Executive Director Jim Baxter joined a group that represented the field of alcoholism concern – various public organizations, labor, management, Congress and the Executive Branch – in the day-long session.

"The meeting started the process of reaching consensus from the field on the appropriate goals, and action strategy to reach them, as NIAAA develops a long-range plan that is both workable and widely supported," Baxter said after the meeting.

It was agreed, he said, that each organization would prepare a position statement for NIAAA to consider in developing a final version of the plan, a procedure much different from the "insider" process that produced the draft plan released for comment last August (See August ALMACAN).

Dr. Noble, who hopes the plan will become a centerpiece for a new partnership with the field, said all comments will be considered and that regional meetings will probably be held to obtain further grassroots opinion.

A followup Washington meeting is scheduled for April 7 to discuss the position papers received by the Institute in the interim and to formulate the plan.

ALMACA submitted initial comments in a November 1 letter to Noble that endorsed the planning effort and its intentions but pointed to what were considered "fatal flaws" (See letter sent to membership November 17, 1977).

The letter said that (1) without yearly milestones that can be measured, the five-year effort will fall of its own weight and (2) unless the long-range goals are backed up by specific plans to reach them, there is little hope of success. In addition to the general comments, there were specific suggestions concerning the occupational alcoholism goals.

Additional comments presented at the January meeting by Sherman and Baxter included the following topics:

Insurance – Action to insure alcoholism treatment coverage for all federal employees; expand Social Security provisions to allow payments to "for profit" treatment institutions; include full alcoholism services in health maintenance organizations; and expand outpatient and aftercare coverage.

Research – Into why programs are started; prevalence and incidence of alcoholism on the job; identification of skills needed by occupational program personnel; and uniform cost-benefit data.

Training – Start now to provide training to meet the proposed goal of OA program coverage for at least 50 percent of all workers.

General – Provide more effective programs for executives; expand programs to cover families; reduce the 50 percent OA coverage objective to a more realistic level.

These comments and a re-statement of previous suggestions will be submitted in ALMACA's position paper to the Institute.

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WIDER DANGER IS SEEN FOR DRINKING MOTHERS

Drinking during pregnancy may cause damage to children far more widespread but less noted than the Fetal Alcohol Syndrome (FAS) of birth defects and other abnormalities that has been widely publicized in recent months (ALMACAN, August 1977).

That possibility was raised in testimony by science and health experts before the Senate Alcoholism and Drug Abuse Subcommittee at a one-day hearing January 31 on the FAS and proposed labeling of alcoholic beverages.

Of the three million babies born in 1978, as many as 1,500 may be "severely and irreversibly impaired–both physically and mentally–as a result of excessive consumption of alcohol by their mothers during pregnancy," said Dr. Gerald L. Klerman, Administrator of the Alcohol, Drug Abuse and Mental Health Administration (ADAMHA).

But, Klerman added, recent studies suggest that alcohol consumption during pregnancy "may also be central to the development of more subtle–and vastly more frequent–abnormalities of attention, behavior and learning which are collectively termed minimal brain dysfunction."

That dysfunction may affect some five to ten percent of the school-age population, or five to seven million children, Klerman testified.

"It is estimated," he said, "that a substantial portion of these children are affected as a result of maternal consumption of alcohol during pregnancy."

Klerman stated emphatically that the tragedy of the situation is that "such deformities, retardation and learning disabilities can be prevented."

Klerman and the other scientists expressed conviction that alcohol consumption is a factor in causing the FAS but they were unable on the basis of current evidence to pin down an exact cutoff point of danger. Nevertheless, they indicated there could be a risk of some birth defects related to consumption of as little as one ounce of alcohol (two drinks) a day.

Dr. Ernest P. Noble, Director of NIAAA, responded to a question about a safe level of drinking by saying that one ounce or less of alcohol a day wouldn't cause the full Fetal Alcohol Syndrome but, he warned, "there is no assurance that parts of the FAS won't show up."

The "full" FAS was described to the Subcommittee as pre- and post-natal growth deficiency, small head circumference, irregularities of head and face, developmental delay or mental deficiency and irregularities in the structure of the heart, genitals and limbs.

Klerman said not all of these abnormalities

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Sherman and Baxter urged ALMACA members to submit comments to headquarters for including in the position paper being drafted.

"Because we want our position on the NIAAA five-year plan to be fully representative of the organization, we will give careful consideration to all comments received," Sherman said.

A CALL FOR COMMENT

One of the main functions of ALMACA is to speak for and on behalf of the membership before official bodies that make policies affecting the field of occupational alcoholism programs. To do that job most effectively, and to make certain that the views of members are fully represented, we need your comments.

We were greatly helped recently by letters of opinions from ALMACANS in preparing our presentations, written and verbal, to NIAAA on its draft five-year plan – and, our views are leading to revisions in the plan as a result (See "Plan" this issue). President Paul Sherman and I were able to make firm statements of position and they were effective, partly because NIAAA officials knew we were speaking for a nationwide organization. In other words, your opinions give us information we need and your backing gives us clout.

From time to time, as in the NIAAA planning matter, we will ask the membership for views on a specific subject so that we can develop a policy or prepare a presentation. But I want to emphasize another point: We want your opinions at all times. At the national office, we try to keep abreast of what's going on in the field and alert to problems, but there is no way we can do that job effectively without hearing from the membership.

Consider this a request for your views at any time you have something to say about general national policies, ALMACA as an organization or specific activities or issues you believe should have attention. In my view, there are no "unsolicited" opinions or comments from members – we want and need to hear from you.

Here are some excerpts from member comments that helped to form our recent presentation to NIAAA, and which will be used by us as the process of plan revision proceeds in the coming months.

Robert W. Partridge, Columbus, Ohio, said he admired NIAAA Director Noble's effort to enunciate occupational goals and objectives, but that he is, "to say the least, overly optimistic. A more realistic approach is to establish meaningful and obtainable goals; don't try to do everything at once." In short, he said, NIAAA should rework the plan to assure obtainable objectives, reasonable goals and "useable in the field" research.

Einer P. Madsen, Rochester, N.Y., suggested it might be appropriate to "research the benefits of, or the adverse effects of, Fee for Service of Labor-Management Programs."

Mary H. Gallagher, Watertown, N.Y., said 1983 is too distant an objective date for expansion of insurance coverage to 50 percent. "An intensified effort in a more condensed time frame is imperative," she said.

James S. Kemper Jr., Long Grove, Ill., said that generally, "the most important single objective for NIAAA during the next five years is to achieve a unified effort within all of the miscellaneous federal activities in this field, plus a productive and hostility-free relationship between NIAAA and the reputable voluntary health agencies working in this field."

Bruce N. Davidson, Belmont, Mass., called for "some form of incentive . . . for insurance carriers to reimburse outpatient and continuing care (past hospitalization) costs." He said that evaluation and analysis of treatment programs should include a sample of certified private treatment centers that are not federally or state supported. Consideration should be given, he added, to legislation that mandates insurance carriers to reimburse 80-90 percent of alcoholism treatment.

C.F. Pilkington, East Hartford, Conn., submitted a composite response from the staff of the Pratt & Whitney Aircraft Group program and said many of the NIAAA plan objectives could be reached, given strong NIAAA leadership and unified support from the field. "We feel that ALMACA can and should be the driving force to effect unification not only within the occupational sector, but among other factions as well – most of whom rely heavily on us for their continued existence and projected growth," he said.

Jerome S. Becker, Sacramento, Calif., submitted background materials on programs in California. He also suggested that there should

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PAPERS ARE FILED FOR CREDENTIALLING GROUP

Papers to incorporate the National Commission on Credentialling of Alcoholism Counselors were filed with the District of Columbia on January 19.

After more than a year of study and another year of discussion, that was the first formal step leading to creation of the organization recommended in the Finger Panel Report issued last February (ALMACAN, April 1977).

An essential next step is approval of a hoped-for contract with NIAAA to support the initial organization of the Commission by a technical expert.

Dr. Leonard Mitnick, Chief, NIAAA Training Branch and a member of the Finger Panel, said consideration is being given to a professional services contract for a feasibility study to implement the recommendations.

"It is important to provide legitimate credentials for counselors and we want to move as quickly as possible," said Mitnick who pointed out that Institute Director Ernest P. Noble is personally committed to this objective. He had no specifics, however, on a contract or when it might be approved within the Institute.

Mel Schulstad, President of the National Association of Alcoholism Counselors (NAAC), said he hoped NIAAA "will act quickly so that this long-delayed important step in the professional development of the field can become a reality soon – possibly by May 1."

Attorney Stephen Calkins, of Covington and Burling, said no problems are foreseen in approval of the certificate of incorporation but that the process will take some time. Calkins and Peter Barton Hutt are representing the new Commission.

According to the papers, the Initial Commissioners of the NCC will be: Margaret Rudolph, Executive Director, Association of Halfway House Alcoholism Programs; Douglas Harton, Executive Director of the NAAC; John Pinney, Managing Director of the NCA Washington office; Riley

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Regan, President of the Council of State and Territorial Alcoholism Authorities; A.H. Hewlett, Executive Director of the Alcohol and Drug Problems Association; and Dr. Kenneth F. Finger, Chairman of the Panel that produced the Finger Report.

Once incorporated, Calkins said, the Interim Commissioners will adopt procedures for selection of a permanent board and such matters as drafting of by-laws and other organizational documents.

Plans call for a 34-member board broadly representative of the alcoholism field, including ten counselors chosen from a pool of 100 nominees – two from each state.

An early task for the board will be to devise minimum national standards for certification of alcoholism counselors at the state level. A five-year plan for self-sufficiency is called for with a budget estimated at about $180,000 a year.

At a December 13 meeting, members of the Finger Panel worked out a compromise on the issue of how the counselor-members would be nominated for the board. It was then agreed that state counselor associations will make nominations "in concert" with state alcoholism authorities and, if there is no consensus on a nomination, the Finger Panel would have discretion to make a choice. The compromise also calls for nominations of state alcoholism authorities to be made in concert with NAAC.

The original plan to fund organizational work called for an NIAAA request for proposal (RFP) to support creation of the new organization. In early December, however, it was found that this route did not meet federal funding regulations.

At the December 13 meeting, the Panel divised a new strategy – to incorporate the new organization and seek a professional services contract from NIAAA for an individual to facilitate initial implementation and operation.

Charles Sapp, Executive Director of the Eastern Area Alcohol Education and Training Program (EAAETP), was chosen by the panel as the prospective technical expert to perform that initial task.

NYC BARS DISCRIMINATION AGAINST ALCOHOLIC

Discrimination against recovered alcoholics in employment, insurance, welfare, credit, child custody and licenses is barred under legislation enacted last month by New York City.

The bill was drafted by the NCA-New York affiliate after a year-long study that revealed many areas of discrimination against recovered alcoholics.

Allan Luks, executive director of the affiliate and director of the study project, said he expects the New York statute to become a model for legislation elsewhere and will encourage other communities to pass similar laws.

Luks pointed out that the law will not cost the city any money but, instead, will provide new job opportunities for recovered alcoholics and make them taxpayers rather than welfare recipients.

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appear in every affected child, nor are all children born of alcoholic women affected. "Further," he said, "average alcohol consumption through pregnancy may not be as important as the maximum concentration obtained at critical periods."

Sen. William D. Hathaway (D-Maine), Chairman of the Subcommittee, asked if harm could be done before a women knew she was pregnant. Klerman answered that some effects may occur in the first month of pregnancy and that he would recommend not drinking even one ounce of alcohol per day.

As for children showing less than the full FAS, Klerman said preliminary data from some studies "have already confirmed that babies born of women who consume between one and two ounces of absolute alcohol a day can manifest abnormalities of growth, congenital malformations and behavioral characteristics which are associated with alcohol consumption during pregnancy but are short of the full Fetal Alcohol Syndrome."

A NIAAA Health Caution, issued June 1, 1977, said that while safe levels of drinking are unknown, it appears that a risk is established with ingestion of above three ounces of absolute alcohol (or six drinks) per day. Between one ounce and three ounces, there is still uncertainty but caution is advised.

The Health Caution was a factor in sparking moves toward labeling of alcohlic beverages that was one of the subjects of the hearing. Sen. Strom Thurmond (R-S.C.) testified in support of his bill (S.1464) that would require a warning label on all alcoholic beverages.

"People must be given freedom to make their own choices about drinking," said Thurmond, but they need to be informed. His proposed warning label, required under amendment of the Food, Drug and Cosmetic Act, would state:

"Caution: Consumption of alcoholic beverages may be hazardous to your health, may be habit forming and may cause serious birth defects when consumed during pregnancy."

The bill, as re-submitted in this session of Congress, does not require a warning in related advertising but Thurmond said he would like to see it included in the final measure.

Donald Kennedy, Commissioner of the Food and Drug Administration, said his agency does not have authority to order a warning label on alcoholic beverages but that they were working with the Treasury's Bureau of Alcohol, Tobacco and Firearms (BATF) which does.

We in the FDA, said Kennedy, "are fully committed to the concept of informative labeling for all foods, including alcoholic beverages."

Regarding arguments over the effectiveness of warning labels, such as on cigarettes, Kennedy said "I see no legitimate argument against providing such warning labeling where the scientific basis for the labeled warning is sound, particularly when the given products have otherwise been exempted from more direct health regulation, as tobacco and alcohol have been."

"In my view," he added, "the only problem is one of how to do it . . . it is my duty under the (Food and Cosmetic) Act to warn the public of a scientifically valid health hazard."

Testimony by Treasury spokesmen made it clear that labeling of alcoholic beverages, if any by the BATF will be a long time coming, certainly not before 1979.

Rex D. Davis, BATF Director, noted that the agency had published a request for comment in the **Federal Register** January 16 and that the file is open until March 16. Thereafter, BATF will consider the comments and decide on whether to propose labeling then, if a label is proposed, there will be additional time for comment, possibly hearings and then, possibly, a decision to order labeling of alcoholic beverages.

Sen. Hathaway raised the possibility that Congress might act in the interim.

Speaking for the Education Commission of the States Task Force on Responsible Decisions About Alcohol, Vice Chairman Bennett Katz, Augusta, Maine, questioned the effectiveness of labeling.

He granted that legislation, rules and regulations, controls and other policies are essential to any plan for prevention of alcohol misuse.

"However," he said, "the task force urgently recommends that these policies lend themselves to reinforcing and supporting educational efforts whose goals are the development and practice of responsible decision-making skills by our nation's population."

A panel of researchers testified as to their findings on damage to unborn children because of heavy drinking and all endorsed the idea of labeling. Dr. Carrie L. Randall, of the Medical University of South Carolina, presented striking color slides of infant victims of FAS and said that human and animal studies now indicate kidney impairment along with previously noted symptoms.

Dr. Henry L. Rosett, of the Boston University School of Medicine, concluded that "the damage caused by heavy alcohol consumption during pregnancy is a problem in which primary prevention, intervening during pregnancy, has the potential to improve the health of both mother and child. A warning label informing the public of the hazards of heavy drinking should have important benefits."

HEW TO REPORT ON MEDICARE/ALCOHOLISM

Under a bill passed by Congress, HEW is to report in six months on the advantages or disadvantages of extending Medicare coverage for alcoholism and drug abuse treatment centers.

The bill would provide reimbursement under Medicare and Medicaid for services furnished in rural health clinics, including those performed by nurse practitioners and physician assistants.

It directs HEW to conduct separate evaluations of the need for Medicare coverage for mental health and alcohol and drug abuse centers.

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be "explicit job specifications" in public or civil service agencies "that make a full-time job out of an in-house coordinator in state or federal services." In addition, he said, any state or federal agency with more than 5,000 employees should have a full-time person running the program.

Jim Roth, Phoenix, Ariz., said expansion of provisions for alcoholism services in health maintenance organizations should include occupational consultation. "I believe," he said, "that the HMO has an unparalleled opportunity to implement early intervention mechanisms with subscriber employers." He included a copy of a detailed proposal on the subject submitted to the Arizona Health Plan, one of the NIAAA-funded pilot HMOs that offers alcoholism treatment.

Rev. Jerry. S. Clausen, Southridge, Mass., said, in contrast to many others, that "the proposal to expand the insured population to 50 percent is a conservative one." He noted that in Massachusetts, legislation has already been signed into law requiring alcoholism services to be included in all group medical coverage. "Similar legislation in other states," he said, "could have the effect of increasing the insured population far beyond the 50 percent proposed."

William R. Williams, Toledo, Ohio, suggested that in research "it would be most important to specifically determine why companies started programs." He also suggested programs "designed to establish professional creditability for the consultants" and more attention to "the marketing process" in connection with counsulting.

Howard L. McFadden, Green Mountain Falls, Colo., pointed to a "definite and desperate need to gain inclusion of alcoholism treatment at any state licensed, or JCAH accredited, non-hospital facility for a federal civilian empoyee or for any person on Medicare, Medicaid or SSI."

Kenlyn Meaney, Santa Barbara, Calif., noted that the federal government funds programs to enlighten the public about alcoholism but "they do not carry insurance coverage for their own employees to receive treatment in spite of their advertised policy of support in this regard."

Adan F. Tijerina, Richland, Wash., thought a 25 percent insurance coverage under Social Security and other plans would run into taxpayer resistance.

Betty Reddy, Park Ridge, Ill, said pressure should be put on federal agencies so that insurance plans cover more than detox in hospitals and that occupational programs in general should be expanded to include family members.

Robert Kauffman, Skokie, Ill., said "the direction of the NIAAA is overly biased toward the perspective of treatment centers . . . Prevention and early intervention . . . have better potential for an improved success rate and greater savings. While treatment capability is essential, bias in that direction is like waiting for the horse to escape before repairing the barn door."

Conrad V. Schmitt, Minneapolis, Minn., said that for-profit treatment centers are discriminated against by state and federal agencies. "We cannot get reimbursement for treatment for anyone by Title XIX or XX or from any federal employee." He noted that contracts under those two Social Security Titles are cost-plus and "there is no incentive to reduce costs" in non-profit institutions. "It is ironic," he said, "that our taxes are being used to pay for treatment to a competitor at a higher price."

PROGRAM CRITERIA UNDER STUDY

Criteria to evaluate all types of occupational alcoholism programs are being developed by University Research Corp., Washington, D.C., under a $44,836 NIAAA contract awarded last September.

"Basically, we're trying to find out what has worked in establishing and maintaining programs," said Tim Mannello, URC Project Manager.

URC is assessing the function of the occupational consultant in the 18 NIAAA-funded demonstration projects and expects to complete the study next July.

The contract calls for site visits and pilot testing of criteria. Findings of the study and contact information will be published in the ALMACAN when it is released.

LAW CAREERS ARE SAVED BY CALIFORNIA PROGRAM

Lawyers in California have an alternative to disciplinary action or disbarment because of alcohol problems through a program for attorneys and judges established by the state bar two years ago.

The program is run by the bar's Committee on Alcohol Abuse and is made up of 13 judges and lawyers around the state backed up by 200 "panelists" who assist fellow attorneys with drinking problems. Program costs are low because of reliance on volunteer panelists and AA resources and the fact that participants are not relieved of responsibility for treatment and other costs.

ALMACA member Jack L. Sanow, consultant to the program, said 300 members of the bar have been helped by the program which has a success rate of about 65 percent.

"Lawyers are always giving advice to other people but resist taking it themselves. Their alibi structure is strong. They can offer a thousand excuses why they drink," said Sanow.

The program can serve as a model for other legal groups and professionals such as physicians and dentists.

Further information: Judge Leon Emerson, Downey Municipal Court, 8206 E. Third Street, Downey, Calif. 90241.

COALITION IS IMPORTANT FORUM FOR ALCOHOLISM PLANS AND ACTION

The National Coalition for Adequate Alcoholism Programs (NCAAP) is not just another alphabet organization, it is probably one of the most important groups working in support of the field of alcohol problems.

There are 23 members representing major organizations in the field and, when NCAAP speaks, it is heard. Its meetings, like that of January 30, are nuts-and-bolts sessions with only one goal: To advance the cause of alcohol treatment and prevention in the most effective way.

The book budget is small, thanks to contributions in time, people and money provided by member organizations of which ALMACA is one.

Chairman for the past two years has been Leo Perlis, head of the AFL-CIO Community Services Department, who suggested rotating the chairmanship "for the good of the organization." The recipient of an ALMACA 1977 Outstanding Service Award received an ovation from those around the seminar table, with groans in the background at the thought that the dynamic and effective chairman might step down.

Expanding activities of the organization led the Steering Committee to name a Finance Committee to develop a plan for fund raising to make the NCAAP independent and not so heavily dependent upon NCA from which it now gets most of its resource people and other suport.

Charles Frazier, of the Smithers Foundation, was named chairman of the Finance Committee delegated to come to the next meeting with a projected budget (possibly $50,000 a year) and suggestions as to how financing might be obtained.

ALMACANS can measure the range of interests of the NCAAP and its impact from these highlights of the January meeting:

—A.B. Logan, representing the American Bar Association, reported that the NCAAP resolution on alcoholism and the criminal justice system sent to all governors received widespread endorsement and expressions of support at the state level.

Perlis and a delegation of the NCAAP were

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scheduled to meet with top officials of the Justice Department on January31 to discuss how the Deparrtment and the criminal justice system might attack the many problems of crime and alcoholism.

Jim Baxter, Executive Director of ALMACA, suggested that Perlis remind the Justice Department that it is among those federal agencies that do not have a policy statement from the top regarding occupational alcoholism. Perlis said it would be brought up.

A judicial education conference of judges from around the country will be held in April on alcohol use issues. Logan will submit a paper on behalf of the NCAAP.

It was suggested that the Coalition might become more active and give support to local spokesmen if there were advance notice of legislative activity in the various states. Mike Ford, Director of Public Policy of NCA and Chairman of the NCAAP Legislative Committee, said he was writing to state alcoholism authorities to establish communications.

It is in the interest of ALMACANS to alert the NCAAP, through ALMACA headquarters, of legislative activity pending before it is too late to act or respond.

A grassroots network for advocacy was proposed and contact lists of key members of Congress were distributed. They will be published in a future issue of the ALMACAN.

–NIAAA budgets for fiscal year 1979 were discussed at length but there was no consensus on whether an effort should be made to secure full funding at authorized levels from the federal government or to seek lesser levels.

Baxter pointed out that alcoholism, compared to other ailments such as heart disease and cancer, had received funding far below need for many years. He said it is time for the alcohol field to press for the full amount of already authorized funds and to think in terms of what the field needs, rather than about budgets. It was then decided that Ford would develop a proposed alcoholism budget that he and the Legislative Committee, of which Baxter is a member, thought reasonable for guidance of individual member organizations who would act as they saw fit.

Ford noted that the Administration request was for a total of $174,307,000 but that the total level authorized by Congress would come to $233 million. Here is Ford's summary of past funding and the Administration request sent to Congress in January:

Program	FY1977	FY1978	FY1979
Research	$ 14.808.000	$ 16.199.000	$ 21.197.000
Training	7.200.000	7.200.000	7.402.000
Community Programs			
Project Grants and Conts.	73.008.000	78.706.000	78.706.000
Formula Grants to States	56.800.000	56.800.000	56.800.000
Program Support	9.538.000	9.731.000	10.202.000
TOTALS	$161.354.000	$168.636.000	$174.307.000

–The NIAAA five-year plan was discussed and it was decided that the Coalition itself would not submit a position paper, but that individual members would participate in the plan development process (See Plan story this issue).

It was decided by resolution that NIAAA would be asked to name minority representation – Indian, Asian, Black and Hispanic–to the plan steering committee. The point that no minority representation was included on the present panel was brought up by the National Indian Board on Alcoholism and Drug Abuse.

–Key issues of interest to the field were adopted by the NCAAP as follows:

1. Federal level of appropriations for alcohol-related problems.
2. Health insurance coverage.
3. Separate identify of alcoholism and alcohol-related problems.
4. Programs for underserved populations..
5. Need for public awareness of alcoholism and alcohol-related problems.
6. Primary prevention.
7. Research.
8. Manpower and training.

Baxter proposed that "Stigma" be identified as a separate issue and addition of the criminal justice system and alcohol problems was proposed by Logan. Both issues were added to the list.

Col. Ernest Miller, of the Salvation Army and Chairman of the Planning Committee, said that the Committee-developed issues were not intended to be all-inclusive but that they did emphasize the "common interest concerns" of those in the field.

FRATERNITY SETS UP "OCCUPATIONAL" PROGRAM

Although fraternity parties still raise pictures of heavy drinking as part of the scene, some are becoming concerned about alcohol problems on campus and are doing something about it.

One example is the alcohol awareness program of the international office of Lambda Chi Alpha to educate brothers at the chapter level. This fraternity with headquarters in Indianapolis has more than 10,000 undergraduate members in 200 chapters in the United States and Canada.

Goals of the program include early identification of brothers with drinking problems and the longer range objective of influencing group behavior in regard to alcohol.

It is hoped that the program will "eventually serve as a model for the entire fraternity world," says Hans G. Reichl, chairman of the fraternity's Alcohol Awareness Task Force and director of residential life at the University of Southern California.

The program is intended to complement alcohol education programs already in existence on many campuses. Several national fraternities have corresponded with Lambda Chi Alpha expressing interest in setting up programs or describing their own alcohol education activities.

For information: Hans G. Reichl, Office for Residential Life, University of Southern California, 202 Student Union, Los Angeles, Calif. 90007.

STUDY TO PROVIDE OA PROGRAM GUIDES

A study of alcoholism problems and employee assistance programs in the nation's railroads is expected to contribute some hard facts and guidelines for occupational alcoholism programs in general.

Project REAP (Railroad Employee Assistance Programs) is an industry-wide study designed to provide railroad management, labor and government with information on:

1. A workable method for estimating the prevalence and cost of alcohol abuse problems on railroads.
2. How well employee assistance programs are working to alleviate these problems.
3. Specific recommendation on how programs can be improved and replicated.

The study which began last year is being conducted by University Research Corp., a Washington-based research, education and training organization, under a $200,000 contract with two offices of the Federal Railroad Administration – the Rail Labor-Management Relations Division and the Office of Rail Safety Research. All are part of the Department of Transportation.

Timothy A. Mannello, project manager, said a major product of the project will be "how to" guidelines for establishing, maintaining and improving different models of occupational programs. They will describe essential and optional features and components of each kind.

When the study is completed in June, 1979, findings and recommendations will be submitted to its DOT sponsors and will be made available to others in the occupational alcoholism field.

Phase I of Project REAP provided a general description of current railroad employee assistance programs, a general review of the literature and a description of the types of programs in operation in other transportation industries.

Phase II, now under way, will be a more detailed study of selected railroad programs and will develop ways to determine the prevalence and to predict the cost of alcohol abuse to railroads.

Products of Phase II are of most interest to ALMACANS because they may provide useful data and tested methods for general use.

A glossary of terms is being compiled to pro-

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vide uniformity of language used to label such concepts as: problem drinker, performance impairment, critical incident and program success, among many others.

URC is to develop workable methods of estimating the extent and cost of alcohol abuse and to develop and validate a method of evaluating programs.

The project also contemplates conduct, prevalence, cost and evaluation studies of selected railroads and the preparation of sample programs that vary in cost and scope.

For information: Timothy Mannello, Project Manager, Project REAP, University Research Corp., 1601 North Kent Street, Arlington, Virginia 22209.

NCAAP POLICY STATEMENT:

ALCOHOLISM AND CRIMINAL JUSTICE

"The National Coalition for Adequate Alcoholism Programs recognizes that alcohol-related felonies, and misdemeanors have a great impact on the United States Criminal Justice System. Alcohol-related offenses constitute a significant burden on the police, courts, and corrections, are a contributing factor in the high level of crime in the United States, and are a contributing factor to a high rate of recidivism. Although it is known that alcohol-related offenses constitute a severe burden on the criminal justice system, the extent of the impact and the alternative methods of successfully reducing the impact are unclear.

The Coalition urges the federal government and all state governments to:

1) implement studies on the extent of the impact of alcohol-related offenses on this criminal justice system;
2) seek alternative methods of reducing the impact through the implementation of pilot studies or other appropriate mechanisms;
3) provide education and training for criminal justice personnel to enable them to identify more readily defendants whose offense is alcohol related;
4) implement or expand coordination between treatment facilities and the criminal justice system in order to direct those who would benefit from treatment.
5) implement or expand identification and treatment of alcoholics incarcerated in penal institutions;
6) to better utilize existing resources, for the purpose of facilitating efforts between Federal, state, and local criminal justice organizations.

The Coalition calls upon the federal government and all state governments to assign a high priority to the reduction of alcohol related offenses and the reduction of the impact of alcohol related offenses on the criminal justice system.

Adequate funds should be appropriated for studies and programs to lessen the number of alcohol related offenders and the impact on the criminal justice system.

The Coalition adopts this resoltuion as an expression of its concern for the great waste of human and economic resources and the human suffering that attaches to the high level of alcohol related offenses in our society."

NCAAP RESOLUTION:

UNIFORM ALCOHOLISM ACT RESOLUTION

Whereas the National Coalition for Adequate Alcoholism Programs was established to:

1) Support alcoholism programs as a separate entity through; a) program identity, authority and accountability, b) categorical funds, c) specialized leadership, and d) a separate constituency;
2) To build public support for effective development and implementation of national and local alcoholism and alcoholism-related programs; and

Whereas the NCAAP is joined in recognizing or accepting alcoholism as a disease by the American Bar Association, the American Medical Association, the American Hospital Association, the United States Jaycees, the American Psychiatric Association, the Department of Defense, Department of Transportatin, the Department of Health, Education and Welfare, including the National Institute on Alcohol Abuse and Alcoholism, and the World Health Organization; and

Whereas NCAAP realizes that in America many of those with alcoholism are still ridiculed and scorned and persons with alcoholism are still treated as criminals and punished and incarcerated instead of being treated and rehabilitated; and

Whereas alcoholism is ranked by the United States Public Health Service as one of the major health problems of the nation; and

Whereas the economic and social costs associated with the misuse of alcohol constitutes a major burden on American society; and

Whereas the misuse of alcohol contributes significantly to traffic fatalities, suicides, homicides and other crimes and anti-social behavior; and

Whereas there is a growing indication that the number of American youth who abuse alcohol may be increasing; and

Whereas early identification and treatment of alcoholism is severely constrained because the United States lacks a national consensus of what constitutes improper use of alcohol; and

Whereas only a limited number of states have adopted and fully implemented both the letter and intent of the Uniform Alcoholism and intoxication Treatment Act and allocated resources to provide adequate quality care for treatment of alcoholism as an illness following its decriminalization; and

Whereas treatment, prevention, training, and research programs and facilities are still too few in number to adequately cope with alcoholism and alcohol abuse on a nationwide basis; and

Whereas alcoholism and alcohol-related problems have only recently been given national recognition and priority by enactment in 1970 of the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act; now, therefore, be it

RESOLVED, that the NCAAP urges: that the remaining states adopt the "Uniform Alcoholism and Intoxication Treatment Act" – drafted by the National Conference of Commissioners of Uniform State Laws, mandating an identifiable alcoholism body within state government with legislated program authority and accountability, and providing the legal framework within which to approach intoxication and alcoholism from a specialized health viewpoint as recommended by the Federal Government, the couuts, professional organizations, commissions, and the undersigned members of the NCAAP, that all states implement the intent of the Uniform Act by allocating resources necessary to provide quality treatment for alcoholic people at the State and local levels and that adequate Federal funding be provided as an incentive to implementation of the Uniform Act.

Alcohol & Drug Problems Association
American Bar Association
American Federation of Labor-Congress of Industrial Organizations
American Medical Society on Alcoholism
Association of Halfway House Alcoholism Programs of North America
Association of Labor-Management Administrators & Consultants on Alcoholism
Christopher D. Smithers Foundation
Distilled Spirits Council of the U.S.
National Association of Alcoholism Counselors
National Committee Against Mental Illness
National Council of Community Mental Health Centers
National Council on Alcoholism
National Indian Board on Alcohol & Drug Abuse
National Nurses Society on Alcoholism
National Spanish Speaking Commission on Alcoholism
North American Indian Women's Council on Chemical Dependency
North Conway Institute
Rutgers University Center for Alcohol Studies
Salvation Army
United States Brewers Association
Volunteers of America
Wine Institute

KLERMAN EXPECTS ACTION IN ALCOHOL POLICY AREA

Gerald L. Klerman, newly appointed head of the Alcohol, Drug Abuse and Mental Health Administration, said recently that he expects increasing activity in the alcohol policy area in the next few months.

The head of NIAAA's parent agency, ADAMHA, said this reflects the fact that HEW Secretary Califano, Assistant Secretary for Health Richmond and Klerman have "identified alcoholism as a public health area where the need is way out of proportion to the availability of programs and resources."

Klerman also cited a need to get a credentialing system under way for alcoholism counselors in a year-end interview with **The Alcoholism Report** and others.

Klerman said there is no intention to change the leadership or weaken the autonomy of NIAAA in the agency that also includes the National Institute on Drug Abuse and the National Institute on Mental Health.

Future NIAAA initiatives, said Klerman, must be charted by spring in order to be included in the fiscal year 1980 budget cycle and the President's Commission on Mental Health might lend further impetus to alcoholism thrusts through its Liaison Task Panel on Alcohol-Related Problems, which reportedly will call for a sharper federal focus in the alcohol area.

At Klerman's swearing-in, Califano said he will direct attention to alcohol this year, after his current concentration on smoking.

ALOCOHOLIC PRIESTS HELPED BY PROGRAM

An "occupational" program for alcoholic priests that depends on the cooperation of other priests is working successfully in the Roman Catholic Archdiocese of Hartford, Conn., according to the Rev. Thomas J. Lynch, chancellor.

The policy of the Archbishop's office is to encourage priests to be alert to possible alcoholism problems in fellow priests and to refer them to members of a special panel of eight peers established by the Archdiocese. Members of the panel, who are volunteers, offer counseling and referral to treatment agencies if needed.

The Archbishop's written policy recognizes alcoholism as an illness "which demands our enlightened concern" and assures priests they will not lose their jobs because of alcoholism as long as he seeks help in overcoming the problem.

The program is tailored to meet the needs of individuals who work independently without rigid supervisory controls. Counseling is confidential and on a one-to-one basis.

Further information: Rev. Thomas J. Lynch, Chancellor, Archdiocese of Hartford, 134 Farmington Avenue, Hartford, Conn. 06105.

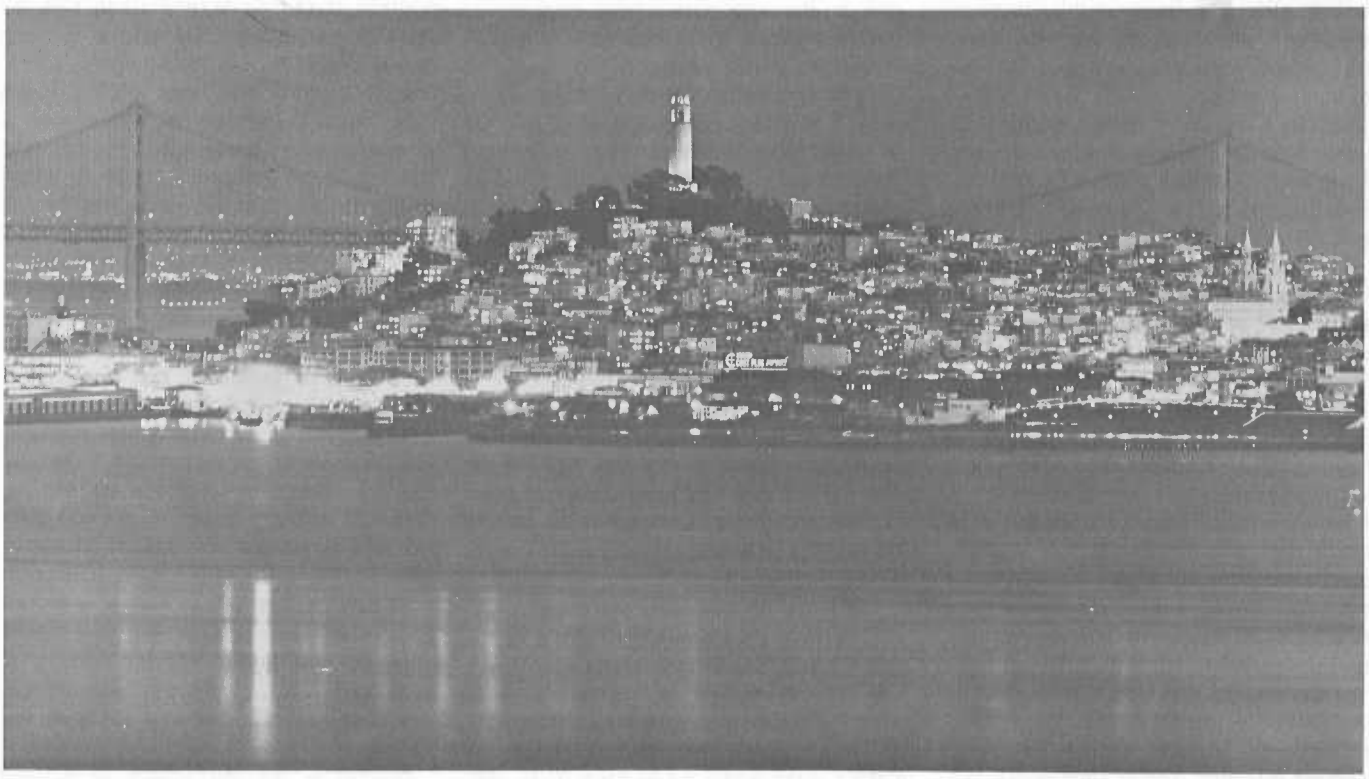
Start Making
Your Plans Now!

ALMACA '78

ALMACA's Seventh Annual Meeting

San Francisco Oct. 3-6

Sheraton Palace Hotel



(Pictures courtesy of: San Francisco Convention & Visitors Bureau)

ALMACA AND CREDENTIALLING

ALMACA supports uniform national credentialling of alcoholism counselors as an essential part of the orderly development of the field, but the organization does not propose or endorse any particular set of standards at this time.

"We believe the setting of standards should be done by the counselors themselves and that process is being carried forward through the work of the Finger Panel, NIAAA, the National Association of Alcoholism Counselors and others," said Jim Baxter, Executive Director.

He noted that the ALMACA Board at an October 26 meeting adopted the following resolution:

> "Alcoholism services utilized by a company or agency should be supplied by a counselor who has been credentialled according to the standards established in his/her individual state."

"The important point," said Baxter, "is that standards be uniform and credentials professionally recognized. This will let companies know they are on solid ground when establishing occupational programs and enable insurance companies to plan for alcoholism coverage with confidence that programs are professionally conducted," Baxter said.

"The credentialling process, and development of standards, are evolutionary but I believe progress is being made," he added.

MERITORIOUS SERVICE MEDAL AWARDED TO JERNBERG FOR NAVY PROGRAM WORK

For "extraordinary accomplishment" in his position with the Navy's highly successful occupational alcoholism program, the Meritorious Service Medal was awarded to Lt. Cmdr. Willard R. Jernberg.

Jernberg, a member of ALMACA, worked closely with ALMACA Executive Director Jim Baxter who pioneered the Navy program for alcoholics which has come to serve as a model for the other services.

The high honor, approved by the President, was conferred on Jernberg for his "superb performance" as Alcohol Rehabilitation Drydock Project Coordinator within the Navy Alcoholism Prevention Program from 1974 through 1976.

The citation signed by the Chief of Naval Operations noted that Jernberg's "ingenuity in designing individual installations to meet unique local requirements, his expert coordination and his untiring efforts requiring considerable travel and personal hardships resulted in 50 highly cost-effectvie rehabilitation programs that restore over 12,000 active Navy, Marine Corps and Coast Guard personnel to effective duty each year."

He was credited with being "instrumental in the successful promotion of the Alcohol Rehabilitation Drydock concept of local command outpatient alcohol rehabilitation programs" and completion of program installation months ahead of schedule.

HIGH BLOOD PRESSURE LINKED TO 3 DRINKS A DAY BY STUDY

Daily comsumption of three or more drinks raises the risk of high blood pressure, according to a study of 84,000 people conducted by the Kaiser-Permanente Medical Center and Medical Care Program.

The study, covering 1964-1968, found that men and women who reported taking three or more drinks a day had a higher prevalence of hypertension and both higher systolic and diastolic pressures than nondrinkers or those who drank two drinks or less per day. Hypertension was defined as systolic pressure of at least 160 and iastolic pressure of 95.

The association of blood pressure and drinking was found to be independent of age, sex, race, smoking, coffe use, former "heavy" drinking, education and weight.

Further information: **New England Journal of Medicine,** May 26, 1977.

27th YEAR FOR UNIVERSITY OF UTAH

The 27th session of the University of Utah School on Alcoholism and Other Drug Dependencies will be held June 18-23, 1978 in Salt Lake City, Utah.

The School has long been internationally recognized for its excellence in providing training for professionals and others concerned with treatment, rehabilitation, education, prevention and research in the alcohol and drug abuse field.

Sixteen specialized group sections will present information on casework, treatment, counseling, teaching methods, industrial problems and community and state programs.

Fees are: Registration and tuition $90; on campus board and room (double occupancy) $65 per person. Graduate or undergraduate credit (2 qtr. hours) is offered by proper registration and payment of a $10 examination fee.

For further information, write or call:
University of Utah School on Alcoholism and Other Drug Dependencies, P.O. Box 2604, Salt Lake City, Utah 84110, Phone: (801) 533-6532.

EXECUTIVE DIRECTORS' COLUMN

The following is a letter we recently received, along with our response, which raises an issue which we consider to be of prime importance to our membership.

LETTER:

Thank you for your letter of December 7, 1977, regarding the renewal of my membership in ALMACA.

I find, however, that I cannot in conscience continue to be affiliated with your association due to the association's total emphasis on tertiary treatment at the expense of early intervention and primary prevention.

To merely treat the disease, while ignoring the in-plant epidemiological factors which can lead to maladaptive behaviors (e.g. alcoholism) makes about as much sense as trying to eliminate polio by treating only the casualties. To be sure, an individual can be vaccinated against polio while no miracle "vaccination" against alcoholism exists, yet, primary prevention programs stressing education, communications, and self-awareness have been shown to decrease the frequency of industrial alcoholism.

To merely sit by and "wait" for individuals to become afflicted with alcoholism and then refer them "to a program" is very often a case of two little too late. A sincere and well-planned policy of prevention should commence at the moment the individual is hired.

REPLY:

Thank you for your letter of December 15, 1977 in which you expressed your reason for not renewing your ALMACA membership.

I not only respect but agree with your rationale concerning prevention. It is my opinion, however, that your judgement of ALMACA in this regard is a bit harsh. To say that ALMACA's total emphasis is on tertiary treatment ignores the facts. Obviously there has been to date a great deal of concern and effort in these early years in treating the casualties. We are to some extent still "running an ambulance service at the bottom of the cliff". I don't believe that any of us are quite ready for a triage-type operation which sacrifices those victims who have progressed beyond a certain point on the scale.

There are several things which are happening as direct outgrowths of occupational alcoholism programs which indicate construction. First, the point of identification and referral is being pushed steadily back as these programs gain in experience and in acceptance within the work force. Second, the rate of self-referrals is growing at a very encouraging rate indicating that people are increasingly ready to accept appropriate help at an ever earlier point in their disease. Third, there is considerable evidence that the mere presence of an occupational alcoholism program in an organization results in increased awareness of all aspects of the alcoholism problems with a measureable impact on at least a portion of that organizations drinking practices. And, fourth, the presence of these programs serve to heighten the awareness and sensitivity of the organization to the full range of problems to which you are referring, these that adversely impact on the work force and tend to increase its exposure, if not its susceptibility, to alcoholism.

We have not lost sight of such an important objective as prevention. But we also cannot ignore the need to deal with the problems at hand today. ALMACA expects to be in the forefront of any efforts to ameliorate and lessen this disease.

Whether or not you remain an ALMACA member I wish to thank you for your concern and for raising this very important issue.

INFO EXCHANGE

Information needed on any U.S. companies or organization with a predominantly female workforce which have employee assistance programs or occupational alcoholism programs. As much as possible of the following information is needed for each organization: name, address, phone number, type of organization, size of workforce, type of program (employee assistance or occupational alcohol), name of program director. Information will be used for a book on women and alcoholism to be published by McGraw-Hill in 1979, and all information is confidential.

Forward your information to ALMACA.

ALMACAN DATE BOOK

NATIONAL MEETINGS – 1978

Third Southeastern Occupational Program Training Institute will be held April 2-7, 1978 in the Staduim Hotel, Atlanta, Georgia. A special 15-hour introductory course on occupational program will be offered in addition to the regular presentations and workshops. For further information contact: Dick Groepper, Occupational Program, Dept. of Human Resources, 618 Ponce de Leon, Atlanta, Georgia 30308. Phone: (404) 894-4781.

Fifth National Drug Abuse Conference. Apr. 3-8, 1978, Seattle. Contact: Linda Howell Schodt, Conference Coordinator, National Drug Abuse Conference, 200 Broadway, Seattle, Wash. 98122.

International Artic Rim Conference on Alcohol Problems, April 16-20, 1978, University of Alaska, Fairbanks, Alaska.

For information contact: Judith Strohmaier, Dept. of Conferences and Institutes, 117 Eielson Building, University of Alaska, Fairbanks, AK 99701.

National Alcoholism Forum—April 28-May 3, 1978, St. Louis, Missouri. For further information, contact: Ms. Micki Dickerson, Forum Coordinator, National Council on Alcoholism, 733 Third Ave., New York, NY 10017.

University of Utah School on Alcoholism and Other Drug Dependencies. June 18-23, 1978, Salt Lake City, Utah. Contact: P.O. Box 2604, Salt Lake City, Utah 84110, (801) 533-6532.

Alcohol and Drug Problems Association, 29th Annual Meeting, September 24-28, 1978. Seattle, Washington. Contact: Mr. Lynn Buttorss, 1101 15th St. N.W., Washington, D.C. 20005.

INTERNATIONAL MEETINGS—1978

Fourth International Conference on Alcoholism and Drug Depenence. Apr. 9-14, 1978, Liverpool, United Kingdom. Contact: Miss M.C. Smith, B-15, The Temple, Dale St., Liverpool, L25-RU, England.

International Conference on Alcoholism and Drug Dependence.* May 22-26, 1978, Caracas, Venezuela.

Eighth International Institute on the Prevention and Treatment of Durg Dependence. June 4-9, 1978, Menton, France.*

Twenty-fourth International Institute on the Prevention and Treatment of Alcoholism. June 25-30, 1978, Zurich.*

Thirty-second International Congress on Alcoholism and Drug Dependence.* Sept 3-8, 1978, Warsaw, Poland.

13th Annual Conference of the Canadian Addictions Foundation, Sept. 24-29, 1978, Calgary, Alberta, Canada. Contact: Ms. Francoise Berthiaume, Executive Director, Canadian Addictions Foundation, 303 Kendall St., Vanier, Ontario KIL 575, (613) 741-6033.

Alberta Alcoholism and Drug Abuse Commission Summer School on Alcohol and Drugs, September 22-23, 1978, Fortress Mountain Lodge, Kananaskis, Alberta. Contact: Marg Bailey, 2nd Floor, Calgary, Alberta, (403) 269-6101.

*Information may be requested from the International Council on Alcohol and Addictions, Case Postale 140, 1001 Lausanne, Switzerland.

PUBLICATIONS INFORMATION

Drinking on the Job: The $15 Billion Hangover, by Jules Saltman. This pamphlet describes the scope of the occupational alcoholism problem, outlines programs and treatments for helping the alcoholic and discusses the roles of industry, unions and government. The Public Affairs Committee, 381 Park Avenue South, New York City, N.Y. 10016.

Alcoholism and Its Treatment in Industry, by Carl J. Schramm. A new book on the workplace difficulties and work-based programs. The John's Hopkins University Press, Baltimore, MD 21218.

Summary of Cost-Benefit Study Results for Navy Alcoholism Rebabilitation Programs, by R.B. Borthwick. Technical Report No. 346, Capt. S.M. Brownell, Bureau of Navy Personnel, Washington, D.C., 20370.

Alcohol Health and Research World, published by NIAAA, will contain an article on new frontiers on alcoholism counseling in its spring issue. Subscriptions for the quarterly publication may be ordered from Alcohol Health and Research World, Assistant Public Printer, Superintendent of Documents, Government Printing Office, Washington, D.C. 20402.

The Civil Service Commission has issued Federal Personnel Manual Letter 792-8 which covers the confidentiality of client records in Federal Employee Alcoholism and Drug Abuse Programs.

The Federal Employee Programs are required to adhere to the HEW regulations on the confidentiality of client records issued on July 1, 1975. Any alcoholism and drug abuse programs, treatment or otherwise, receiving federal funding are required to adhere to the regulations.

The FPM letter includes the actual regulations, a discussion of their implementation and sample consent forms.

A copy of the FPM letter is available from:

Don Phillips
Alcoholism and Drug Abuse Manager
Federal Civilian Alcoholism and Drug Abuse Program
USCSC
1900 E Street, NW, RM 3468
Washington, DC 20415
(202) 632-7672

ALMACANS ON THE MOVE

S. Edward Ferrell, Jr. has recently joined the Potomac Electric Power Company as Coordinator of their troubled Employee Program. Mr. Ferrell was with the St. Matthew's United Methodist Church as an Associate Pastor.

CHAPTERS ARE RICH IN IDEAS ENDORSE CLOSER COMMUNICATION

A good idea of the breadth of ideas and potential for service within ALMACA was presented at a session of chapter presidents and representatives at the October meeting in New York.

Most of ALMACA's 20 chapters were represented at the wide-ranging exchange of reports and ideas—covering the spectrum from successes to problems, criticisms to solutions.

The free-flowing exchange underscored President Shermans' statement to the group that "our chapters represent the heart of ALMACA." Chapter Coordinator Ray Kelly and Executive Director Jim Baxter stressed a need for continuing exchange of ideas and promised the support of the national organization in every way possible.

The ideas ranged from establishing a greater sense of identity as a national group to arranging for outside speakers and convenient sites for chapter meetings; from enlistment of new members and organizational structure to methods for bringing about a closer relationship with the business community.

One subject that came up repeatedly was of making sure there is purpose to each meeting, that they not become merely social get-togethers. "Theme" meetings and workshops were suggested, as were "moveable" sessions held at the locations of prospective businesses and industries that have a potential for occupational alcoholism programs.

The need to educate industry in particular and the community in general about the benefits and services of occupational programs was emphasized by several spokesmen.

The need for regular and frequent exchange of ideas and viewpoints expressed by Sherman in his luncheon address was endorsed by the group that found some common problems and answers in the meeting itself.

As reported previously, the ALMACAN will be used as a channel for communication under the leadership of Editorial Advisory Board Chairman Ed Small who will encourage chapter presidents and spokesmen to make use of a page to be set aside for that purpose.

One spokesman said his chapter had established a speaker's bureau and planned special presentations for various audiences, such as schools, church groups and civic and business organizations. Others said the idea was under active consideration as a means of "spreading the word."

Some chapters have geographical problems, being spread over a state or multi-county area, that makes it difficult to arrange convenient locations for meetings and maintaining contact. Some suggested that such chapters might consider splitting chapters once a sufficient number of members is enlisted.

An evaluation of referral agencies is being conducted by one chapter through a research committee, the goal being to make sure that those referred for help receive quality services.

In response to expressed concern over a stated purpose for ALMACA that clearly spells out its position on such issues as alcoholism, drugs and substance abuse, President Sherman said a draft position paper is to be prepared for Board consideration and that it will then be submitted to the chapters for discussion and review.

Several speakers said there should be an intensive effort to enlist labor organizations in support of ALMACA, to make certain that both industry and labor understand fully that their joint participation in occupational programming is essential and that ALMACA is an all-inclusive organization without bias.

"We want to get rid of the idea once and for all that we are taking sides or are in an adversary position—our goal is to promote occupational programming and to help people," Baxter said.

The importance of establishing liaison with legislative and other official bodies was mentioned by several spokesmen who said the contacts should range from the community to state through national levels.

It is expected that this sampler of ideas will be expanded and covered in detail in the coming months through the chapter and membership communications published in the ALMACA and other chapter communications.

THE STATE OF ILLINOIS CHAPTER OF ALMACA

POSITION PAPER

This paper presents the position of the State of Illinois Chapter of ALMACA regarding actions by the Board of Directors of ALMACA in response to pressure from an external source.

ALMACA by its very nature is a battleground of opposing viewpoints: labor and management; "alcohol only" and "broad brush"; men and women; different races, and so on. If any professional organization in the United States needs to be prepared to meet controversy, it is ALMACA.

The recent actions of the Board of Directors, in acceeding to the demands of an outside pressure group, are subject both to approval and to disapproval. On the positive side are respect for the rights of a substantial portion of ALMACA members, and recognition of a real possibility of adverse effects on ALMACA by a rigid stance which insists on ALMACA's right to meet in Illinois in 1978. On the negative side are the establishment of the precedent that external pressures can be expected to influence the activities of ALMACA, and that the actions taken were taken hastily, without reasoned thought and without expression of the will of the membership.

We cannot alter the past; it is futile to attempt to do in any way. But we can take steps to be certain that proper consideration of all issues is a part of any future response to outside pressures. In the spirit of making a positive advance from a negative experience, the State of Illinois Chapter of ALMACA suggests that, in any future case where external pressure is brought to bear:

1. The Board seek the assistance of both proponents and opponents of whatever action is sought by outside influence, equally and without preference;
2. The Presidents of the several Chapters of ALMACA by employed as an advisory panel to assist the Board in its deliberations;
3. The Board's decision take the form of a proposal to the voting membership of ALMACA, and that confirmation of the Board's decision require a simple majority of those voting on the proposal;
4. The Board prepare a statement now for approval by the voting membership that ALMACA is an organization whose primary aim is to help suffering alcoholics in the work place, and that our position is to have no position on outside issues; and, finally
5. The Board issue a statement on behalf of the membership that ALMACA is prepared to consider **requests** for actions in support of its members' concerns which are submitted to it by ALMACA members, but that it will not consider demands or threats submitted to it by any organization or person whatsoever or whomsoever.

This statement is submitted by us as representatives of the State of Illinois Chapter of ALMACA, reflecting the will of the Chapter expressed by voice of December 2, 1977.

Paul C. Hewett
President

Michael J. Stroden
Vice-President

Betty Reddy
Treasurer

CHAPTER ACTIVITY

KELLY URGES CHAPTERS TO USE INCENTIVE PLAN

Chapters now have an opportunity to increase their own treasuries while contributing to the national organization under ALMACA's Incentive Plan for fund raising.

Ray Kelly, Vice President and Chapter Coordinator, explained that under the Plan, chapters will receive 20 percent of any contributions or ALMACAN advertising revenue they secure.

"This is an opportunity to improve both local and national finances and I hope all chapters will take advantage of the Plan," said Kelly.

All contributions, he noted, are tax deductible for the donor and now that a portion of the money will be used locally, installations of major corporations will have a special incentive to support ALMACA through its chapters.

Some chapters have named contributions chairmen or have established a fund-raising committee to concentrate on bringing in financial support, Kelly said.

And, advertising in the ALMACAN could be sharply increased by pointing out to service providers and others that the nationwide audience of experts in the field is a prime target for their messages.

The Incentive Plan is possible because, on advice of counsel, ALMACA has applied for "group exempt status" under the tax code which makes rebates available to chapters. The national organization also retains its general tax exemption as a non-profit organization.

The group exempt status is expected to be approved shortly by IRS and, pending that action, the 20 percent portion of any funds raised by chapters will be held in escrow for later distribution to them. The Incentive Plan applies only to contributions and advertising revenue, not to membership fees or dues.

For information, contact ALMACA headquarters at 703-620-2577 or Ray Kelly at 312-634-3545.

SAN FRANCISCO CHAPTER

At the January monthly meeting of the S.F. Chapter, Carolyn Dobson, Asst. Director for the Bureau of Alcoholism for S.F., and Tom Mesa, Coordinator of the A.I.D. Unit Personnel Program for Fresno Community Hospital spoke on "What Is An M.S.W. and How Do They Relate To An Industrial Setting." They discussed how out of date and innaccurate the old stereotype of the "do-gooder" is in describing the M.S.W. and how the M.S.W., who is trained in diagnosis, community resource knowledge, organization, administration and clinical skills can be of tremendous value in an industrial setting. There is a definite skills can be of tremendous value in an industrial setting. There is a in industrial settings and in fact, at present, NASW has a National Task Force on Industrial Socail Work which, as one of its tasks, is designing curricula for schools of Social Work on Industrial Social Work.

The S.F. Chapter is also hard at work at preparations for this year's annual meeting to be held in S.F. in Oct. Tom Evans (Coordinator for Pacific Gas and Electric's Employee Assistance Program) is Chairman of the Program Committee and has issued the "call for papers" for the annual meeting.

CHAPTER VISITS

Planning for the 1978 Annual Meeting was a major item on Executive Director Jim Baxter's agenda at a meeting with San Francisco area and Sacramento chapters in the Golden Gate city early in February.

continued next column

And, while on the California swing, he also scheduled meetings with the Los Angeles, San Diego and Denver chapters.

The visits are part of a planned schedule by Baxter and President Paul Sherman to get together with all chapters during the year, sounding out opinions and gathering the latest information on chapter activities.

In January, Baxter visited the Indiana chapter at Indianapolis and took part in a seminar at Fort Benjamin Harrison, along with ALMACA members. The seminar, sponsored by the Human Resource Develoment Staff at Fort Harrison, focused on management and organizational issues, supervisory training and areas of research needed in the occupational field.

The big snow of the month forced cancellation of a Kentucky chapter meeting scheduled in Lousiville.

INDIANA CHAPTER

ALMACA Seminar Tops 100

The Indiana Chapter of the Association of Labor-Management Administrators and Consultants on Alcoholism (ALMACA) held their first seminar on occupational programming for troubled employees at the Holiday Inn I-70 on November 17.

"The seminar was designed to give business and labor an opportunity to talk with experts, such as Lewis Presnall, who developed the National Council on Alcoholism, Kemper Insurance and Kennecot Copper labor-management programs", commented Dan Wiseman, president of the chapter.

The conference was attended by over 100 people representing 90 different industries, unions and treatment agencies.

Other speakers included Dr. Russell Smith, medical director of Guest House and Brighton Hospital in Michigan; Thomas Pasco, Michigan Department of Mental Health specialist, and Edward Czapor, general manager of Delco-Remy in Anderson.

Lew Presnall, seated; Bob Nauth and Dan Wiseman.

LOCAL CHAPTER MEETINGS

If you're in the area, you are invited.

Atlanta Chapter: Meets second Wednesday of each month
Contact: Fred Nolting, (404) 424-3588 or John Pelligrino, (404) 875-2711

Connecticut Chapter: Meets third Thursday of each month.
Contact: George Tinyk (203) 446-6506 or 446-6253

Denver Chapter: Meets second Thursday of each month, 11:00 a.m.
Contact: Vince Taliercio, (303) 624-4029

Detroit Chapter: Meets second Wednesday of each month
Contact: Bill Byers (313) 941-2000

Hawaii Chapter: Meets the last Friday of each month
Contact: Ron Takatsuka, (808) 244-5508 or Betty Howatt, (808) 524-1144

Illinois Chapter: Meets last Friday of alternating months,
(next meeting March 1978) 9:00-12:00 a.m.
Contact: Paul Hewett (312) 649-8716

Indiana Chapter: Meets third Wednesday of each month.
Contact: Dan Wiseman (317) 542-3784

Kentucky Chapter: Meets second Tuesday of each month.
Contact: Russ Stuart (502) 245-9726

Los Angeles Chapter: Meets fourth Wednesday of every month
Contact: Martha Walton (213) 697-6201 or Joan McCrea (714) 633-9582

Massachusetts Chapter: Meeting day has not been determined.
For information contact: Bill Howard, (617) 727-1960

Metrolina Chapter: Meets fourth Wednesday of each month—12:00 noon.
Contact: Bill Cook (704) 376-7447

New Jersey Chapter: Meets the second Thursday of every other month (next meeting—March 9).
Contact: Bill Reilly (201) 622-7271 or Barbara Symans (201) 277-0143.

New York Chapter: Meets second Tuesday of every other month (next meeting February 1978), 2:00-4:00 p.m.
Contact: Ed Small (212) 556-7187

Northern Ohio Chapter: Meets second Thursday of each month
Contact: Lyn Novak (216) 255-5611, Ext. 806

Sacramento Area Chapter: Meets third Tuesday of each month
Contact: Gordon Stirling, (916) 440-3571

San Diego Chapter: Meets the second Tuesday of each month.
Contact: Dan Smith, (717) 277-8900 × 2224

San Francisco Chapter: Meets second Tuesday of each month
Contact: Carl E. Zehm, (408) 742-4357

Washington, D.C. Chapter: Meets third Tuesday of every other month (next meeting March 14, 1978)
Contact: Tarpley Richards (301) 589-0255 or Bill Coffin (202) 433-2034

Western Pennsylvania: Meets third Tuesday of every month except August and December.
Contact: Newt Godfrey, (814) 866-2954

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