YEAR 25 ANNUAL REPORT
THE IOWA CONSORTIUM FOR SUBSTANCE ABUSE RESEARCH AND EVALUATION
Since 1991, the Iowa Consortium for Substance Abuse Research and Evaluation has grown and matured. It began as a combined effort of several departments in state government, the state’s three regent institutions, and community treatment centers.

The Consortium office was a single office in the basement of an old building on the University of Iowa campus. With these scanty beginnings and 25 years later, many things have changed, some have not, and we have all grown a little wiser.

What has changed?

How we think about treatment and prevention of substance use disorder (SUD) continues to evolve. Treatment centers used to be specialized little silos hidden away treating addicts and alcoholics. This reflected the stigmatized group that it served. Now we are seeing “behavioral health centers.” The focus of many centers is moving to broader issues including mental health, problem gambling, transitional housing, and many more types of service.

SUD treatment is slowly moving into mainstream health care and health care is regularly moving towards the screening and prevention of unhealthy substance use. This integration is long overdue. Ideally, another consequence of integration is our acceptance that SUD is a health condition rather than a stain on the moral fiber of America, one that needs more solutions involving punishment and marginalization, “shunning.”

Researchers, science, and medicine also reflect these changes. Our language has changed and notably, we are moving away from words such as “addiction” or “abuse” research. These words are too value laden, vague, and more often than not, misused. We have known that for a long time and William White’s papers on the subject are compelling. With DSM-V, people can have a substance use disorder, just as they can suffer from depression or cancer. The National Institutes on Drug Abuse (still using the abuse word) has moved its focus to a brain disease model and a heightened interest in genomes and molecular biology. The National Institute on Alcohol Abuse and Alcoholism (again still using the abuse word), while also interested in molecular biology is focusing its interests in SUD treatment, as well as unhealthy use and disparities. The disease model has been around for a while, but now we are seeing it make an actual difference organizationally. We have quite a bit of work yet to do. SAMSHA’s and Iowa’s SBIRT program (Screening, Brief Intervention, and Referral to Treatment) is a good start since it integrates treatment/prevention into health care. We need better procedures for steering people away from a path that leads to a SUD. We have learned a few things along the way, I hope. We know what does not work, e.g., “Just say No” messages, the War on Drugs. We also have hints of things that do work, e.g., motivational interviewing, brief interventions, providing assistance with housing and employment. Instead of doing the same thing expecting different results, I think we are at a point where we are moving forward.

Stephan Arndt
Director

The Consortium is committed to strengthening substance abuse prevention and intervention activities through collaborative research.

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MISSION

Substance use disorders including alcoholism have serious medical consequences. The effects can have severe negative financial, legal, and psychological repercussions on the person, their family, co-workers, and friends.

The Iowa Consortium for Substance Abuse Research and Evaluation (The Consortium) is an alliance committed to strengthening substance use prevention and intervention activities through collaborative research.

The Consortium coordinates research and knowledge transfer among researchers, assists professionals in the field, and informs public policy makers in the area of substance abuse.

The Consortium’s Advisory Board includes representatives from the University of Iowa, the University of Northern Iowa, the Iowa State University, The Iowa Department of Public Health, the Iowa Department of Corrections, the Iowa Office of Drug Control Policy, and from local substance abuse service agencies.

The Consortium facilitates collaborative research and the transfer of knowledge among researchers, helping professionals, and public policymakers in the field.

CONSORTIUM SERVICES FOR SCHOOLS, COALITIONS, LOCAL AND STATE AGENCIES

EVIDENCE BASED PROGRAMS:
The Consortium can assist you in selecting or evaluating evidence based prevention or treatment programs for your situation and address the goals of your project. We can also assist you in formulating goals and identifying measurable constructs. We have 25 years of experience with many evidence based treatment protocols in a variety of settings including schools, jails, community treatment centers and community based environmental strategies.

GRANT WRITING ASSISTANCE:
The Consortium can assist you in writing grants. We regularly survey requests for proposals and can help guide you to agencies that fund programs. Once we have found a match, we can assist you as you seek outside funding. This includes writing a program evaluation section of the grant, assistance with developing the logic model for the grant, and the evaluation. Additionally, we can help you develop testable research hypotheses or measureable goals for your project.

PROGRAM EVALUATIONS:
The Consortium has over 25 years of experience in evaluating substances abuse prevention and treatment programs. We have evaluated single and multi-site programs for treatment agencies, schools, cities, counties, the State of Iowa, as well as for national agencies such as the U.S. Department of Justice, Substance Abuse Mental Health Services Administration (SAMHSA), and the U.S. Department of Education. Our evaluations often involve outcome evaluations with long-term client in person or telephone follow-up interviews. Our client follow-up rates are over 80% and as high as 95% for some projects. We also perform process and ecological evaluations.

EPIDEMIOLOGICAL SURVEY:
Agencies frequently need to find the extent and patterns of substance abuse problems in their community. This allows agencies to target precious resources to tackle the biggest problems or to try to prevent arising issues from becoming larger problems. A full scan of substance related issues in terms of measurable indices is called an epidemiological scan. The Consortium can access local, state, and, regional data to provide a survey of problems, their levels, and severity. This information can also serve as baseline data for interventions. Repeated at regular intervals, the information can be used for evaluating global outcomes, for instance of a community strategy.

The Consortium also tries to make its products available to the general public whenever possible.
CONSORTIUM FACULTY

Donald W. Black, MD
University of Iowa
Director, Psychiatry Residency Training Program
Vice Chair for Education, Department of Psychiatry
Professor of Psychiatry
Dr. Black is a clinical and translational researcher with more than 300 publications. His work has focused on the course and treatment of severe personality disorders. This has included researching the effectiveness of the STEPPS program for borderline personality disorder. He also conducts family and follow up studies of behavioral addictions including gambling disorder.

Tracy D. Gunter, MD
Indiana University—Purdue University Indianapolis
Associate Professor Clinical Psychiatry, Division of Forensic Psychiatry, Department of Psychiatry, Indiana University School of Medicine
Adjunct Professor, IU Robert H. McKinney School of Law
Dr. Gunter is Associate Professor of Clinical Psychiatry in Indiana University’s Department of Psychiatry, and Adjunct Professor at the Indiana University McKinney School of Law where she teaches Neuroscience and Law. She is board certified in general and forensic psychiatry. She has been the Director of Forensic Psychiatry at the University of Iowa’s Carver College of Medicine in 2003 and was a frequent national and international speaker in mental health and law. Her interest in problem solving courts resulted in interdisciplinary collaborations with professors of social work, criminal justice, and law working on a grant examining mental health courts in Missouri.

Susan K. Schultz, MD
University of Iowa
Director, UI Aging Mind and Brain Initiative and UI Center of Aging
Professor of Psychiatry and Internal Medicine, Carver College of Medicine
Dr. Schultz is a Professor of Psychiatry at the University of Carver College of Medicine, where she also serves as Vice Chair for Clinical Translation and Faculty Development. She has certification in Psychosomatic (Consultation Liaison) Medicine and Geriatric Psychiatry. Dr. Schultz is director of the UI Aging Mind and Brain Initiative, which is a Provost supported initiative to recruit more faculty across the University of Iowa who will conduct aging research. She is also the director of the Iowa Geriatric Education Center which has recently been renewed to a HRSA funded Geriatric Workforce Enhancement Program. In these directorship positions she is expressly devoted to the training of new faculty and students in the area of geriatric care. For the past 20 years she has provided mentorship in the area of geriatric psychiatry across a number of comorbid disorders. She has certification in Psychosomatics and is particularly interested in comorbidities such as vascular disease, cancer and substance use in terms of their effects on dementia risk and late life outcomes.

Lisa Segre, PhD
University of Iowa
Associate Professor, College of Nursing
Dr. Segre’s research interests include: maternal health, mental health, perinatal depression and anxiety, epidemiology, screening and treatment. Population focus: underserved women (e.g., low-income, ethnic—minority women and depressed mothers of NICU infants). Research methods: open and randomized controlled trials, implementation and dissemination.

Miesha Marzell, MSW, PhD
University of Iowa
Assistant Professor, College of Public Health
Dr. Marzell’s broad research interests include the etiology and prevention of alcohol and drug misuse among at-risk populations. Dr. Marzell’s specific interests include the study of environmental and policy factors that influence these behaviors and the relationship between sports participation and substance misuse to inform prevention efforts.
WHO AND WHERE WE SERVE

The Iowa Consortium for Substance Abuse Research and Evaluation extends its reach to all 99 counties in the State of Iowa as well as into several local states. The Consortium collaborates research efforts with educational, public, private, and governmental agencies.

The program office for the Consortium is located at the University of Iowa’s Oakdale Research Park.

The following are projects the Consortium will participate in during Fiscal year 2016 - 2018.

**TREATMENT PROJECTS:**
- Culturally Competent Treatment Program Families in Focus
- JC Drug Treatment Court
- Mental Health Expansion Drug Court Outcomes Monitoring System (OMS)
- Prairie Ridge Independent Evaluation
- Pregnant and Postpartum Women
- SBIRT: Screening, Brief Intervention, and Referral to Treatment Program
- State Youth Treatment Initiative

**SPECIAL PROJECTS:**
- Iowa Youth Survey (all 99 counties)
- iSHARE Project
- SBIRT-TIPS

**PREVENTION AND DIVERSION PROJECTS:**
- Comprehensive Prevention Project
- Prevention Through Mentoring
- Youth Development

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The Iowa Consortium for Substance Abuse Research and Evaluation

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<td>Culturally Competent Treatment</td>
<td>Iowa Dept. of Public Health, Area Substance Abuse Council (Cedar Rapids) Jackson Recovery Centers (Sioux City) and Seasons Center (Spirit Lake)</td>
<td>The aim of this project is to address barriers to treatment for members of minority groups and to implement culturally competent treatment services. We are evaluating the success rates for minority individuals who receive culturally competent treatment services.</td>
</tr>
<tr>
<td>Families in Focus</td>
<td>Iowa Dept. of Public Health, Youth and Shelter Services (Ames), and Prairie Ridge Addiction Treatment Services (Mason City)</td>
<td>Families in Focus is implemented at four agencies in Iowa using the evidence-based Multi-Dimensional Family Treatment (MDFT) program. Families in Focus also implemented the Comprehensive Adolescent Severity Inventory (CASI), a standard method for screening all potential adolescents for substance abuse, dependence and mental health needs. The Consortium monitors activities, conduct outcomes and process evaluation for the duration of the project.</td>
</tr>
<tr>
<td>Johnson County Drug Treatment Court</td>
<td>Johnson County Drug Court and Goodwill of the Heartland, SAMHSA and Bureau of Justice</td>
<td>This project enhances employment services currently provided to clients in the Drug Treatment Court. Johnson County contracted with Goodwill of the Heartland to provide employment services for the clients. We conduct the evaluation component of the project.</td>
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<tr>
<td>Mental Health Expansion</td>
<td>Sixth Judicial District Corrections, Area Substance Abuse Council (Cedar Rapids) and MECCA Services (Iowa City)</td>
<td>This project enhances mental health services currently provided to clients in the Drug Treatment Court. We will conduct the evaluation component of the project.</td>
</tr>
<tr>
<td>Outcomes Monitoring System (OMS)</td>
<td>Iowa Dept. of Public Health</td>
<td>OMS gathers data on substance abuse treatment outcomes in Iowa. Randomly selected clients from 22 substance abuse treatment agencies funded by IDPH are contacted for follow-up interviews by the Consortium. Interviews occur 6 months after client’s discharge from treatment.</td>
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<tr>
<td>Prairie Ridge Independent Evaluation</td>
<td>Prairie Ridge Integrated Behavioral Healthcare (Mason City)</td>
<td>Randomly selected clients from Prairie Ridge are contacted for follow-up interviews by the Consortium. The interviews occur 6 months after client’s discharge from treatment. Client satisfaction surveys are conducted with all patients at intake.</td>
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<tr>
<td>Pregnant and Postpartum Women</td>
<td>Iowa Dept. of Public Health</td>
<td>The Iowa Department of Public Health proposes to expand and enhance the state’s continuum of care for pregnant and postpartum women in residential treatment with substance use disorders. The Iowa Pregnant and Postpartum Women’s Residential Treatment Program (Iowa PPW) will be implemented at three established residential treatment programs in major cities in the state of Iowa: Area Substance Abuse Council (Cedar Rapids), House of Mercy (Des Moines) and Jackson Recovery (Sioux City). Iowa’s proposal builds on the successes of our current Women and Children’s Programs which offer comprehensive, clinical treatment and recovery services to support each participant’s self-determined personal recovery plan.</td>
</tr>
<tr>
<td>SBIRT: Screening, Brief Intervention, and Referral to Treatment Program</td>
<td>Iowa Dept. of Public Health: House of Mercy, United Community Services, Primary Health Care, MECCA (Des Moines); Center for Alcohol &amp; Drug Services, Community Health Care (Davenport); Pathways Behavioral Services, Peoples Health Center (Waterloo), Jackson Recovery Centers, Siouxland Community Health Center (Sioux City)</td>
<td>SBIRT IOWA is a comprehensive integrated public health approach to the delivery of early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders. Substance abuse agencies are co-located at Federally Qualified Health Centers (FQHC’s) in Blackhawk, Polk, Scott and Woodbury counties as well as Camp Dodge, home of the Iowa National Guard. The Consortium is contracted to conduct outcomes and process evaluations for the project.</td>
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### State Youth Treatment-Initiative (SYT-I)

**Partners:**
- Iowa Dept. of Public Health, Youth and Shelter Services (Ames), and Prairie Ridge Addiction Treatment Services (Mason City), Prelude (Iowa City) and Heartland Family Services (Council Bluffs)

**Project Overview:**
SYT-I is a project starting with four treatment providers that will implement the evidence-based Multi-Dimensional Family Treatment (MDFT) program, Motivational Enhancement Treatment/Cognitive Behavior Therapy (MET/CBT) and/or Motivational Interviewing (MI) with adolescents and transitionally aged youth (18-25). SYT-I will also implement the Comprehensive Adolescent Severity Inventory (CASI), a standard method for screening all potential adolescents for substance abuse, dependence and mental health needs. We will monitor activities, conduct outcomes and process evaluation for the duration of the project.

### SPECIAL PROJECTS

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<td>Iowa Youth Survey</td>
<td>Iowa Dept. of Public Health</td>
<td>Analyze data provided by IDPH from 6th, 8th, and 11th grade biennial Iowa Youth Survey. Students from public and nonpublic schools throughout the state completed the survey which asks questions on substance use, bullying, suicide, social connectedness and many other issues youth face today.</td>
</tr>
<tr>
<td>Interprofessional Strategic Healthcare Alliance for Rural Education (iSHARE)</td>
<td>University of Iowa College of Medicine &amp; Iowa Geriatric Education Center</td>
<td>The focus of iSHARE is to integrate geriatric education into primary care practice, community-based service delivery and family caregiving. The Consortium will collect and analyze data for this project.</td>
</tr>
<tr>
<td>SBIRT-TIPS</td>
<td>College of Nursing, University of Iowa</td>
<td>The focus of the SBIRT-TIPS is to promote adoption of SBIRT practice throughout Iowa by training primary care nurse practitioner and physician assistant students and their clinical preceptors to screen patients of all ages for substance use, provide brief interventions at point of care, and make referrals for specialized treatment when needed. The Consortium will analyze the data collected as part of this project.</td>
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### PREVENTION & DIVERSION FOCUSED PROJECTS

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<td>Comprehensive Prevention Project</td>
<td>Iowa Dept. of Public Health</td>
<td>The Comprehensive Substance Abuse Prevention Project provides primary alcohol, tobacco, and other drug (ATOD) prevention services to all counties in Iowa. We develop survey instruments, train site staff on survey administration, monitor data entry, and enter data, as well as analyze and report on project outcomes.</td>
</tr>
<tr>
<td>Prevention Through Mentoring</td>
<td>Iowa Dept. of Public Health</td>
<td>Seven substance abuse organizations participate in this project: Big Brothers Big Sisters of Siouxland; Clinton Community School District; Community Youth Concepts; Helping Services of Northeast Iowa; Johnson County Extension dba Big Brothers Big Sisters of Johnson County; Mason City Youth Task Force and Youth and Shelter Services Inc., Story County. The Consortium provides analysis of pre- and post-tests for evaluation and outcomes.</td>
</tr>
<tr>
<td>Youth Development</td>
<td>Iowa Dept. of Public Health</td>
<td>Eight substance abuse prevention organizations participate in this project: Area Substance Abuse Council; Center for Alcohol and Drug Services, Inc.; Garner-Hayfield-Ventura Community School District; Henry County Agricultural Extension District; Mason City Youth Task Force; Substance Abuse Treatment Unit of Central Iowa; and United Action for Youth. The Consortium provides analysis of pre-and post-tests for evaluation and client outcomes with youth prevention programs.</td>
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Mary Losch, University of Northern Iowa
Katina McKibbins, Iowa Department of Corrections
Mike Polich, Iowa Behavioral Health Association (Co-Chair)
Lettie Prell, Iowa Department of Corrections
Dick Spoth, Iowa State University
Kathy Stone, Iowa Department of Public Health
Dale Woolery, Office of Drug Control Policy
Janet Zwick, Member at Large

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Kseniya Garcia Bueno, Research Assistant
Anna Guittar, Research Assistant
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DeVauna Jones, Senior Program Evaluator
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Aims and Scope
Substance Abuse Treatment, Prevention and Policy Journal (SATPP) is an open access, peer-reviewed online journal that encompasses all aspects of research concerning substance use disorders with a focus on policy issues.

The journal aims to provide an environment for the exchange of ideas, new research, consensus papers, and critical reviews, to bridge the established fields that share a mutual goal of reducing substance abuse. These fields include: legislation pertaining to substance abuse; correctional supervision of substance abusers; medical treatment and screening; mental health services; research; and evaluation of substance abuse programs.

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Access at: http://www.substanceabusepolicy.com

HELPFUL LINKS
Consortium Website: http://iconsortium.subst-abuse.uiowa.edu
Face & Voices of Recovery: http://facesandvoicesofrecovery.org
Governor’s Office of Drug Control Policy: http://iowa.gov/odcp/
Iowa EPI Website: http://iowaeplsubst-abuse.uiowa.edu
Iowa Youth Survey: http://iowayouthsurvey.iowa.gov