

# ALCOHOLISM DRUG ABUSE WEEKLY

News for policy and program decision-makers

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### Just a reminder to our readers...

There will be no December 29 issue of *ADAW*. Your next issue will be January 6, 2015. We wish all of our subscribers happy holidays.

  
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## Monitoring the Future survey: Marijuana use level, e-cigarettes a concern

This year's Monitoring the Future (MTF) survey of teens was full of surprises — mostly good surprises. First of all, even though the perception of risk of frequent marijuana use went down, use did not go up.

"We haven't seen increases, which we were afraid of," said Nora Volkow, M.D., director of the National Institute on Drug Abuse (NIDA), in announcing the MTF results December 16. As perception of risk of use of a drug goes down, use itself goes up, she noted. However, marijuana is still a concern, she said. "Despite this good news, there were no decreases in use of marijuana, which continues to remain at very high levels." Among 12th graders,

### Bottom Line...

*It's mostly good news on the high school drug front this year; however, marijuana use is still at high levels, and e-cigarettes are taking hold.*

past-year use was 35 percent, and daily use was 5.8 percent.

Past-year use was higher — 40 percent for 12th graders — in states with recreational or medical marijuana, compared to 26 percent in states without recreational or medical marijuana.

This year's MTF was the 40th; the survey is sponsored by NIDA and conducted by Lloyd D. Johnston, [See MTF page 2](#)

## The Business of Treatment

### Holiday wish: Groups see results in end-of-year giving campaigns



As much as they realize that their targeted donors are getting bombarded with requests in the last weeks of the calendar year, many nonprofit addiction treatment facility and organization leaders consider the end-of-year appeal an effective and necessary strategy for them. The allure of repeat or new contributors looking to beef up this year's income tax deduction remains too overwhelming to ignore.

As a result, this becomes a time of year when the typical addiction treatment worker or supporter sees the volume of e-mailed appeals soar at the same time that general business e-mail activity slows. Yet there

### Bottom Line...

*Addiction treatment organizations find enough value in end-of-year fundraising campaigns that many never pass up the opportunity, although leaders say results can be difficult to project.*

appears to be no rulebook on how best to create an effective end-of-year message, and several leaders interviewed by *ADAW* said they don't establish strict goals for these campaigns because it is virtually impossible to predict who will write a generous check in the final days of

[See FUNDRAISING page 7](#)

**MTF from page 1**

Ph.D., of the Institute for Social Research at the University of Michigan. The survey looks at 8th-, 10th-, and 12th-grade drug and alcohol use.

Significant trends over the past five years include a notable decrease in the abuse of opioid analgesics by teens. “We had a lot of concerns because of the risk of overdose, and because these are highly addictive drugs,” said Volkow.

Vicodin and Oxycontin, the two most popular opioid analgesics, have reduced abuse in teens since 2009, from 9.7 percent to 4.8 percent and from 5 percent to 3.3 percent, respectively. “These are indicators that prevention campaigns have worked,” said Volkow.

**Heroin**

There has not been a corresponding increase in heroin use. “We were afraid there would be an increase in heroin, because we have seen that in young adults,” said Volkow. “Rates remain very low — 0.6 percent — and stable.”

The fact that heroin use did not go up does not mean the trend toward increasing heroin use is reversing, said Volkow. “This reflects a different age and demographics for heroin,” she said. Heroin use is more likely to start in the 20s, not in high school, she said. “Among other fac-

tors, there are the protective environmental constraints in that adolescents may not be exposed to heroin as much as adults,” she said.

**E-cigarettes**

On the downside, this was the first year that MTF surveyed for use of e-cigarettes. “It’s a new technology, and there are very high rates of use,” said Volkow, noting the addictive potential of nicotine.

Volkow is particularly concerned about teens using e-cigarettes only because they are available, who otherwise would never have developed an addiction to nicotine. “We are also anticipating that these may influence other drug use,” she said, noting that although e-cigarettes were originally meant for nicotine use, they are now being used to administer other drugs, including tetrahydrocannabinol. “Research has shown that exposure to nicotine enhances the rewarding effects of other drugs, so it’s a concern that there is this new route of administration for nicotine.”

And Volkow discounted a suggestion made by one reporter at the press teleconference that e-cigarettes could reduce tobacco use. She cited research by the American Academy of Pediatrics that young people at risk for using tobacco were also at risk for using e-ciga-

rettes, and vice versa.

Past-month e-cigarette use by eighth graders is 8.7 percent, by 10th graders is 16.2 percent and by 12th graders is 17.1 percent. “We’re going to have teenagers who remain addicted to nicotine, which is highly addictive,” she said. In addition, the lack of a standard indicates there could be many toxic effects that are unknown. “These are new devices, and we don’t have sufficient information about them,” she said.

But the researchers agreed that too many teens are using e-cigarettes. “It would be a tragedy if this product undid some of the great progress made to date in reducing cigarette smoking by teens,” said Johnston.

**Other trends**

Use of synthetic cannabinoids is also reduced, from 11 percent three years ago to 5.8 percent. These extremely toxic drugs go by names such as “Spice”; use can be fatal.

Cigarette smoking has gone down, from 8.5 percent to 7.7 percent, but seems to be being replaced by e-cigarettes. “The fly in the ointment is e-cigarettes,” said Johnston of the otherwise mostly positive results.

Johnston was pleased with the declines in both alcohol and tobacco use, saying that these are at “historic lows.” However, use of both is still

**ALCOHOLISM DRUG ABUSE WEEKLY**  
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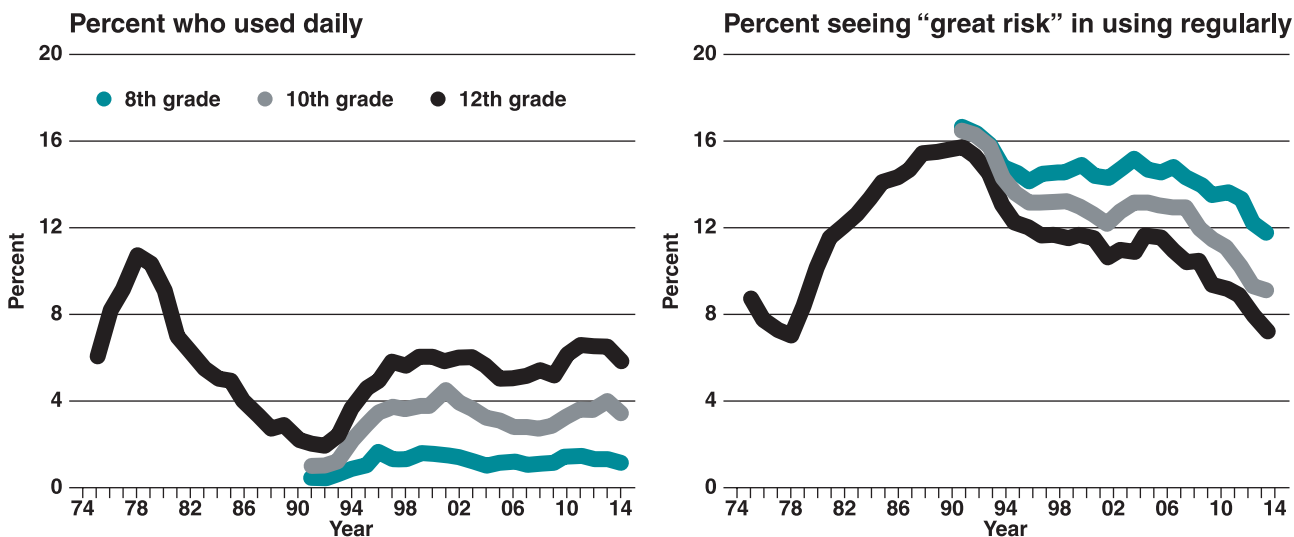
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### Marijuana: Trends in daily use and risk — Grades 8, 10 and 12



Source: The Monitoring the Future study, the University of Michigan

substantial, he said. "A lot of kids are using both and will pay a price for it, and we worry about them."

#### Marijuana

Volkow said NIDA needs to develop research into the pharmacokinetics of marijuana. One of the known differences between smoked and edible marijuana is that smoking delivers the drug to the brain rapidly. This is associated with stronger re-

warding effects and addiction, said Volkow. But the problem with oral marijuana is precisely that it takes longer to have an effect. "In the meantime, you may not feel much, and that may lead you to take more," she said. When effects do kick in, they may be much more intense and dysphoric than the user intended. Furthermore, people who get edibles may not know what they are getting in terms of tetrahydrocannabinol or

other substances, she said.

Finally, although the news was mostly good, Johnston cautioned against "generational forgetting," citing the resurgence of drug abuse in the 1990s as an example. "This is not a problem we can turn away from," he said. •

For more information on the MTF survey, go to [www.monitoringthefuture.org](http://www.monitoringthefuture.org).

## YPR's CEO on plans as Faces & Voices merger is tabled

Justin Luke Riley, president and CEO of Young People in Recovery (YPR), has plans for the organization that is barely a year old. Those plans do not include a merger — at least not right now — with Faces & Voices of Recovery, however. That merger, which had been announced this fall by both organizations (see *ADAW*, Oct. 6), fell apart earlier this month, Riley told *ADAW*. The boards of both organizations could not agree, Riley told *ADAW* last week, saying that the merger plans dissolved on December 5. A week later, Faces & Voices announced that it had hired an executive director (see

p. 8), at last resolving the leadership gap in that organization that was left when Pat Taylor retired last February (see *ADAW*, March 3).

As for YPR, it's a much younger organization, just a year old and aiming for more chapters. "Our vision for YPR in 2015 is that we really see more and more chapters forming," Riley told *ADAW*. The chapter model is meant to make the process simple, he said. "If you want to get involved and stay involved in the recovery movement, without the red tape of a new nonprofit, this is easy."

YPR has gone from three to 31 chapters in the past year. "We have a

full-time staff to train everyone," he said. "It's our job to support the chapters."

Like Faces & Voices, YPR supports "all pathways to recovery," said Riley. This includes medication-assisted treatment, he said. "We are for whatever is helping people maintain their journey," he said.

Not everyone who belongs to YPR is young. "We have people who are in their mid-60s who want to support a chapter because they got into recovery when they were young," he said. There are also people, like the development director,

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who are parents of a young person in recovery. “YPR is for all ages, and even for people who are not in recovery but who just get it,” said Riley.

## Starting a chapter

To start a chapter, someone just needs to go to the YPR website and fill out the form, but there is a prerequisite — that there be several people who are joining in, so that the entire burden isn’t on one person, said Riley. Then, the vice presi-

chapter members,” said Riley. This year’s conference will probably take place over the summer, and possibly in Colorado, where Riley is based.

Originally, YPR was not intended to become a recovery support group, said Riley. “But at the end of the day, it has been that,” he said. And he noted that being a part of YPR — and helping others in recovery — is an asset to recovery. “We know that giving people meaning and purpose and empowering them is a huge part of having them stay in recovery,” he said.

**‘We know that giving people meaning and purpose and empowering them is a huge part of having them stay in recovery.’**

Justin Luke Riley

dent will get in touch with them on the next steps. “We have a 90-day development plan” for new chapters, in which new chapters get training in volunteer management, said Riley. He added that there are no membership dues or fees. “Everything we do is free,” he said.

YPR gets funding from contracts, government grants, individuals, corporations and foundations. “We’ve been very fortunate,” said Riley.

Once a year, YPR has a national leadership conference for which all the chapter leads meet. “We fly all of them in, so they can meet other

## Riley’s story

Riley went to many treatment centers between the ages of 17 and 19 — he’s 26 now. Finally, he ended up in a homeless shelter that was also a treatment center. He was 20 and alienated from his family, and someone at the shelter told him he could do better. After he was in recovery for three months, he stayed at the shelter, overseeing 96 men and 28 women, helping them with their recovery. “I worked on-site, I taught recovery, I was going to meetings,” he said. “Being in that role so early in my recovery saved my life.”

He went from that role to consulting for treatment centers. His main message to them was to have the patients be part of the team, he said. “They shifted from a hierarchy-based system to a team-based one,” he said.

Then he went back to college, studied business and got married. He is a proud father of a 5-week-old.

## Merger

As for the merger with Faces & Voices, “we did everything we could to make it happen,” he said. “Faces & Voices helped start YPR, so YPR would not exist without Faces & Voices.” But since the organizations couldn’t agree on terms, the merger didn’t happen. “Someone said a merger is never over; it’s just suspended,” he said. “But for me, our movement’s reputation is more important — and we are all helping people stay in recovery.”

“The merger discussions with YPR are currently at a pause, and while I am not at liberty to disclose further details, Faces & Voices of Recovery remains committed to the process and hopeful that after a period of rest and rejuvenation we can revisit these discussions with renewed energy and hardy optimism,” said Richard Buckman, Faces & Voices board chair, in an email to *ADAW*. “Meanwhile we continue to work and operate on behalf of our constituency to organize and mobilize the recovery community across the country.” •

## Legal Action Center, TRI, Truven to study teen access to care

The effect of the Affordable Care Act and the Mental Health Parity and Addiction Equity Act on access to substance use disorder services for adolescents will be studied by the Legal Action Center, joined by the Treatment Research Institute and Truven Health Analytics, under a \$1.35 million three-year grant from the Conrad N. Hilton Foundation.

The award, announced Decem-

ber 18, will look at how adolescent prevention and intervention services are being offered, and the extent to which insurance companies are complying with the laws. The three organizations will also educate treatment providers about federal confidentiality requirements that are essential to encouraging people to seek treatment.

“Recent legislation has provided the incentive and financing to sig-

nificantly bolster a more robust public health approach to reducing substance use problems among adolescents,” said Paul Samuels, director and president of the Legal Action Center. “By combining the expertise of the scientific, analytic and policy fields, we have an opportunity to identify and expand the promised interventions of the Affordable Care and Parity Acts and truly change the

course of addiction for the next generation.”

## 42 CFR Part 2

The grant “will help ensure that providers serving adolescents understand their confidentiality obligations,” said Sally Friedman, legal director of the Legal Action Center, which is the foremost expert on 42 CFR Part 2, the regulations implementing federal confidentiality law for alcohol and drug abuse patient records. “Young people can be reluctant to share stigmatizing information with adults for fear that it will be disclosed to parents and others.”

Adolescents are entitled to a full range of prevention, early intervention and management services for substance use disorders that are on par with those provided for other chronic illnesses through these laws, according to the Legal Action Cen-

ter. Although adolescence represents a vital window in which to provide services for the prevention and mitigation of alcohol and other drug use (AOD), the state of substance use prevention, intervention and treatment for adolescents and young adults is “inadequate and underfunded,” with the result that the majority of young people do not receive the services they need.

“The good news is that ACA and Parity provide the opportunity to improve implementation of identified evidence-based preventive services for adolescents, and make sure that insurers provide coverage and benefits for those services — that is what this project aims to do,” said Mady Chalk, director of the TRI policy project. “Effective screenings and early interventions exist, and they must be taken to scale around the nation,” she said. “The parity law has

the potential to dramatically expand coverage for, and access to, these life-saving services.”

Steven M. Hilton, president and CEO of the Conrad N. Hilton Foundation, said that adolescents “are particularly vulnerable to the harms associated with substance misuse, and if we can help prevent them from using or intervene early, it is unlikely they will develop a substance use disorder.”

The objectives of the project will be on (1) documenting and analyzing the status of the ACA and parity implementation with a focus on insurance coverage, (2) evaluating how screening and brief intervention providers offer services, (3) informing and educating all stakeholders of the services that are mandated by law and (4) ensuring that providers understand federal confidentiality rules. •

## ‘Denied’ leads to renewed call for parity enforcement

Passage of the Affordable Care Act (ACA) and the Mental Health Parity and Addiction Equity Act (MHPAEA) has not been enough to guarantee access to addiction treatment on a par with medical care. This was made painfully clear by a scathing “60 Minutes” report on insurance companies that are denying care. The program, which aired December 14, has led to a call for federal action from the Parity Implementation Coalition. Treatment providers have known about the enforcement problems with parity for months, but the “60 Minutes” report, called “Denied,” brought into public light the shattered lives of patients and loved ones because of the refusal to cover treatment.

“The report reveals the reality of systematic denials that leave both patients and providers making life-saving decisions with one arm tied behind their backs,” said Beth Ann Middlebrook, attorney for The Watershed Addiction Treatment Programs Inc. “This highlights the sig-

nificance of rights afforded under the federal parity law, as well as the need for fair and independent external appeals of denied care as required under the ACA.”

The Parity Implementation Coalition is calling for:

- Full state and federal implementation and enforcement of the Mental Health Parity and Addiction Equity Act and regulations.
- Health plans to disclose their “medical necessity criteria” and how it is applied to both medical and mental health and substance use disorder treatment services so individuals can determine if their mental health/substance use care is on par with their physical health care, as already required by federal law and regulations.
- A requirement that health plans publicly disclose their denial rates for mental health and substance use care and

medical/surgical care, both at the claims level and on internal and external appeal.

- Federal health programs such as Medicaid, which cover 65 million Americans, must be brought into compliance with the parity law.

The Parity Implementation Coalition is an alliance of addiction and mental health consumer and provider organizations. Its members include the American Academy of Child and Adolescent Psychiatry, the American Psychiatric Association, the American Society of Addiction Medicine, Cumberland Heights, Faces & Voices of Recovery, the Hazelden Betty Ford Foundation, Med-Pro Billing, Mental Health America, the National Alliance on Mental Illness, the National Association of Addiction Treatment Providers, the National Association of Psychiatric Health Systems and The Watershed Treatment Programs Inc. In an effort to end discrimination against indi-

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viduals and families who seek services for mental health and substance use disorders, these organizations advocated for more than 14 years in support of parity legislation

and are committed to the full implementation and enforcement of the MHPAEA. •

More information about the Coalition is available at [www.parity](http://www.parity)

[ispersonal.org](http://ispersonal.org).

For the “60 Minutes” show, go to [www.cbs.com/shows/60\\_minutes/video/V0EAV25FWjaYdEKlB8w2OgiQAx8f\\_T/denied-inside-homs-mindfulness](http://www.cbs.com/shows/60_minutes/video/V0EAV25FWjaYdEKlB8w2OgiQAx8f_T/denied-inside-homs-mindfulness).

## SAM strategy luncheon: Focus on the money

Earlier this month, Smart Approaches to Marijuana (SAM) held a lunch special strategy session. Among the 30 or so attendees were General Barry McCaffrey, former director of the Office of National Drug Control Policy (ONDCP), and Bob Weiner, former communications director for the ONDCP. The meeting, called the Drug Policy Summit, was held at the Heritage Foundation, which, along with SAM and the Drug Free America Foundation, sponsored it.

Weiner, a Democrat, told attendees at the closed luncheon that the silence of both parties on legalization has been deafening. “Both are afraid of losing the youth vote,” said Weiner, who believes the solution

lies in getting politicians to speak up, one by one. “They need to show some moral force, which everyone respects.”

As for medical marijuana, scientists need to show that it isn’t as effective as other treatments for various diseases. “That will be very persuasive, as people learned Laetrile did not cure cancer after 22 states legalized it in the 1960s and 1970s,” he said.

Weiner also suggested that SAM write a letter to presidential candidates laying out the reasons for opposing legalization. But the biggest problem, the group agreed, is fighting pro-legalization money. “I suggested that they meet directly with

the funding sources, from Soros on down, to make the case for why better approaches than legalization are supporting treatment and alternative programs like drug courts,” he said.

McCaffrey opened the meeting before the luncheon, which was public, saying that “political intimidation” is driving public policy. “We’ve lost the message wars,” he said. As for politics and legalization, “it can’t be ‘the left is for it,’ ‘the right is against it,’ and ‘libertarians are rational.’” McCaffrey also said that it’s “shocking that the media has made this into a matter of humor — there’s nothing funny about drug abuse.” Instead, he said, “We need to get the nation to focus on the science.” •

## Pain clinics CEO pleads guilty to arranging drug-test kickbacks

The chief financial officer (CFO) of a group of pain management clinics in central Maryland pleaded guilty December 15 to soliciting and receiving kickbacks from a drug-testing laboratory in exchange for referrals, federal officials announced. Vic Wadhwa’s plea said that the clinics who had been prescribed pain medications had to submit urine samples to monitor those medications and other drugs. Hundreds of urine samples were sent to the lab every month.

The lab is in New Jersey; Wadhwa and others chose it because they had learned the company

would pay a kickback. The agreement was negotiated in March 2011 by Wadhwa; the lab agreed to pay kickbacks that amounted to half of the profit, after accounting for expenses, for each urine sample the group submitted.

From March 2011 to August 2012, the lab company received more than \$4 million from private insurers, Medicare and the Federal Employees Health Benefit Program for lab tests ordered by the group of clinics. The kickback payments started in July 2011; between this time and the end of the scheme in July 2012, the lab company paid the pain management group more than \$1.3 million in kickbacks. Wadhwa himself received almost \$460,000. He faces a maximum sentence of five years in prison and a \$250,000 fine; sentencing is scheduled for

April 2.

The guilty plea was announced by United States Attorney for the District of Maryland Rod J. Rosenstein; Special Agent in Charge Stephen E. Vogt of the Federal Bureau of Investigation; and Special Agent in Charge Nicholas DiGiulio, Office of Investigations, Office of Inspector General (OIG) of the Department of Health and Human Services (HHS).

A spokeswoman for the U.S. Attorney for the District of Maryland would not disclose the name of the laboratory to us, because the investigation is ongoing, she said, adding that “it could take years.”

Rosenstein commended the FBI and HHS-OIG for their work in the investigation and thanked Assistant U.S. Attorneys Jefferson M. Gray and Sean R. Delaney, who are prosecuting the case. •

For more information on addiction and substance abuse, visit [www.wiley.com](http://www.wiley.com)

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December.

"I don't set up an ambitious goal that I may have a hard time achieving," said Mark Parrino, president of the American Association for the Treatment of Opioid Dependence (AATOD). The association representing opioid treatment programs (OTPs) has engaged in an end-of-year donation campaign since 2008; this year, a series of three information-based e-mails will end with a third pitch sent just before Christmas.

Another reason why end-of-year appeals for cash are extremely popular in the addiction treatment community involves their logical tie-in at some residential programs to appeals for modest holiday gifts for patients and/or their children. "We ask for a donation for each of our clients so that they can get a tiny Christmas," said Jan Carter, development coordinator at Odyssey House of Utah. Residents are asked to create a wish list of three needed items, such as a pair of shoes or an inexpensive mobile phone that will allow their child to stay in touch with them while they're in treatment, Carter explained.

With some potential cash donors literally waiting until the last minute to pen a December date on a check, it is likely that the results of any end-of-year campaign won't be known until a while into January. "We're not back in our offices until January 5, given the way the calendar falls this year," Parrino said, and checks may be awaiting at that time.

**Diverse approaches**

The approaches that field organizations take in their end-of-year appeals vary considerably. In the second of the three AATOD e-mails, sent out in early December, Parrino cited in detail numerous accomplishments and ongoing projects at the association, such as advocacy efforts toward increasing state Medicaid reimbursement for medication-assisted therapies for opioid dependence, and ongoing work with phy-

sicians to improve coordination and referral between medical practices and OTPs. The e-mail also highlights AATOD's upcoming national conference in late March.

"We say, 'By the way, this is the nature of our work,'" Parrino told *ADAW*. "We tell them, 'This is what we've done, and this is what we're seeing.'"

Odyssey House of Utah took a completely different approach in a holiday message it delivered by e-mail on December 16. An image shows a pair of hands gently holding a small lantern that emits soothing light. Under the image is a quote from Rumi: "Be a lamp, lifeboat, or ladder. Help someone's soul heal."

**'We did decide on now specifically because this tends to be the time when people are thinking about charitable contributions.'**

Abigail Woodworth

After a simple holiday greeting that follows, the recipient can find a "Donate" button at the bottom of the message.

Carter says she and her colleagues in her small department thought long and hard about what they would use, looking at some 500 phrases/poems and around 50 images before making a decision. "I thought, 'How do I, in a busy [holiday] moment of somebody's time, have them stop and think about someone else who's desperate?'" she said.

She added that the e-mail generally went out to businesses and organizations with which Odyssey House has an ongoing relationship,

while a mailed appeal was sent to past donors.

The Susan B. Anthony Recovery Center in Pembroke Pines, Fla., took an approach somewhere between the simplicity of the Odyssey House strategy and the information-rich appeal of AATOD. Development manager Whitney Hughson said the center thought a great deal about a compelling subject line for the straightforward five-paragraph e-mail appeal that went out earlier this month, settling on the phrase "Out of the Abyss."

Hughson said, "We wanted to try to help people understand who we are and what we do." The e-mail achieved a 22 percent open rate, which colleagues told Hughson was a remarkable response.

At the nonprofit Treatment Research Institute (TRI) in Philadelphia, leaders leveraged the name recognition of founder and board chairman Tom McLellan to launch a \$40,000 fundraising challenge in which McLellan himself will match every dollar raised. "Tom believes that NOW — like never before in our history — we have the opportunity to transform the treatment of substance use disorders," an e-mail that was sent out earlier this month states.

Abigail Woodworth, TRI's vice president for strategy and public affairs, said private fundraising constitutes a relatively new pursuit for the research organization, which relies largely on grants. She said McLellan at one time had believed that charitable giving was not compatible with the mission of a solution-focused organization, but now sees philanthropy as an important vehicle for identifying treatment solutions. A \$15,000 private donation recently helped TRI establish a national resource directory supporting parents of young people with a substance use disorder.

Woodworth said the challenge campaign, which as of mid-December was about halfway to its goal, was deliberately timed to the year-end pe-

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riod. “We did decide on now specifically because this tends to be the time when people are thinking about charitable contributions,” she said.

## Evaluating response

The Susan B. Anthony Center’s Hughson says that based on past research, organizations such as hers can be expected to raise close to 20 percent of their entire year’s fundraising total in the month of December alone. While her organization has relied mainly on e-mail, she said it also has gotten a boost from some employees sharing information about its fundraising on social media.

Odyssey House’s Carter says end-of-year appeals clearly are on the minds of several organizations’ leaders. In recent weeks, she has attended three seminars or webinars on the theme of the “holiday ask,” all of them stressing that organizations shouldn’t pass up the opportunity.

She said it is difficult to project what might happen in any given December. This year her organization happened to receive three tribute gifts around the same time, from families that recently lost a loved one who had been helped by the program. In other years, no such donations might come in.

Parrino said that if AATOD’s campaign brings in around \$25,000 for the national organization, that will be seen as helpful. The money is used for general budget expenses and is not targeted to any particular effort. The e-mail appeals are sent to all 8,000 names on the association’s working e-mail list, he said.

Those interviewed for this article generally agree that their appeals target both those who are charitable in general and those who have a particular affinity for addiction issues — but mostly the latter. “Generally it’s people who are close to our work,” Parrino said. •

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## Coming up...

The **New York Society of Addiction Medicine** annual medical-scientific conference will be held **January 30–31, 2015** in **New York City**. For more information, go to <http://nysam-asam.com>.

The **Community Anti-Drug Coalitions of America** 2015 leadership forum will be held **February 2–5, 2015** in **National Harbor, Maryland**. For more information, go to [www.cadca.org/training-events/upcoming](http://www.cadca.org/training-events/upcoming).

The **Addiction Professional** conference on opioid dependence treatment and pain management and recovery will be held **February 2–4, 2015** in **Garden Grove, California**. For more information, go to [www.addictionpro.com/ap-academy/addiction-professional-academy](http://www.addictionpro.com/ap-academy/addiction-professional-academy).

## NAMES IN THE NEWS

### Henry Bartlett leaves COMPA for Alkermes

Henry Bartlett, the longtime executive director of the Committee of Methadone Program Administrators of New York, has moved to Alkermes, where he is now associate director for New York state government affairs. He started on October 1, according to Alkermes, which “did not do a personnel announcement” and therefore does “not have details beyond his start date,” according to Alkermes spokeswoman Jennifer Snyder. Alkermes makes Vivitrol.

### Patty McCarthy new executive director for Faces & Voices

On December 12, Faces & Voices of Recovery announced the hiring of Patty McCarthy Metcalf as the new executive director. According to a press release, she was chosen from

many “high caliber candidates.” She was previously deputy director of the Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) initiative at the Substance Abuse and Mental Health Services Administration. Previously, she was the director of Friends of Recovery-Vermont for a decade. She is in long-term recovery from alcohol and drug addiction and has a master’s degree in community counseling. Longtime executive director and CEO Pat Taylor retired suddenly last winter (see *ADAW*, March 3). The appointment ends months of speculation about the future of the organization, which is merging with Young People in Recovery (see *ADAW*, Oct. 6).

For additional copies of *ADAW*, please contact Customer Service at 888-378-2537 or [jbsub@wiley.com](mailto:jbsub@wiley.com).

## In case you haven’t heard...

Two men from Oregon — where marijuana is legal — were arrested when they were driving through Ohio — where it isn’t. Troopers stopped their car on the Ohio Turnpike for speeding and smelled marijuana when they approached the car, the *Sandusky Register* reported December 12. A search yielded many wrapped Christmas presents, which actually were large glass jars containing about five pounds of hydroponic marijuana, the troopers said. They also found a pipe and a jar of marijuana cookies. The men were arrested and taken to jail, where they remain on \$200,000 bond each — not a nice Christmas for them or for the intended recipients of their gifts. The street value of the marijuana was estimated at \$25,000.