Substance Abuse Treatment
And Family Therapy

A Treatment Improvement Protocol

TIP 39

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

Substance Abuse Treatment And Family Therapy

A Treatment Improvement Protocol

TIP 39

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment

1 Choke Cherry Road
Rockville, MD 20857

Acknowledgments

This publication was produced under the Knowledge Application Program (KAP) Contract, number 270-99-7072 with the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS). Karl D. White, Ed.D., and Andrea Kopstein, Ph.D., M.P.H., served as the Center for Substance Abuse Treatment (CSAT) Government Project Officers. Christina Currier served as the CSAT TIPs Task Leader.

Disclaimer

The opinions expressed herein are the views of the consensus panel members and do not necessarily reflect the official position of SAMHSA or HHS. No official support of or endorsement by SAMHSA or HHS for these opinions or for the instruments or resources described are intended or should be inferred. The guidelines presented should not be considered substitutes for individualized client care and treatment decisions.

Public Domain Notice

Electronic Access and Printed Copies

This publication may be ordered from or downloaded from SAMHSA's Publications Ordering Web page at http://store.samhsa.gov. Or, please call SAMHSA at 1-877-SAMHSA-7 (1-877-726-4727) (English and Español).

Recommended Citation

Center for Substance Abuse Treatment. *Substance Abuse Treatment and Family Therapy.* Treatment Improvement Protocol (TIP) Series, No. 39. HHS Publication No. (SMA) 15-4219. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2004.

Originating Office

Quality Improvement and Workforce Development Branch, Division of Services Improvement, Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, 1 Choke Cherry Road, Rockville, MD 20857.

HHS Publication No. (SMA) 15-4219
Printed 2004
Revised 2005, 2006, 2008, 2009, 2010, 2012, 2014, and 2015

What Is a TIP?

Treatment Improvement Protocols (TIPs) are developed by the Substance Abuse and Mental Health Services Administration (SAMHSA) within the U.S. Department of Health and Human Services (HHS). Each TIP involves the development of topic-specific best-practice guidelines for the prevention and treatment of substance use and mental disorders. TIPs draw on the experience and knowledge of clinical, research, and administrative experts of various forms of treatment and prevention. TIPs are distributed to facilities and individuals across the country. Published TIPs can be accessed via the Internet at http://store.samhsa.gov.

Although each consensus-based TIP strives to include an evidence base for the practices it recommends, SAMHSA recognizes that behavioral health is continually evolving, and research frequently lags behind the innovations pioneered in the field. A major goal of each TIP is to convey "front-line" information quickly but responsibly. If research supports a particular approach, citations are provided. When no citation is provided, the information is based on the collective clinical knowledge and experience of the consensus panel.

Consensus Panel

Note: The information given indicates each participant's affiliation during the time the panel was convened and may no longer reflect the individual's current affiliation.

Chair

Edward Kaufman, M.D.
Editor in Chief
American Journal of Drug and Alcohol Abuse
Dana Point, California

Co-Chair

Marianne R. M. Yoshioka, M.S.W., Ph.D.
Associate Professor
Columbia University
School of Social Work
New York, New York

Workgroup Leaders

Mary M. Gillespie, Psy.D., CASAC
Professor
Hudson Valley Community College
Saratoga Springs, New York

Gloria Grijalva-Gonzales
Certified Sr. Substance Abuse Case Manager/Counselor
San Joaquin County – Office of Substance Abuse
Allies Project
Stockton, California

I. Andrew Hamid, Ph.D., M.S.W., MFT, CSW
Professor
Columbia University
School of Social Work
New York, New York

David Rosenthal, Ph.D.
Executive Director
Lower East Side Harm Reduction Center
New York, New York

Daniel Santisteban, Ph.D.
Research Associate Professor
University of Miami
School of Medicine
Miami, Florida

Carol Shapiro, M.S.W.
Executive Director
Family Justice Center
New York, New York

Panelists

Fred U. Andes, D.S.W., M.S.W., M.P.A., LCSW
Assistant Professor of Sociology
New Jersey City University
Jersey City, New Jersey

Paul Curtin, M.A., CAC, NCAC II
President
Alcohol Services, Inc.
Syracuse, New York

Jo-Ann Krestan, M.A., MFT, LADC
Family Therapist/Writer
Private Practice
Surry, Maine

Eric E. McCollum, Ph.D., LCSW, LMFT
Professor and Clinical Director
Virginia Tech Falls Church
Marriage and Family Therapy Program
Falls Church, Virginia

Margaret McMahon, M.T.S., M.S., M.S.W.
Clinician
Licensed Certified Social Worker
Private Practice
Washington, DC

Greer McSpadden, M.S.W., LISW
Director, BHS
First Nations Community Health Source
Albuquerque, New Mexico

William Francis Northey, Jr., Ph.D.
Research Specialist
American Association for Marriage and Family Therapy
Alexandria, Virginia

Marlene F. Watson, Ph.D.
Director
Programs in Couple and Family Therapy
Drexel University
Philadelphia, Pennsylvania

Loretta Young Silvia, M.Ed., Ph.D.
Associate Professor of Psychiatry
Wake Forest University School of Medicine
Department of Psychiatry and Behavioral Medicine
Winston-Salem, North Carolina

KAP Expert Panel and Federal Government Participants

Note: The information given indicates each participant's affiliation during the time the panel was convened and may no longer reflect the individual's current affiliation.

Barry S. Brown, Ph.D.
Adjunct Professor
University of North Carolina at Wilmington
Carolina Beach, North Carolina

Jacqueline Butler, M.S.W., LISW, LPCC, CCDC III, CJS
Professor of Clinical Psychiatry
College of Medicine
University of Cincinnati
Cincinnati, Ohio

Deion Cash
Executive Director
Community Treatment and Correction Center, Inc.
Canton, Ohio

Debra A. Claymore, M.Ed.Adm.
Owner/Chief Executive Officer
WC Consulting, LLC
Loveland, Colorado

Carlo C. DiClemente, Ph.D.
Chair
Department of Psychology
University of Maryland Baltimore County
Baltimore, Maryland

Catherine E. Dube, Ed.D.
Independent Consultant
Brown University
Providence, Rhode Island

Jerry P. Flanzer, D.S.W., LCSW, CAC
Chief, Services
Division of Clinical and Services Research
National Institute on Drug Abuse
Bethesda, Maryland

Michael Galer, D.B.A., M.B.A., M.F.A.
Independent Consultant
Westminster, Massachusetts

Renata J. Henry, M.Ed.
Director
Division of Alcoholism, Drug Abuse, and Mental Health
Delaware Department of Health and Social Services
New Castle, Delaware

Joel Hochberg, M.A.
President
Asher & Partners
Los Angeles, California

Jack Hollis, Ph.D.
Associate Director
Center for Health Research
Kaiser Permanente
Portland, Oregon

Mary Beth Johnson, M.S.W.
Director
Addiction Technology Transfer Center
University of Missouri—Kansas City
Kansas City, Missouri

Eduardo Lopez, B.S.
Executive Producer
EVS Communications
Washington, DC

Holly A. Massett, Ph.D.
Academy for Educational Development
Washington, DC

Diane Miller
Chief
Scientific Communications Branch
National Institute on Alcohol Abuse and Alcoholism
Bethesda, Maryland

Harry B. Montoya, M.A.
President/Chief Executive Officer
Hands Across Cultures
Espanola, New Mexico

Richard K. Ries, M.D.
Director/Professor
Outpatient Mental Health Services
Dual Disorder Programs
Seattle, Washington

Gloria M. Rodriguez, D.S.W.
Research Scientist
Division of Addiction Services
NJ Department of Health and Senior Services
Trenton, New Jersey

Everett Rogers, Ph.D.
Center for Communications Programs
Johns Hopkins University
Baltimore, Maryland

Jean R. Slutsky, P.A., M.S.P.H.
Senior Health Policy Analyst
Agency for Healthcare Research & Quality
Rockville, Maryland

Nedra Klein Weinreich, M.S.
President
Weinreich Communications
Canoga Park, California

Clarissa Wittenberg
Director
Office of Communications and Public Liaison
National Institute of Mental Health
Kensington, Maryland

Consulting Members of the KAP Expert Panel

Paul Purnell, M.A.
Vice President
Social Solutions, L.L.C.
Potomac, Maryland

Scott Ratzan, M.D., M.P.A., M.A.
Academy for Educational Development
Washington, DC

Thomas W. Valente, Ph.D.
Director, Master of Public Health Program
Department of Preventive Medicine
School of Medicine
University of Southern California
Alhambra, California

Patricia A. Wright, Ed.D.
Independent Consultant
Baltimore, Maryland

Foreword

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

The Treatment Improvement Protocol (TIP) series fulfills SAMHSA's mission to reduce the impact of substance abuse and mental illness on America's communities by providing evidence-based and best practice guidance to clinicians, program administrators, and payers. TIPs are the result of careful consideration of all relevant clinical and health services research findings, demonstration experience, and implementation requirements. A panel of non-Federal clinical researchers, clinicians, program administrators, and patient advocates debates and discusses their particular area of expertise until they reach a consensus on best practices. Field reviewers then review and critique this panel's work.

The talent, dedication, and hard work that TIPs panelists and reviewers bring to this highly participatory process have helped bridge the gap between the promise of research and the needs of practicing clinicians and administrators to serve, in the most scientifically sound and effective ways, people in need of behavioral health services. We are grateful to all who have joined with us to contribute to advances in the behavioral health field.

Pamela S. Hyde, J.D.
Administrator
Substance Abuse and Mental Health Services Administration

Daryl W. Kade
Acting Director
Center for Substance Abuse Treatment
Substance Abuse and Mental Health Services Administration

Executive Summary

Family therapy has a long and solid history within the broad mental health field. Substance abuse treatment, on the other hand, developed in considerable isolation. Indeed, until the 1970s, alcoholism counselors typically outright rejected the predominant view of mental health practitioners that alcohol abuse was a symptom of some underlying disorder rather than a primary disorder on its own account.

Nonetheless, the importance of the family was clear to substance abuse professionals, and substance abuse programs included activities for family members. In this TIP, these types of participation by family members in standard treatment programs are referred to as "family-involved" treatment or techniques. This distinction separates the typically marginal involvement of families in substance abuse treatment programs from the types of family therapy regularly found in the family therapy field. Within the family therapy tradition, the family as a whole is the focus of treatment. Although focusing on the family as a whole has been the mainstay of the family therapy field, such a focus often resulted in inadequate attention to the significant primary features of addictive disease and the need for people with substance abuse problems to receive direct help for their addiction.

Slowly, over the past 20 years or so, sharing has increased between the substance abuse treatment and family therapy fields. The expert practitioners from both fields who served as consensus panel members for this TIP recognize that much greater cross-fertilization, if not integration, is possible and warranted. This TIP represents advice on how both fields can profit from understanding and incorporating the methods and theories of the other field.

The primary audience for this TIP is substance abuse treatment counselors; family therapists are a secondary audience. The TIP should be of interest to anyone who wants to learn more about family therapy. The intent of the TIP is to help counselors and family therapists acquire a basic understanding of each others' fields and incorporate aspects of each others' work into their own therapeutic repertoire.

The consensus panel for this TIP drew on its considerable experience in the family therapy field. The panel was composed of representatives from all of the disciplines involved in family therapy and substance abuse treatment, including alcohol and drug counselors, family therapists, mental health workers, researchers, and social workers.

This TIP includes six chapters. Chapter 1 provides an introduction to substance abuse treatment and family therapy. It introduces the changing definition of "family," explores the evolution of the field of family therapy and the primary models of family therapy, presents concepts from the substance abuse treatment field, and discusses the effectiveness and cost benefits of family therapy.

Chapter 2 explores the impact of substance abuse on families. The chapter includes a description of social issues that coexist with substance abuse in families and recommendations for ways to address these issues. Chapter 3 discusses approaches to therapy in both substance abuse treatment and family therapy. One section, directed at substance abuse treatment counselors, provides basic information about the models, approaches, and concepts in family therapy. Another section for family therapists provides basic information about theory, treatment modalities, and the role of 12-Step programs in substance abuse treatment.

Chapter 4 presents a discussion of integrated models for substance abuse treatment and family therapy. These models can serve as a guide for conjoint treatment approaches. Chapter 5 provides background information about substance abuse treatment for various populations and applications to family therapy for each population.

Chapter 6, aimed at administrators and trainers, presents information about the importance of improving services to families and some policy implications to consider for effectively joining family therapy and substance abuse treatment. In addition, the chapter discusses program planning models developed by the consensus panel that provide a framework for including family therapy in substance abuse treatment.

Throughout this TIP, the term "substance abuse" is used to refer to both substance abuse and substance dependence (as defined by the *Diagnostic and Statistical Manual of Mental Disorders, 4th edition, Text Revision* [DSM-IV-TR] [American Psychiatric Association 2000]). This term was chosen, in part, because substance abuse treatment professionals commonly use the term "substance abuse" to describe any excessive use of addictive substances. In this TIP, the term refers to the use of alcohol as well as other substances of abuse. Readers should attend to the context in which the term occurs to determine what possible range of meanings it covers; in most cases, however, the term will refer to all varieties of substance use disorders described by DSM-IV-TR.

The sections that follow summarize the content in this TIP and are grouped by chapter.

Substance Abuse Treatment and Family Therapy

There is no single, immutable definition of *family*. Different cultures and belief systems influence definitions, and because cultures and beliefs change over time, definitions of what is meant by family are by no means static. While the definition of family may change according to different circumstances, several broad categories encompass most families, including traditional families, extended families, and elected families. The idea of family implies an enduring involvement on an emotional level. For practical purposes, family can be defined according to the individual client's closest emotional connections.

Family therapy is a collection of therapeutic approaches that share a belief in the effectiveness of family-level assessment and intervention. Consequently, a change in any part of the system may bring about changes in other parts of the system. Family therapy in substance

abuse treatment has two main purposes: (1) to use the family's strengths and resources to help find or develop ways to live without substances of abuse, and (2) to ameliorate the impact of chemical dependency on both the identified patient and family.

In family therapy, the unit of treatment is the family, and/or the individual within the context of the family system. The person abusing substances is regarded as a subsystem within the family, the person whose symptoms have serious implications for the family system. The familial relationships within this subsystem are the points of therapeutic interest and intervention. The therapist facilitates discussions and problemsolving sessions, often with the entire family group or subsets thereof, but sometimes with a single participant, who may or may not be the person with a substance use disorder.

A number of historical models of family therapy have been developed over the past several decades. These include models such as marriage and family therapy (MFT), strategic family therapy, structural family therapy, cognitive–behavioral family therapy, couples therapy, and solution-focused family therapy. Today four predominant family therapy models are used as the bases for treatment and specific interventions for substance abuse: the family disease model, the family systems model, the cognitive–behavioral approach, and multidimensional family therapy.

The full integration of family therapy into standard substance abuse treatment is still relatively rare. Some of the goals of family therapy in substance abuse treatment include helping families become aware of their own needs and providing genuine, enduring healing for family members; working to shift power to the parental figures in a family and to improve communication; helping the family make interpersonal, intrapersonal, and environmental changes affecting the person using alcohol or drugs; and keeping substance abuse from moving from one generation to another (i.e., prevention). Other goals will vary, depending on which member of the family is abusing substances.

Multiple therapeutic factors probably account for the effectiveness of family therapy, including acceptance from the therapist, improved communication, organizing the family structure, determining accountability, and enhancing impetus for change. Another reason family therapy is effective is that it provides a neutral forum where family members meet to solve problems. Additionally, family therapy is applicable across many cultures and religions and is compatible with their bases of connection and identification, belonging and acceptance.

Based on effectiveness data for family therapy and the consensus panel's collective experience, the panel recommends that substance abuse treatment agencies and providers consider how to incorporate family approaches, including age-appropriate educational support services for children, into their programs. In addition, while only a few studies have assessed the cost benefits or compared the cost of family therapy to other approaches (such as group therapy, individual therapy, and 12-Step programs), a small but growing body of data has demonstrated the cost benefits of family therapy specifically for substance abuse problems.

Additional considerations exist for integrating family therapy into substance abuse treatment. Family therapy for substance abuse treatment demands the management of complicated treatment situations. Specialized strategies may be necessary to engage the identified patient in treatment. In addition, the substance abuse almost always is associated with other difficult life problems, which can include mental health issues, cognitive impairment, and socioeconomic constraints, such as lack of a job or home. It can be difficult, too, to work across diverse cultural contexts or to discern individual family members' readiness for change and treatment. These circumstances make meaningful family therapy for substance abuse problems a complex, challenging task for both family therapists and substance abuse treatment providers.

Modifications in the treatment approach may be necessary, and the success of treatment will depend to a large degree on the creativity, judgment, and cooperation in and between programs in each field.

Safety and appropriateness of family therapy is another important issue. Only in rare situations is family therapy inadvisable, but there are several considerations of which counselors must be aware. Family or couples therapy should not take place unless all participants have a voice and everyone can raise pertinent issues, even if a dominant family member does not want them discussed. Engaging in family therapy without first assessing carefully for violence may lead not only to poor treatment, but also to a risk for increased abuse. It is the treatment provider's responsibility to provide a safe, supportive environment for all participants in family therapy.

Child abuse or neglect is another serious consideration. Any time a counselor suspects past or present child abuse or neglect, laws require immediate reporting to local authorities. Along the same lines, domestic violence is a serious issue among people with substance use disorders that must be factored into therapeutic considerations. Only the most extreme anger contraindicates family therapy. It is up to counselors and therapists to assess the potential for anger and violence and to construct therapy so it can be conducted without endangering any family members. If, during the screening interview, it becomes clear that a batterer is endangering a client or a child, the treatment provider should respond to this situation first, and if necessary, suspend the rest of the screening interview until the safety of all concerned can be ensured.

Impact of Substance Abuse on Families

People who abuse substances are likely to find themselves increasingly isolated from their families. A growing body of literature suggests that substance abuse has distinct effects on different family structures. The effects of substance abuse frequently extend beyond the nuclear family. Extended family members may experience feelings of abandonment, anxiety, fear, anger, concern, embarrassment, or guilt, or they may wish to ignore or cut ties with the person abusing substances.

Various treatment issues are likely to arise in different family structures that include a person who is abusing substances:

- *Client who lives alone or with a partner*. In this situation, both partners need help. The treatment of either partner will affect both. When one person is chemically dependent and the other is not, issues of codependence arise.
- *Client who lives with a spouse (or partner) and minor children*. Most available data on the enduring effects of parental substance abuse on children suggest that a parent's drinking problem often has a detrimental effect on children. The spouse of a person abusing substances is likely to protect the children and assume the parenting duties not fulfilled by the parent abusing substances. If both parents abuse alcohol or illicit drugs, the effect on children worsens.
- *Client who is part of a blended family*. Stepfamilies present special challenges under normal circumstances; substance abuse can intensify problems and become an impediment to a stepfamily's integration and stability. Clinicians should be aware of the dynamics of blended families and that they require additional considerations.
- *An older client who has grown children*. An older adult with a substance abuse problem can affect everyone in a household. Additional family resources may need to be mobilized to treat the older adult's substance use disorder. As with child abuse and neglect, elder maltreatment can be subject to statutory reporting requirements to local authorities.
- *Client is an adolescent and lives with family of origin*. When an adolescent uses alcohol or drugs, siblings in the family may find their

needs and concerns are ignored or minimized while their parents react to continuous crises involving the adolescent who abuses alcohol or drugs. In many families that include adolescents who abuse substances, at least one parent also abuses substances. This unfortunate modeling can set in motion a combination of physical and emotional problems that can be very dangerous.

- *Someone not identified as the client is abusing substances*. When someone in the family other than the person with presenting symptoms is involved with alcohol or illicit drugs, issues of blame, responsibility, and causation will arise. With the practitioner's help, the family should refrain from blaming, but still be encouraged to reveal and repair family interactions that create the conditions for continued substance abuse.

In any form of family therapy for substance abuse treatment, consideration should be given to the range of social problems connected to substance abuse. Problems such as criminal activity, joblessness, domestic violence, and child abuse or neglect also may be present in families experiencing substance abuse. To address these issues, treatment providers need to collaborate with professionals in other fields (i.e., concurrent treatment). Whenever concurrent treatment takes place, communication among clinicians is vital.

Approaches To Therapy

The fields of substance abuse treatment and family therapy share many common assumptions, approaches, and techniques, but differ in significant philosophical and practical ways that affect treatment approaches and goals. Further, within each discipline, theory and practice differ. Although substance abuse treatment is generally more uniform in its approach than is family therapy, in both cases certain generalizations apply to the practice of the majority of providers. Two concepts essential to both fields are denial and resistance presented by clients.

Many substance abuse treatment counselors base their understanding of a family's relation to substance abuse on a *disease model* of substance abuse. Within this model, practitioners have come to appreciate substance abuse as a "family disease"—that is, a disease that affects all members of a family as a result of the substance abuse of one or more members. They should understand that substance abuse creates negative changes in the individual's moods, behaviors, relationships with the family, and sometimes even physical or emotional health.

Family therapists, on the other hand, for the most part have adopted a *family systems model*. It conceptualizes substance abuse as a symptom of dysfunction in the family. It is this focus on the family system, more than the inclusion of more people, that defines family therapy.

Despite these basic differences, the fields of family therapy and substance abuse treatment are compatible. Clinicians in both fields address the client's interactions with a system that involves something outside the self. Multiple systems affect people with substance use disorders at different levels (individual, family, culture, and society), and truly comprehensive treatment would take all of them into consideration. However, some differences exist among many, but not all, substance abuse treatment and family therapy settings and practitioners:

- *Family interventions*. Psychoeducation and multifamily groups are more common in the substance abuse treatment field than in family therapy. Family therapists will focus more on intrafamily relationships, while substance abuse treatment providers concentrate on helping clients achieve and maintain abstinence.
- *Process and content*. Family therapy generally attends more to the *process* of family interaction, while substance abuse treatment is

with their clients and know when a referral is indicated.

The family therapy field is diverse, but certain models have been more influential than others, and models that share certain characteristics can be grouped together. Several family therapy models have been adapted for working with clients with substance use disorders. None was specifically developed, however, for this integration. These models include behavioral contracting, Bepko and Krestan's theory, behavioral marital therapy, brief strategic family therapy, multifamily groups, multisystemic therapy, network therapy, solution-focused therapy, Stanton's approach, and Wegscheider-Cruse's techniques.

A number of theoretical concepts that underlie family therapy can help substance abuse treatment providers better understand clients' relationships with their families. Perhaps foremost among these is the acceptance of systems theory that views the client as a system of parts embedded within multiple systems—a community, a culture, a nation. The elements of the family as a system include complementarity, boundaries, subsystems, enduring family ties, and change and balance. Other concepts include a family's capacity for change, a family's ability to adjust to abstinence, and the concept of triangles.

Family therapists have developed a range of techniques that can be useful to substance abuse treatment providers working with individual clients and families. The consensus panel selected specific techniques on the basis of their utility and ease of use in substance abuse treatment settings, and not because they are from a particular theoretical model. This list of techniques should not be considered comprehensive. Those techniques selected by the panel include behavioral techniques, structural techniques, strategic techniques, and solution-focused techniques.

Family therapists would benefit from learning about the treatment approaches used in the substance abuse treatment field. Two of the most common approaches are the medical model of addiction, which emphasizes the biological, genetic, or physiological causes of substance abuse and dependence; and the sociocultural theories, which focus on how stressors in the client's social and cultural environment influence substance use and abuse. In addition, many substance abuse treatment providers add a spiritual component to the biopsychosocial approach. The consensus panel believes that effective treatment will integrate these models according to the treatment setting, but will always take into account all of the factors that contribute to substance use disorders.

Integrated Models for Treating Family Members

In families in which one or more members has a substance abuse problem, substance abuse treatment and family therapy can be integrated to provide effective solutions to multiple problems. The term integration, for the purposes of this TIP, refers to a constellation of interventions that takes into account (1) each family member's issues as they relate to the substance abuse, and (2) the effect of each member's issues on the family system. This TIP also assumes that, while a substance abuse problem manifests itself in an individual, the solution for the family as a whole will be found within the family system. Four discrete facets of integration along this continuum include staff awareness and education, family education, family collaboration, and family therapy integration.

Clients benefit in several ways from integrated family therapy and substance abuse treatment. These benefits include positive treatment outcomes, increased likelihood of the client's ongoing recovery, increased help for the family's recovery, and the reduction of the impact of substance abuse on different generations in the family. The benefits for the treatment professionals include reduced resistance from clients, more flexibility in treatment planning and in treatment approach, increased skill set, and improved treatment outcomes.

There are some limitations and challenges, however, to integrated models of family therapy and substance abuse treatment. These

include the risk of lack of structure and compatibility by integrating interventions from different models, additional training for staff, achieving a major shift in mindset, agencywide commitment and coordination, and reimbursement by third-party payors. In sum, agencies and practitioners must balance the value of integrated treatment with its limitations.

Substance abuse treatment professionals intervene with families at different levels during treatment, based on how individualized the interventions are to each family and the extent to which family therapy is integrated into the process of substance abuse treatment. At each level, family intervention has a different function and requires its own set of competencies. In some cases, the family may be ready only for intermittent involvement with a counselor. In other cases, as the family reaches the goals set at one level of involvement, further goals may be set that require more intensive counselor involvement. Thus, the family's acceptance of problems and its readiness to change determine the appropriate level of counselor involvement with that family. There are four levels of counselor involvement with the families of clients who are abusing substances:

- Level 1: Counselor has little or no involvement with the family.
- Level 2: Counselor provides the family with psychoeducation and advice.
- Level 3: Counselor addresses family members' feelings and provides them with support.
- Level 4: Counselor provides family therapy (when trained at this level of expertise).

To determine a counselor's level of involvement with a specific family, two factors must be considered: (1) the counselor's level of experience and comfort, and (2) the family's needs and readiness to change. Both family and counselor factors must be considered when deciding a level of family involvement.

Care must be taken in the choice of an integrated therapeutic model. The model must accommodate the needs of the family, the style and preferences of the therapist, and the realities of the treatment context. The model also must be congruent with the culture of the people it intends to serve. A great number of integrated treatment models have been discussed in the literature. Many are slight variations of others. Those discussed are among the more frequently used integrated treatment models:

- Structural/strategic family therapy
- Multidimensional family therapy
- Multiple family therapy
- Multisystemic therapy
- Behavioral and cognitive–behavioral family therapy
- Network therapy
- Bowen family systems therapy
- Solution-focused brief therapy

Another important consideration in an integrated model is the need to match therapeutic change to level of recovery. The consensus panel decided to view levels of recovery by combining Bepko and Krestan's stages of treatment for families with Heath and Stanton's stages of family therapy for substance abuse treatment. Together, those levels of recovery are

- *Attainment of sobriety.* The family system is unbalanced but healthy change is possible.
- *Adjustment to sobriety.* The family works on developing and stabilizing a new system.
- *Long-term maintenance of sobriety.* The family must rebalance and stabilize a new and healthier lifestyle.

Once change is in motion, the individual and family recovery processes generally parallel each other, although they may not be perfectly in synchrony.

Specific Populations

In this TIP, the term *specific populations* is used to refer to the features of families based on specific, common groupings that influence the process of therapy. The most important guideline for the therapist is to be flexible and to meet the family "where it is." It is also vital for counselors to be continuously aware of and sensitive to the differences between themselves and the members of the group they are counseling. Sensitivity to the specific cultural norms of the family in treatment must be respected from the start of therapy.

Family therapy for women with substance use disorders is appropriate, except in cases of ongoing partner abuse. Safety always should be the primary consideration. Substance abuse treatment is more effective for women when it addresses women's specific needs and understands their daily realities. Particular treatment issues relevant to women include shame, stigma, trauma, and control over her life. Women who have lost custody of their children may need help to regain it once stable recovery has been achieved. In fact, working to get their children back may be a strong treatment motivator for women. Finally, childcare is one of the most important accommodations necessary for women in treatment.

A sufficient body of research has not yet been amassed to suggest the efficacy of any one type of family therapy over another for use with gay and lesbian people. Family can be a very sensitive issue for gay and lesbian clients. Therapists must be careful to use the client's definition of family rather than to rely on a heterosexual-based model. Likewise, the therapist should also accept whatever identification an individual chooses for him- or herself and be sensitive to the need to be inclusive and nonjudgmental in word choice. Many lesbian and gay clients may be reluctant to include other members of their family of origin in therapy because of fear of rejection and further distancing.

Although a great deal of research has been conducted related to both family therapy and culture and ethnicity, little research has concentrated on how culture and ethnicity influence core family and clinical processes. One important requirement is to move beyond ethnic labels and consider a host of factors—values, beliefs, and behaviors—associated with ethnic identity. Among major life experiences that must be factored into treating families touched by substance abuse is the complex challenge of determining how acculturation and ethnic identity influence the treatment process. Other influential elements include the effects of immigration on family life and the circumstances that motivated emigration and the sociopolitical status of the ethnically distinct family.

The TIP also explores specific concerns related to age, people with disabilities, people with co-occurring substance abuse and mental disorders, people in rural areas, people who are HIV positive, people who are homeless, and veterans.

Policy and Program Issues

Incorporating family therapy into substance abuse treatment presents an opportunity to improve the status quo; it also challenges these two divergent modalities to recognize, delineate, and possibly reconcile their differing outlooks. Another major policy implication is that family therapy requires special training and skills that are not common among staff in many substance abuse treatment programs. A substance abuse treatment program committed to family therapy will need to consider the costs associated with providing extensive training to line and supervisory staff to ensure that everyone understands, supports, and reinforces the family therapist's work.

Given the complexity of incorporating full-scale family therapy consistently in substance abuse treatment and the finite resources with which

many substance abuse treatment programs are working, family involvement may be a more attractive alternative.

The documented cost savings and public health benefits associated with family therapy support the idea of reimbursement. However, the American health care insurance system focuses care on the individual. Little, if any, reimbursement is available for the treatment of family members, even less so if "family" is broadly defined to include a client's nonfamilial support network.

Including family therapy issues in substance abuse treatment settings at any level of intensity requires a systematic and continuous effort. The consensus panel developed four program planning models—staff education, family education and participation, provider collaboration, and family integration. These models provide a framework for program administrators and staff/counselors. These models cover (1) the issues surrounding staff education about families and family therapy, (2) family education about the roles of families in treatment and recovery from substance abuse, (3) how substance abuse treatment providers can collaborate with family therapists, and (4) methods for integrating family therapy activities into substance abuse treatment programs. The framework identifies key issues: guidelines for implementation, ethical and legal issues, outcomes evaluation, counseling adaptations, and training and supervision. Other program considerations include cultural competence, outcome evaluation procedures and reports, and long-term followup.

Appendix A: Bibliography

Alcoholics Anonymous World Services. *Alcoholics Anonymous: The Story of How Many Thousands of Men and Women Have Recovered from Alcoholism*. 3d ed. New York: Alcoholics Anonymous World Services, 1976.

Alexander, D.E., and Gwyther, R.E. Alcoholism in adolescents and their families: Family-focused assessment and management. *Pediatric Clinics of North America* 42(1):217-234, 1995.

Alexander, J., and Parsons, B.V. *Functional Family Therapy*. Monterey, CA: Brooks/Cole Pub. Co., 1982.

Alexander, J., Waldon, H.B., Newberry, A.M., and Liddle, N. The Functional Family Therapy model. In: Friedman, A.S., and Granick, S., eds. *Family Therapy for Adolescent Drug Abuse*. Lexington, MA: Lexington Books/D.C. Heath and Company, 1990. pp. 183-199.

Alexander, J.F., Robbins, M.S., and Sexton, T.L. Family-based interventions with older, at risk youth: From promise to proof to practice. *The Journal of Primary Prevention* 21(2):185-205, 2000.

Amaro, H., and Hardy-Fanta, C. Gender relations in addiction and recovery. *Journal of Psychoactive Drugs* 27(4):325-337, 1995.

American Academy of Pediatrics. Inhalant abuse. *Pediatrics* 97(3): 420-423, 1996.

American Academy of Pediatrics. Alcohol use and abuse: A pediatric concern. *Pediatrics* 108(1):185-189, 2001.

American Association for Marriage and Family Therapy. *Marriage and Family Therapy Licensing and Certification: Directory of State MFT Licensing/Certification Boards*. Alexandria, VA: American Association for Marriage and Family Therapy, 2001.

American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 4th Text Revision ed. Washington, DC: American Psychiatric Association, 2000.

Anderson, J.Z. Stepfamilies and substance abuse: Unique treatment considerations. In: Kaufman, E., and Kaufmann, P., eds. *Family Therapy of Drug and Alcohol Abuse*. 2d ed. Boston: Allyn and Bacon, 1992. pp. 172-189.

Aponte, H.J., and Van Dusen, J.M. Structural family therapy. In: Gurman, A.S., and Kniskern, D.P., eds. *Handbook of Family Therapy: Vol. 1*. New York: Brunner/Mazel, 1981. pp. 310-358.

Ariel, J., and McPherson, D.W. Therapy with lesbian and gay parents and their children. *Journal of Marital and Family Therapy* 26(4):421-432, 2000.

Atkinson, R.M., Tolson, R.L., and Turner, J.A. Late versus early onset problem drinking in older men. *Alcoholism: Clinical and Experimental Research* 14(4):574-579, 1990.

Attneave, C. American Indians and Alaska Native families: Emigrants in their own homeland. In: McGoldrick, M., Pearce, J.K., and Giordano, J., eds. *Ethnicity and Family Therapy*. New York: Guilford Press, 1982. pp. 55-83.

Azrin, N.H. Improvements in the community-reinforcement approach to alcoholism. *Behaviour Research and Therapy* 14(5):339-348, 1976.

Azrin, N.H., Donohue, B., Besalel, V.A., Kogan, E.S., and Acierno, R. Youth drug abuse treatment: A controlled outcome study. *Journal of Child and Adolescent Substance Abuse* 3(3):1-16, 1994.

Azrin, N.H., Donohue, B., Teichner, G.A., Crum, T., Howell, J., and DeCato, L.A. A controlled evaluation and description of individual-cognitive problem solving and family-behavior therapies in dually-diagnosed, conduct-disordered and substance-dependent youth. *Journal of Child and Adolescent Substance Abuse* 11(1):1-43, 2001.

Azrin, N.H., Sisson, R.W., Meyers, R., and Godley, M. Alcoholism treatment by disulfiram and community reinforcement therapy. *Journal of Behavior Therapy and Experimental Psychiatry* 13(2):105-112, 1982.

Bagarozzi, D.A. The family therapist's role in treating families in rural communities: A general systems approach. *Journal of Marital and Family Therapy* 8(2):51-58, 1982.

Barker, P. *Basic Family Therapy*. 4th ed. Oxford: Blackwell Science Ltd, 1998.

Barnes, J.S., and Bennett, C.E. *The Asian Population: 2000*. Census 2000 Brief. Washington, DC: U.S. Census Bureau, 2002.

Barrett, M.S., and Berman, J.S. Is psychotherapy more effective when therapists disclose information about themselves? *Journal of Consulting and Clinical Psychology* 69(4):597-603, 2001.

Bavolek, S.J. *Alcohol, Anger and Abuse: Understanding the Relationship Between Alcohol and Other Drug Abuse, and Child Abuse and Neglect*. Park City, UT: Family Development Resources, 1995.

Bays, J. Substance abuse and child abuse: Impact of addiction on the child. *Pediatric Clinics of North America* 37(4):881-904, 1990.

Beauvais, F. The consequences of drug and alcohol use for Indian youth. *American Indian and Alaska Native Mental Health Research* 5(1):32-37, 1992.

Beck, A.T. *Cognitive Therapy and the Emotional Disorders*. New York: International Universities Press, 1976.

Beels, C.C. Notes for a cultural history of family therapy. *Family Process* 41(1):67-82, 2002.

Bengtson, V.L. Beyond the nuclear family: The increasing importance of multigenerational bonds. *Journal of Marriage and the Family* 63(1):1-17, 2001.

Bepko, C., and Johnson, T. Gay and lesbian couples in therapy: Perspectives for the contemporary family therapist. *Journal of Marital and Family Therapy* 26(4):409-419, 2000.

Bepko, C., and Krestan, J.A. *The Responsibility Trap: A Blueprint for Treating the Alcoholic Family*. New York: Free Press, 1985.

Berenson, D. Family approach to alcoholism. *Psychiatric Opinion* 13(1):33-38, 1976.

Berenson, D., and Schrier, E.W. Current family treatment approaches. In: Graham, A.W., Schultz, T.K., and Wilford, B.B., eds. *Principles of Addiction Medicine*. 2d ed. Chevy Chase, MD: American Society of Addiction Medicine, 1998. pp. 1115-1125.

Berg, I.K. Solution-focused brief therapy with substance abusers: In: Washton, A.M., ed. *Psychotherapy and Substance Abuse: A Practitioner's Handbook*. New York: Guilford Press, 1995. pp. 223-242.

Berg, I.K., and Miller, S.D. *Working with the Problem Drinker: A Solution-Focused Approach*. New York: W.W. Norton, 1992.

Berg, I.K., and Reuss, N. *Solutions Step-By-Step: A Substance Abuse Treatment Manual*. New York: W.W. Norton, 1997.

Bernstein, A.C. Straight therapists working with lesbians and gays in family therapy. *Journal of Marital and Family Therapy* 26(4):443-455, 2000.

Bhattacharya, G. Drug use among Asian-Indian adolescents: Identifying protective/risk factors. *Adolescence* 33(129):169-184, 1998.

Bianchi, S.M., and Casper, L.M. American families. *Population Bulletin* 55(4):3-42, 2000.

Bijur, P.E., Kurzon, M., Overpeck, M.D., and Scheidt, P.C. Parental alcohol use, problem drinking, and children's injuries. *Journal of the American Medical Association* 267: 3166-3171, 1992.

Blum, K., Braverman, E.R., Holder, J.M., Lubar, J.F., Monastra, V.J., Miller, D., Lubar, J.O., Chen, T.J., and Comings, D.E. Reward deficiency syndrome: A biogenetic model for the diagnosis and treatment of impulsive, addictive, and compulsive behaviors. *Journal of Psychoactive Drugs* 32(Suppl):1-112, 2000.

Bowen, M. Alcoholism as viewed through family systems theory and family psychotherapy. *Annals of the New York Academy of Sciences* 233:115-122, 1974.

Bowen, M. *Family Therapy in Clinical Practice*. New York: Jason Aronson, 1978.

Boyd, M.R., and Mackey, M.C. Alienation from self and others: The psychosocial problem of rural alcoholic women. *Archives of Psychiatric Nursing* 14(3):134-141, 2000.

Boyd-Franklin, N. *Black Families in Therapy: A Multisystems Approach*. New York: Guilford Press, 1989.

Brady, K.T., and Randall, C.L. Gender differences in substance use disorders. *Psychiatric Clinics of North America* 22(2):241-252, 1999.

Brandl, B., and Horan, D.L. Domestic violence in later life: An overview for health care providers. *Women & Health* 35(2-3):41-54, 2002.

Bratton, S., Ray, D., Rhine, T., and Jones, L. *A Meta-Analysis of the Play Therapy Outcome Research from 1947 to the Present: A Brief Summary*. Fresno, CA: Association for Play Therapy, n.d.

Brook, D.W., and Brook, J.S. Family processes associated with alcohol and drug use and abuse. In: Kaufman, E., and Kaufmann, P., eds. *Family Therapy of Drug and Alcohol Abuse*. 2d ed. Boston: Allyn and Bacon, 1992. pp. 15-33.

Brooks, C., and Rice, K.F. *Families in Recovery: Coming Full Circle*. Baltimore: Paul H. Brookes Publishing, 1997.

Brown, S. and Lewis, V. *The Alcoholic Family in Recovery: A Developmental Model*. New York: Guilford Press, 1999.

Brown, T.G., Kokin, M., Seraganian, P., and Shields, N. The role of spouses of substance abusers in treatment: Gender differences. *Journal of Psychoactive Drugs* 27(3):223-229, 1995.

Brucker, P.S., and Perry, B.J. American Indians: Presenting concerns and considerations for family therapists. *American Journal of Family Therapy* 26(4):307-320, 1998.

Bry, B.H. Substance abuse in women: Etiology and prevention. *Issues in Mental Health Nursing* 5(1-4):253-272, 1983.

Bucholz, K.K., Sheline, Y., and Helzer, J.E. The epidemiology of alcohol use, problems, and dependence in elders: A review. In: Beresford, T.P., and Gomberg, E., eds. *Alcohol and Aging*. New York: Oxford University Press, 1995. pp. 19-41.

Bukstein, O.G. Disruptive behavior disorders and substance use disorders in adolescents. *Journal of Psychoactive Drugs* 32(1):67-79, 2000.

Bushy, A. Mental health and substance abuse: Challenges in providing services to rural clients. In: Center for Substance Abuse Treatment, ed. *Bringing Excellence to Substance Abuse Services in Rural and Frontier America*. Technical Assistance Publication Series 20. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1997. pp. 45-53.

Caetano, R., Clark, C.L., and Tam, T. Alcohol consumption among racial/ethnic minorities: Theory and research. *Alcohol Health and Research World* 22(4):233-238, 1998.

Casado-Flores, J., Bano-Rodrigo, A., and Romero, E. Social and medical problems in children of heroin-addicted parents: A study of 75 patients. *American Journal of Diseases of Children* 144:977-979, 1990.

Catalano, R.F., Gainey, R.R., Fleming, C.B., Haggerty, K.P., and Johnson, N.O. An experimental intervention with families of substance abusers: One-year follow-up of the Focus on Families Project. *Addiction* 94(2):241-254, 1999.

Celano, M.P., and Kaslow, N.J. Culturally competent family interventions: Review and case illustrations. *American Journal of Family Therapy* 28:217-228, 2000.

Center for Substance Abuse Treatment. *Improving Treatment for Drug-Exposed Infants*. Treatment Improvement Protocol (TIP) Series 5. HHS Publication No. (SMA) 95-3057. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1993*a*.

Center for Substance Abuse Treatment. *Pregnant, Substance-Using Women*. Treatment Improvement Protocol (TIP) Series 2. HHS Publication No. (SMA) 93-1998. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1993*b*.

Center for Substance Abuse Treatment. *Screening for Infectious Diseases Among Substance Abusers*. Treatment Improvement Protocol (TIP) Series 6. HHS Publication No. (SMA) 95-3060. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1993*c*.

Center for Substance Abuse Treatment. *State Methadone Treatment Guidelines*. Treatment Improvement Protocol (TIP) Series 1. HHS Publication No. (SMA) 93-1991. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1993*d*.

Center for Substance Abuse Treatment. *Assessment and Treatment of Cocaine-Abusing Methadone-Maintained Patients*. Treatment Improvement Protocol (TIP) Series 10. HHS Publication No. (SMA) 94-3003. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1994*a*.

Center for Substance Abuse Treatment. *Assessment and Treatment of Patients with Coexisting Mental Illness and Alcohol and Other Drug Abuse*. Treatment Improvement Protocol (TIP) Series 9. HHS Publication No. (SMA) 95-3061. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1994*b*.

Center for Substance Abuse Treatment. *Combining Substance Abuse Treatment With Intermediate Sanctions for Adults in the Criminal Justice System*. Treatment Improvement Protocol (TIP) Series 12. HHS Publication No. (SMA) 94-3004. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1994*c*.

Center for Substance Abuse Treatment. *Intensive Outpatient Treatment for Alcohol and Other Drug Abuse*. Treatment Improvement Protocol (TIP) Series 8. HHS Publication No. (SMA) 99-3306. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1994*d*.

Center for Substance Abuse Treatment. *Screening and Assessment for Alcohol and Other Drug Abuse Among Adults in the Criminal Justice System*. Treatment Improvement Protocol (TIP) Series 7. HHS Publication No. (SMA) 00-3477. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1994*e*.

Center for Substance Abuse Treatment. Simple *Screening Instruments for Outreach for Alcohol and Other Drug Abuse and Infectious Diseases*. Treatment Improvement Protocol (TIP) Series 11. HHS Publication No. (SMA) 94-2094. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1994*f*.

Center for Substance Abuse Treatment. *Alcohol and Other Drug Screening of Hospitalized Trauma Patients*. Treatment Improvement Protocol (TIP) Series 16. HHS Publication No. (SMA) 95-3041. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*a*.

Center for Substance Abuse Treatment. *Combining Alcohol and Other Drug Treatment with Diversion for Juveniles in the Justice System*. Treatment Improvement Protocol (TIP) Series 21. HHS Publication No. (SMA) 95-3051. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*b*.

Center for Substance Abuse Treatment. *Developing State Outcomes Monitoring Systems for Alcohol and Other Drug Abuse Treatment*. Treatment Improvement Protocol (TIP) Series 14. HHS Publication No. (SMA) 95-3031. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*c*.

Center for Substance Abuse Treatment. *Detoxification from Alcohol and Other Drugs*. Treatment Improvement Protocol (TIP) Series 19. HHS Publication No. (SMA) 95-3046. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*d*.

Center for Substance Abuse Treatment. *LAAM in the Treatment of Opiate Addiction*. Treatment Improvement Protocol (TIP) Series 22. HHS Publication No. (SMA) 95-3052. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*e*.

Center for Substance Abuse Treatment. *Matching Treatment to Patient Needs in Opioid Substitution Therapy*. Treatment Improvement Protocol (TIP) Series 20. HHS Publication No. (SMA) 95-3049. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*f*.

Center for Substance Abuse Treatment. *Planning for Alcohol and Other Drug Abuse Treatment for Adults in the Criminal Justice System*. Treatment Improvement Protocol (TIP) Series 17. HHS Publication No. (SMA) 95-3039. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*g*.

Center for Substance Abuse Treatment. The *Role and Current Status of Patient Placement Criteria in the Treatment of Substance Use Disorders*. Treatment Improvement Protocol (TIP) Series 13. HHS Publication No. (SMA) 95-3021. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*h*.

Center for Substance Abuse Treatment. *The Tuberculosis Epidemic: Legal and Ethical Issues for Alcohol and Other Drug Abuse Treatment Providers*. Treatment Improvement Protocol (TIP) Series 18. HHS Publication No. (SMA) 95-3047. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995*i*.

Center for Substance Abuse Treatment. *Checklist for Monitoring Alcohol and Other Drug Confidentiality Compliance*. Technical Assistance Publication Series 18. HHS Publication No. (SMA) 99-3321. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1996*a*.

Center for Substance Abuse Treatment. *Treatment Drug Courts: Integrating Substance Abuse Treatment With Legal Case Processing*. Treatment Improvement Protocol (TIP) Series 23. HHS Publication No. (SMA) 96-3113. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1996*b*.

Center for Substance Abuse Treatment. *A Guide to Substance Abuse Services for Primary Care Clinicians*. Treatment Improvement Protocol (TIP) Series 24. HHS Publication No. (SMA) 97-3139. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1997*a*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment and Domestic Violence*. Treatment Improvement Protocol (TIP) Series 25. HHS Publication No. (SMA) 97-3163. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1997*b*.

Center for Substance Abuse Treatment. *Comprehensive Case Management for Substance Abuse Treatment*. Treatment Improvement Protocol (TIP) Series 27. HHS Publication No. (SMA) 98-3222. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1998*a*.

Center for Substance Abuse Treatment. *Continuity of Offender Treatment for Substance Use Disorders From Institution to Community*. Treatment Improvement Protocol (TIP) Series 30. HHS Publication No. (SMA) 98-3245. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1998*b*.

Center for Substance Abuse Treatment. *Naltrexone and Alcoholism Treatment*. Treatment Improvement Protocol (TIP) Series 28. HHS Publication No. (SMA) 98-3206. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1998*c*.

Center for Substance Abuse Treatment. *Substance Abuse Among Older Adults*. Treatment Improvement Protocol (TIP) Series 26. HHS Publication No. (SMA) 98-3179. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1998*d*.

Center for Substance Abuse Treatment. *Substance Use Disorder Treatment for People With Physical and Cognitive Disabilities*. Treatment Improvement Protocol (TIP) Series 29. HHS Publication No. (SMA) 98-3249. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1998*e*.

Center for Substance Abuse Treatment. *Brief Interventions and Brief Therapies for Substance Abuse*. Treatment Improvement Protocol (TIP) Series 34. HHS Publication No. (SMA) 99-3353. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1999*a*.

Center for Substance Abuse Treatment. *Enhancing Motivation for Change in Substance Abuse Treatment*. Treatment Improvement Protocol (TIP) Series 35. HHS Publication No. (SMA) 99-3354. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1999*b*.

Center for Substance Abuse Treatment. *Screening and Assessing Adolescents for Substance Use Disorders*. Treatment Improvement Protocol (TIP) Series 31. HHS Publication No. (SMA) 99-3282. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1999*c*.

Center for Substance Abuse Treatment. *Treatment for Stimulant Use Disorders*. Treatment Improvement Protocol (TIP) Series 33. HHS Publication No. (SMA) 99-3296. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1999*d*.

Center for Substance Abuse Treatment. *Treatment of Adolescents With Substance Use Disorders*. Treatment Improvement Protocol (TIP) Series 32. HHS Publication No. (SMA) 99-3283. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1999*e*.

Center for Substance Abuse Treatment. *Integrating Substance Abuse Treatment and Vocational Services*. Treatment Improvement Protocol (TIP) Series 38. HHS Publication No. (SMA) 00-3470. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2000*a*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment for Persons With Child Abuse and Neglect Issues*. Treatment Improvement Protocol (TIP) Series 36. HHS Publication No. (SMA) 00-3357. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2000*b*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment for Persons With HIV/AIDS*. Treatment Improvement Protocol (TIP) Series 37. HHS Publication No. (SMA) 00-3459. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2000*c*.

Center for Substance Abuse Treatment. *A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals*. HHS Publication No. (SMA) 01-3498. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2001.

Center for Substance Abuse Treatment. *Detoxification and Substance Abuse Treatment*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *a*.

Center for Substance Abuse Treatment. *Improving Cultural Competence in Substance Abuse Treatment*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *b*.

Center for Substance Abuse Treatment. *Intensive Outpatient Treatment for Alcohol and Other Drug Abuse*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *c*.

Center for Substance Abuse Treatment. *Medication-Assisted Treatment for Opioid Addiction*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *d*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment: Addressing the Specific Needs of Women*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *e*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment and Group Therapy*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *g*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment and Men's Issues*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *h*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment and Trauma*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *i*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment for Adults in the Criminal Justice System*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *j*.

Center for Substance Abuse Treatment. *Substance Abuse Treatment for Persons with Co-Occurring Disorders*. Treatment Improvement Protocol (TIP) Series. Rockville, MD: Substance Abuse and Mental Health Services Administration, in development *k*.

Centers for Disease Control and Prevention. *HIV/AIDS Surveillance Report*. 13(1):1-41. Atlanta, GA: Centers for Disease Control and Prevention, 2002.

Cermak, T.L. *Evaluating and Treating Adult Children of Alcoholics: Volume 2, Treatment (Professional Series)*. Minneapolis: The Johnson Institute, 1991.

Cervantes, R.C., and Pena, C. Evaluating Hispanic/Latino programs: Ensuring cultural competence. In: Delgado, M., ed. *Alcohol Use/Abuse Among Latinos: Issues and Examples of Culturally Competent Services*. Binghamton, NY: Haworth Press, 1998. pp. 109-131.

Chaney, R.A., and White, W.L. Metaphors of Transformation: Feminine and Masculine. Bloomington, IL: Chestnut Health Systems, 1992.

Chang, P. Treating Asian/Pacific American addicts and their families. In: Krestan, J.-A., ed. *Bridges to Recovery: Addiction, Family Therapy, and Multicultural Treatment*. New York: Free Press, 2000. pp. 192-218.

Chien, C.P., and Yamamoto, J. Asian American and Pacific Islander patients. In: Acosta, F.X., Yamamoto, J., and Evans, L.A., eds. *Effective Psychotherapy for Low-Income and Minority Patients*. New York: Plenum Press, 1982. pp. 117-145.

Choney, S.K., Berryhill-Paapke, E., and Robbins, R.R. The acculturation of American Indians: Developing frameworks for research and practice. In: Ponterotto, J.G., Casas, J.M., Suzuki, L.A., and Alexander, C.M., eds. *Handbook of Multicultural Counseling*. Thousand Oaks, CA: Sage Publications, 1995. pp. 73-92.

Clay, R.A. SAMHSA launches buprenorphine education initiative. *SAMHSA News* 11(1):3, 2003.

Cloninger, C.R. Genetics of substance abuse. In: Galanter, M., and Kleber, H.D., eds. *Textbook of Substance Abuse Treatment*. 2d ed. Washington, DC: American Psychiatric Press, 1999. pp. 59-66.

Coco, E.L., and Courtney, L.J. A family systems approach for preventing adolescent runaway behavior. *Adolescence* 33(130):485-496, 1998.

Co-Dependents Anonymous. *Patterns and Characteristics of Codependence*. Phoenix, AZ: Co-Dependents Anonymous, 1998.

Cohen, P., Cohen, J., Kasen, S., Velez, C.N., Hartmark, C., Johnson, J., Rojas, M., Brook, J., and Streuning, E.L. An epidemiological study of disorders in late childhood and adolescence: I. Age- and gender-specific prevalence. *Journal of Child Psychology and Psychiatry* 34(6):851-867, 1993.

Collins, R.L. Family treatment of alcohol abuse: Behavioral and systems perspectives. In: Collins, R.L., Leonard, K.E., and Searles, J.S., eds. *Alcohol and the Family: Research and Clinical Perspectives*. New York: Guilford Press, 1990. pp. 285-308.

Conner, K.R., Shea, R.R., McDermott, M.P., Grolling, R., Tocco, R.V., and Baciewicz, G. The role of multifamily therapy in promoting retention in treatment of alcohol and cocaine dependence. *American Journal on Addictions* 7(1):61-73, 1998.

Cook, P.S., Petersen, R.C., and Moore, D.T. *Alcohol, Tobacco and Other Drugs May Harm the Unborn*. HHS Publication No. (ADM) 90-1711. Rockville, MD: Office of Substance Abuse Prevention, 1990.

Cooklin, A. Eliciting children's thinking in families and family therapy. *Family Process* 40(3):293-312, 2001.

Covington, S.S. Helping women recover: Creating gender-responsive treatment. In: Straussner, S.L.A., and Brown, S., eds. *Handbook of Women's Addiction Treatment: Theory and Practice*. San Francisco: Jossey Bass, 2002. pp. 52-72.

Coyhis, D. Culturally specific addiction recovery for Native Americans. In: Krestan, J., ed. *Bridges To Recovery: Addiction, Family Therapy, and Multicultural Treatment*. New York: The Free Press, 2000. pp. 77-114.

Cuadrado, M., and Lieberman, L. Traditionalism in the prevention of substance misuse among Puerto Ricans. *Substance Use and Misuse* 33(14):2737-2755, 1998.

Cunningham, P.B., and Henggeler, S.W. Engaging multiproblem families in treatment: Lessons learned throughout the development of multisystemic therapy. *Family Process* 38(3):265-281, 1999.

Cutler, D.L., and Madore, E. Community-family network therapy in a rural setting. *Community Mental Health Journal* 16(2):144-155, 1980.

De Jong, P., and Berg, I.K. I*nterviewing for Solutions*. Stamford, CT: Brooks/Cole, 1997.

De Leon, G. Therapeutic communities. In: Galanter, M., and Kleber, H.D., eds. *Textbook of Substance Abuse Treatment*. 2d ed. Washington, DC: American Psychiatric Press, 1999. pp. 447-462.

DeLoach, C., and Greer, B.G. *Adjustment to Severe Physical Disability: A Metamorphosis*. New York: McGraw Hill, 1981.

de Shazer, S. *Clues: Investigating Solutions in Brief Therapy*. New York: W.W. Norton, 1988.

de Shazer, S. *Putting Difference to Work*. New York: W.W. Norton, 1991.

de Shazer, S. Some thoughts on language use in therapy. *Contemporary Family Therapy* 19(1):133-141, 1997.

Diamond, G., and Liddle, H.A. Resolving a therapeutic impasse between parents and adolescents in multidimensional family therapy. *Journal of Consulting and Clinical Psychology* 64(3):481-488, 1996.

Diamond, G.S., Serrano, A.C., Dickey, M., and Sonis, W.A. Current status of family-based outcome and process research. *American Academy of Child and Adolescent Psychiatry Journal* 35(1):6-16, 1996.

Diaz-Guerrero, R. *Psychology of the Mexican: Culture and Personality*. Austin, TX: University of Texas Press, 1975.

Doherty, W.J., and Baird, M.A. Developmental levels in family-centered medical care. *Family Medicine* 18(3):153-156, 1986.

Douyon, R., Guzman, P., Romain, G., Ireland, S.J., Mendoza, L., Lopez-Blanco, M., and Milanes, F. Subtle neurological deficits and psychopathological findings in substance-abusing homeless and non-homeless veterans. *Journal of Neuropsychiatry & Clinical Neurosciences* 10(2):210-215, 1998.

Drake, R.E., McHugo, G.J., Clark, R.E., Teague, G.B., Xie, H., Miles, K., and Ackerson, T.H. Assertive community treatment for patients with co-occurring severe mental illness and substance use disorder: A clinical trial. *American Journal of Orthopsychiatry* 68(2):201-215, 1998.

Dufour, M., and Fuller, R.K. Alcohol in the elderly. *Annual Reviews of Medicine* 46:123-132, 1995.

Duran, E., and Duran, B. *Native American Postcolonial Psychology*. Albany, NY: State University of New York Press, 1995.

Edwards, M.E., and Steinglass, P. Family therapy treatment outcomes for alcoholism. *Journal of Marital and Family Therapy* 21(4):475-509, 1995.

Edwards, R.W. Drug and alcohol use among youth in rural communities. In: Robertson, E.B., Sloboda, Z., Boyd, G.M., Beatty, L., and Kozel, N.J., eds. *Rural Substance Abuse: State of Knowledge and Issues*. NIDA Research Monograph 168. NIH Publication No. 97-4177. Rockville, MD: National Institute on Drug Abuse, 1997. pp. 53-78.

Effective Medical Treatment of Opiate Addiction. NIH Consensus Statement 1997 Nov 17-19. 1997. http://consensus.nih.gov/cons/108/108_statement.pdf [Accessed February 11, 2004].

Epstein, E.E., and McCrady, B.S. Couple therapy in the treatment of alcohol problems. In: Gurman, A.S., and Jacobson, N.A., eds. *Clinical Handbook of Couple Therapy*. 3d ed. New York: Guilford Press, 2002.

Falicov, C.J. Mexican families. In: McGoldrick, M., Giordano, J., and Pearce, J.K., eds. *Ethnicity and Family Therapy*. 2d ed. New York: Guilford Press, 1996. pp. 169-182.

Falicov, C.J. *Latino Families in Therapy: A Guide to Multicultural Practice*. New York: Guilford Press, 1998.

Falloon, I.R.H. Behavioral family therapy. In: Gurman, A.S., and Kniskern, D.P., eds. *Handbook of Family Therapy: Vol. 2*. New York: Brunner/Mazel, 1991. pp. 65-95.

Fals-Stewart, W., O'Farrell, T.J., and Birchler, G.R. Behavioral couples therapy for male substance-abusing patients: A cost outcomes analysis. *Journal of Consulting and Clinical Psychology* 65(5):789-802, 1997.

Famularo, R., Kinscherff, R., and Fenton, T. Psychiatric diagnoses of abusive mothers: A preliminary report. *Journal of Nervous and Mental Disease* 180(10):658-661, 1992.

Famularo, R., Stone, K., Barnum, R., and Wharton, R. Alcoholism and severe child maltreatment. *American Journal of Orthopsychiatry* 56(3):481-485, 1986.

Fang, S.R., and Wark, L. Developing cross-cultural competence with traditional Chinese Americans in family therapy: Background information and the initial therapeutic contact. *Contemporary Family Therapy: An International Journal* 20(1):59-77, 1998.

Favazza, A.R., and Thompson, J.J. Social networks of alcoholics: Some early findings. *Alcoholism: Clinical and Experimental Research* 8(1):9-15, 1984.

Fields, J., and Casper, L.M. *America's Families and Living Arrangements: March 2000*. Current Population Reports, P20-537. Washington, DC: U.S. Census Bureau, 2001.

Finkelstein, N. Treatment issues for alcohol- and drug-dependent pregnant and parenting women. *Health & Social Work* 19(1):7-15, 1994.

Finkelstein, N. Using the relational model as a context for treating pregnant and parenting chemically dependent women. In: Underhill, B.L., and Finnegan, D.G., eds. *Chemical Dependency: Women at Risk*. New York: Harrington Park Press/Haworth Press, 1996. pp. 23-44.

Fisher, L., and Weihs, K.L. Can addressing family relationships improve outcomes in chronic disease? Report of the National Working Group on Family-Based Interventions in Chronic Disease. *Journal of Family Practice* 49(6):561-566, 2000.

Fishman, H.C. *Intensive Structural Therapy: Treating Families in Their Social Context*. New York: Basic Books, 1993.

Fishman, H.C., Andes, F., and Knowlton, R. Enhancing family therapy: The addition of a community resource specialist. *Journal of Marital and Family Therapy* 27(1):111-116, 2001.

Friedman, A.S., Terras, A., and Kreisher, C. Family and client characteristics as predictors of outpatient treatment outcome for adolescent drug abusers. *Journal of Substance Abuse* 7(3):345-356, 1995.

Friedman, E.H. Bowen theory and therapy. In: Gurman, A.S., and Kniskern, D.P., eds. *Handbook of Family Therapy: Vol. 2*. New York: Brunner/Mazel, 1991. pp. 134-170.

Furstenberg, F.F. The sociology of adolescence and youth in the 1990s: A critical commentary. *Journal of Marriage and the Family* 62(4):896-910, 2000.

Galanter, M. *Network Therapy for Alcohol and Drug Abuse: A New Approach in Practice*. New York: Basic Books, 1993.

Garcia-Preto, N. Latino families: An overview. In: McGoldrick, M., Giordano, J., and Pearce, J.K., eds. *Ethnicity and Family Therapy*. 2d ed. New York: Guilford Press, 1996. pp. 141-154.

Gay and Lesbian Medical Association. *Healthy People 2010 Companion Document for Lesbian, Gay, Bisexual, and Transgender (LGBT) Health*. San Francisco: Gay and Lesbian Medical Association, 2001.

Gerstein, D.R. Outcome research: Drug abuse. In: Galanter, M., and Kleber, H.D., eds. *Textbook of Substance Abuse Treatment*. 2d ed. Washington, DC: American Psychiatric Press, 1999. pp. 135-147.

Giglio, J.J., and Kaufman, E. The relationship between child and adult psychopathology in children of alcoholics. *International Journal of the Addictions* 25(3):263-290, 1990.

Gingerich, W.J., and Eisengart, S. Solution-focused brief therapy: A review of the outcome research. *Family Process* 39(4): 477-498, 2000.

Glover, N.M., Janikowski, T.P., and Benshoff, J.J. The incidence of incest histories among clients receiving substance abuse treatment. *Journal of Counseling and Development* 73(4):475-480, 1995.

Goldberg, M.E., Lex, B.W., Mello, N.K., Mendelson, J.H., and Bower, T.A. Impact of maternal alcoholism on separation of children from their mothers: Findings from a sample of incarcerated women. American *Journal of Orthopsychiatry* 66(2):228-238, 1996.

Gomberg, E.S. Older women and alcohol: Use and abuse. *Recent Developments in Alcoholism* 12(4):61-79, 1995.

Goyer, P.F., Davis, G.C., and Rapoport, J.L. Abuse of prescribed stimulant medication by a 13-year-old hyperactive boy. *Journal of the American Academy of Child Psychiatry* 18(1):170-175, 1979.

Green, R.J. Introduction to special section: Lesbian, gay, and bisexual issues in family therapy. *Journal of Marital and Family Therapy* 26(4):407-408, 2000.

Grieco, E.M. *The Native Hawaiian and Other Pacific Islander Population: 2000*. Census 2000 Brief. Washington, DC: U.S. Census Bureau, 2001.

Guiao, I.Z., and Esparza, D. Family interventions with "troubled" Mexican American teens: An extrapolation from a review of the literature. *Issues in Mental Health Nursing* 18(3):191-207, 1997.

Guthmann-Ternus, D.S. "An Analysis of Variables That Impact Treatment Outcomes of Chemically Dependent Deaf and Hard of Hearing Individuals." Ed.D. dissertation, University of Minnesota, Minneapolis, MN, 1995.

Harris-Hastick, E.F. Substance abuse issues among English-speaking Caribbean people of African ancestry. In: Straussner, S.L.A., ed. *Ethnocultural Factors in Substance Abuse Treatment*. New York: Guilford Press, 2001. pp. 52-74.

Heath, A.W., and Stanton, M.D. Family-based treatment: Stages and outcomes. In: Frances, R.J., and Miller, S.I., eds. *Clinical Textbook of Addictive Disorders*. 2d ed. New York: Guilford Press, 1998. pp. 496-520.

Henggeler, S.W., Pickrel, S.G., Brondino, M.J., and Crouch, J.L. Eliminating (almost) treatment dropout of substance abusing or dependent delinquents through home-based multisystemic therapy. *American Journal of Psychiatry* 153(3), 427-428, 1996.

Henggeler, S.W., Schoenwald, S.K., Borduin, C.M., Rowland, M.D., and Cunningham, P.B. *Multisystemic Treatment of Antisocial Behavior in Children and Adolescents*. New York: Guilford Press, 1998.

Hernandez, M. Puerto Rican families and substance abuse. In: Krestan, J.A., ed. *Bridges to Recovery: Addiction, Family Therapy, and Multicultural Treatment*. New York: The Free Press, 2000. pp. 253-283.

Hernandez, M., and McGoldrick, M. Migration and the family life cycle. In: Carter, B., and McGoldrick, M., eds. *The Expanded Family Life Cycle: Individual, Family, and Social Perspectives*. 3d ed. Boston: Allyn and Bacon, 1999. pp. 169-173.

Herrick, C.A., and Brown, H.N. Underutilization of mental health services by Asian-Americans residing in the United States. *Issues in Mental Health Nursing* 19(3):225-240, 1998.

Higgins, S.T., and Budney, A.J. Treatment of cocaine dependence through the principles of behavior analysis and behavioral pharmacology. In: Onken, L.S., Blaine, J.D., and Boren, J.J., eds. *Behavioral Treatments for Drug Abuse and Dependence*. NIDA Research Monograph 137. NIH Publication No. 93-3684. Rockville, MD: National Institute on Drug Abuse, 1993. pp. 97-121.

Higgins, S.T., Budney, A.J., Bickel, W.K., and Badger, G.J. Participation of significant others in outpatient behavioral treatment predicts greater cocaine abstinence. *American Journal of Drug and Alcohol Abuse* 20(1): 47-56, 1994.

Higgins, S.T., Budney, A.J., Bickel, W.K., Hughes, J.R., Foerg, F., and Badger, G. Achieving cocaine abstinence with a behavioral approach. *American Journal of Psychiatry* 150(5):763-769, 1993.

Hines, P.M., and Boyd-Franklin, N. African American families. In: McGoldrick, M., Pearce, J.K., and Giordano, J., eds. *Ethnicity and Family Therapy*. 2d ed. New York: Guilford Press, 1996. pp. 66-84.

Hodge, F.S., and Fredericks, L. American Indian and Alaska Native populations in the United States: An overview. In: Huff, R.M., and Kline, M.V., eds. *Promoting Health in Multicultural Populations: A Handbook for Practitioners*. Thousand Oaks, CA: Sage Publications, 1999. pp. 269-289.

Hoffmann, J.P. The effects of family structure and family relations on adolescent marijuana use. *International Journal of the Addictions* 30(10):1207-1241, 1995.

Hogue, A., Liddle, H.A., Rowe, C., Turner, R.M., Dakof, G.A., and LaPann, K. Treatment adherence and differentiation in individual versus family therapy for adolescent substance abuse. *Journal of Counseling Psychology* 45(1):104-114, 1998.

Hser, Y.I., Hoffman, V., Grella, C.E., and Anglin, M.D. A 33-year follow-up of narcotics addicts. *Archives of General Psychiatry* 58(5):503-508, 2001.

Hudak, J., Krestan, J.A., and Bepko, C. Alcohol problems and the family life cycle. In: Carter, B., and McGoldrick, M., eds. *The Expanded Family Life Cycle: Individual, Family, and Social Perspectives*. 3d ed. Boston: Allyn and Bacon, 1999. pp. 455-469.

Huff, R., and Kline, M. The Cultural Assessment Framework. In: Huff, R., and Kline, M. *Promoting Health in Multicultural Populations: A Handbook for Practitioners*. Thousand Oaks, CA: Sage Publications, 1999. pp. 481-499.

Hughes, T.L., and Eliason, M. Substance use and abuse in lesbian, gay, bisexual and transgender populations. *Journal of Primary Prevention* 22(3):263-298, 2002.

Hulnick, M.R., and Hulnick, H.R. Life's challenges: Curse or opportunity? Counseling families of persons with disabilities. *Journal of Counseling and Development* 68(2): 166-170, 1989.

Human, J., and Wasem, C. Rural mental health in America. *American Psychologist* 46(3):232-239, 1991.

Hunt, G.M., and Azrin, N.H. A community-reinforcement approach to alcoholism. *Behaviour Research and Therapy* 11(1): 91-104, 1973.

Hunt, P.L. Black clients: Implications for supervision of trainees. *Psychotherapy: Theory, Research, Practice, Training* 24(1):114-119, 1987.

Hurcom, C., Copello, A., and Orford, J. The family and alcohol: Effects of excessive drinking and conceptualizations of spouses over recent decades. *Substance Use and Misuse* 35(4):473-502, 2000.

Hurt, R.D., Finlayson, R.E., Morse, R.M., and Davis, L.J., Jr. Alcoholism in elderly persons: Medical aspects and prognosis of 216 inpatients. *Mayo Clinic Proceedings* 63(8):753-760, 1988.

Huycke, J.D. *Structural Family Therapy.* Racine, WI: SAFE Haven, 2000.

Imber-Black, E. *Families and Larger Systems: A Family Therapist's Guide Through the Labyrinth.* New York: Guilford Press, 1988.

Imber-Black, E. Multiple embedded systems. In: Mirkin, M.P., ed. *The Social and Political Contexts of Family Therapy.* Needham Heights, MA: Allyn and Bacon, 1990. pp. 3-18.

Imber-Black, E. A family-larger-system perspective. In: Gurman, A.S., and Kniskern, D.P., eds. *Handbook of Family Therapy: Vol. 2.* New York: Brunner/Mazel, 1991. pp. 583-605.

Inaba, D.S., Cohen, W.E., and Holstein, M.E. *Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs.* 3d ed. Ashland, OR: CNS Publications, 1997.

Indian Entities Recognized and Eligible to Receive Services from the United States Bureau of Indian Affairs. 67 Fed. Reg. 43,328, July 12, 2002.

Indian Health Service. *Trends in Indian Health 1998-99.* Rockville, MD: Indian Health Service, 2002.

Inouye, J. Asian American health and disease: An overview of the issues. In: Huff, R., and Kline, M. *Promoting Health in Multicultural Populations: A Handbook for Practitioners.* Thousand Oaks, CA: Sage Publications, 1999. pp. 337-356.

International Certification and Reciprocity Consortium -- Alcohol and Other Drug Abuse. *Standards for Certified AODA Counselors.* Falls Church, VA: International Certification and Reciprocity Consortium -- Alcohol and Other Drug Abuse, 2002.

Isaacson, E.B. Chemical addiction: Individuals and family systems. *Journal of Chemical Dependency Treatment* 4(1):7-27, 1991a.

Isaacson, E.B. Psychodynamics and family systems: A model for chemical addiction counseling. *Journal of Chemical Dependency Treatment* 4(1):41-60, 1991b.

Ivey, D.C., Wieling, E., and Harris, S.M. Save the young-the elderly have lived their lives: Ageism in marriage and family therapy. *Family Process* 39(2):163-175, 2000.

Jacobson, N.S., Follette, W.C., Revenstorf, D., Baucom, D.H., Hahlweg, K., and Margolin, G. Variability in outcome and clinical significance of behavioral marital therapy: A reanalysis of outcome data. *Journal of Consulting and Clinical Psychology* 52(4):497-504, 1984.

Jainchill, N., Hawke, J., and Yagelka, J. Gender, psychopathology, and patterns of homelessness among clients in shelter-based TCs. *American Journal of Drug and Alcohol Abuse* 26(4):553-567, 2000.

Johnson, J.L., and Leff, M. Children of substance abusers: Overview of research findings. *Pediatrics* 103(5 Pt 2):1085-1099, 1999.

Johnson, M.P. Patriarchal terrorism and common couple violence: Two forms of violence against women. *Journal of Marriage and the Family* 57(2):283-294, 1995.

Johnson, V.E. *I'll Quit Tomorrow.* New York: Harper and Row, 1973.

Johnson, V.E. *Intervention: How to Help Someone Who Doesn't Want Help*. A Step-by-Step Guide for Families and Friends of Chemically Dependent Persons. Minneapolis, MN: Johnson Institute Books, 1986.

Johnston, D. A series of cases of dementia presenting with PTSD symptoms in World War II combat veterans. *Journal of the American Geriatrics Society* 48(1):70-72, 2000.

Johnston, L.D., O'Malley, P.M., and Bachman, J.G. *Monitoring the Future: National Results on Adolescent Drug Use*. Overview of Key Findings, 2001. Bethesda, MD: National Institute on Drug Abuse, 2002.

Kalant, H. Pharmacological interactions of aging and alcohol. In: Gomberg, E.S.L., Hegedus, A.M., and Zucker, R.A., eds. *Alcohol Problems and Aging*. NIAAA Research Monograph No. 33. Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism, 1998. pp. 99-116.

Kao, R.S.-K., and Lam, M.L. Asian American elderly. In: Lee, E., ed. *Working with Asian Americans*. New York: Guilford Press, 1997. pp. 208-226.

Kaufman, E. Adolescent substance abusers and family therapy. In: Friedman, A.S., and Granick, S., eds. *Family Therapy For Adolescent Drug Abuse*. Lexington, MA: Lexington Books, 1990*a*. pp. 47-61.

Kaufman, E. Critical aspects of the psychodynamics of substance abuse and the evaluation of their application to a psychotherapeutic approach. *International Journal of the Addictions* 25(2A):97-114, 1990*b*.

Kaufman, E. *Psychotherapy of Addicted Persons*. New York: Guilford Press, 1994.

Kaufman, E. Family therapy: Other drugs. In: Galanter, M., and Kleber, H., eds. *Textbook of Substance Abuse Treatment*. 2d ed. Washington, DC: American Psychiatric Press, 1999. pp. 389-400.

Kaufman, E., and Borders, L. Ethnic family differences in adolescent substance use. In: Coombs, R.H., ed. *The Family Context of Adolescent Drug Use*. New York: Haworth Press, 1988. pp. 99-121.

Kaufman, E., and Kaufmann, P., eds. *Family Therapy of Drug and Alcohol Abuse*. 2d ed. Boston: Allyn and Bacon, 1992.

Kaufman, E., and Pattison, E.M. Differential methods of family therapy in the treatment of alcoholism. *Journal of Studies on Alcohol* 42(11):951-971, 1981.

Kaufmann, P., and Kaufman, E. From multiple family therapy to couples therapy. In: Kaufman, E., and Kaufmann, P., eds. *Family Therapy of Drug and Alcohol Abuse*. New York: Gardner Press, 1979. pp. 95-103.

Kaufmann, P., and Kaufman, E. From multiple family therapy to couples therapy. In: Kaufman, E., and Kaufmann, P., eds. *Family Therapy of Drug and Alcohol Abuse*. 2d ed. Boston: Allyn and Bacon, 1992*a*. pp. 85-93.

Kaufmann, P., and Kaufman, E. Multiple family therapy with drug abusers. In: Kaufman, E., and Kaufmann, P., eds. *Family Therapy of Drug and Alcohol Abuse*. 2d ed. Boston: Allyn and Bacon, 1992*b*. pp. 72-84.

Kearns, D., and Rosenthal, D. Substance abuse in rural America. In: Moore, R.M., III, ed. *The Hidden America: Social Problems in Rural America for the Twenty-First Century*. Selinsgrove, PA: Susquehanna University Press, 2001, pp. 151-178.

Kelleher, K.J., Rickert, V.I., Hardin, B.H., Pope, S.K., and Farmer, F.L. Rurality and gender: Effects on early adolescent alcohol use. *American Journal of Diseases of Children* 146(3):317-322, 1992.

Kelley, M.L., and Tseng, H. Cultural differences in child rearing: A comparison of immigrant Chinese and Caucasian American mothers. *Journal of Cross-Cultural Psychology* 23(4):444-455, 1992.

Kim, S.C. Family therapy for Asian Americans: A strategic-structural framework. *Psychotherapy* 22(2):342-348, 1985.

King, S.A., Engi, S., and Poulos, S.T. Using the Internet to assist family therapy. *British Journal of Guidance & Counselling* 26(1): 43-52, 1998.

Kirby, K.C., Marlowe, D.B., Festinger, D.S., Garvey, K.A., and LaMonaca, V. Community reinforcement training for family and significant others of drug abusers: A unilateral intervention to increase treatment entry of drug users. *Drug and Alcohol Dependence* 56(1):85-96, 1999.

Kleinman, A., and Good, B., eds. *Culture and Depression: Studies in the Anthropology and Cross-Cultural Psychiatry of Affect and Disorder.* Berkeley, CA: University of California Press, 1985.

Kline, A. Pathways into drug user treatment: The influence of gender and racial/ethnic identity. *Substance Use and Misuse* 31(3):323-342, 1996.

Krestan, J.-A. Addiction, power, and powerlessness. In: Krestan, J.-A., ed. *Bridges to Recovery: Addiction, Family Therapy, and Multicultural Treatment.* New York: Free Press, 2000. pp. 15-44.

Lambert, M.J., Okiishi, J.C., Finch, A.E., and Johnson, L.D. Outcome assessment: From conceptualization to implementation. *Professional Psychology: Research and Practice* 29(1):63-70, 1998.

LaSala, M. Lesbians, gay men, and their parents: Family therapy for coming-out crisis. *Family Process* 39(1):67-81, 2000.

Lee, E. Asian American families: An overview. In: McGoldrick, M., Giordano, J., and Pearce, J.K., eds. *Ethnicity and Family Therapy.* 2d ed. New York: Guilford Press, 1996. pp. 227-248.

Lee, R. How to talk about sex with patients who are not heterosexual. *Western Journal of Medicine* 172(6):401-402, 2000.

Leipman, M.R., Wolper, B., and Vazquez, J. An ecological approach for motivating women to accept treatment for drug dependency. In: Reed, B.G., Beschner, G.M., and Mondanaro, J., eds. *Treatment Services for Drug Dependent Women: Vol. 2.* Treatment Research Monograph Series. HHS Publication No. (ADM) 82-1219. Rockville, MD: National Institute on Drug Abuse, 1982. pp. 1-61.

Leslie, D.R., Perina, B.A., and Maqueda, M.C. Clinical issues with transgender individuals. In: Center for Substance Abuse Treatment, ed. *A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals.* Rockville, MD: Substance Abuse and Mental Health Services Administration, 2001. pp. 91-98.

Levin, J.D. *Couple and Family Therapy of Addiction.* Northvale, NJ: Jason Aronson, 1998.

Li, T.K. Pharmacogenetics of responses to alcohol and genes that influence alcohol drinking. *Journal of Studies on Alcohol* 61(1):5-12, 2000.

Liddle, H.A. Theory development in a family-based therapy for adolescent drug abuse. *Journal of Clinical Child Psychology* 28(4):521-532, 1999.

Liddle, H.A. Adolescent substance abuse derails development. *AAMFT Clinical Update* 3(3):1-8, 2001.

Liddle, H.A. *Multidimensional Family Therapy for Adolescent Cannabis Users.* Cannabis Youth Treatment (CYT) Series, Vol. 5. HHS Publication No. (SMA) 02-3660. Rockville, MD: Center for Substance Abuse Treatment, 2002.

Liddle, H.A., and Dakof, G.A. Efficacy of family therapy for drug abuse: Promising but not definitive. *Journal of Marital and Family Therapy* 21(4):511-543, 1995*a*.

Liddle, H.A., and Dakof, G.A. Family-based treatment for adolescent drug use: State of the science. In: Rahdert, E.R., and Czechowicz, D., eds. *Adolescent Drug Abuse: Clinical Assessment and Therapeutic Interventions.* NIDA Research Monograph 156. NIH Publication No. 95-3908. Rockville, MD: National Institute on Drug Abuse, 1995*b*. pp. 218-254.

Liddle, H.A., Dakof, G.A., and Diamond, G. Adolescent substance abuse: Multidimensional family therapy in action. In: Kaufman, E., and Kaufmann, P., eds. *Family Therapy of Drug and Alcohol Abuse*. 2d ed. Boston: Allyn and Bacon, 1992. pp. 120-171.

Liddle, H.A., Dakof, G.A., Parker, K., Diamond, G.S., Barrett, K., and Tejeda, M. Multidimensional family therapy for adolescent drug abuse: Results of a randomized clinical trial. *American Journal of Drug and Alcohol Abuse* 27(4):651-688, 2001.

Liddle, H.A., and Hogue, A. Multidimensional family therapy for adolescent substance abuse. In: Wagner, E.F., and Waldron, H.B., eds. *Innovations in Adolescent Substance Abuse Interventions*. New York: Pergamon, 2001. pp. 229-261.

Liepman, M.R., Silvia, L.Y., and Nirenberg, T.D. The use of family behavior loop mapping for substance abuse. *Family Relations* 38(3):282-287, 1989.

Linehan, M.M. *Cognitive-Behavioral Treatment of Borderline Personality Disorder*. New York: Guilford Press, 1993.

London, E.D., Bonson, K.R., Ernst, M., and Grant, S. Brain imaging studies of cocaine abuse: Implications for medication development. *Critical Reviews in Neurobiology* 13(3):227-242, 1999.

Lopez, F. *Confidentiality of Patient Records for Alcohol and Other Drug Treatment*. Technical Assistance Publication Series 13. HHS Publication No. (SMA) 99-3321. Rockville, MD: Center for Substance Abuse Treatment, 1994.

Madsen, W. *Mexican Americans of South Texas*. New York: Holt, Rinehart, and Winston, 1964.

Makimoto, K. Drinking patterns and drinking problems among Asian-Americans and Pacific Islanders. *Alcohol Health and Research World* 22(4):270-275, 1998.

Marín, G., and Marín, B.V. *Research with Hispanic Populations*. Newbury Park, CA: Sage Publications, 1991.

Marsh, D.T. *A Family-Focused Approach to Serious Mental Illness: Empirically Supported Interventions*. Sarasota, FL: Professional Resource Press/Professional Resource Exchange, 2001.

Marshak, L.E., and Seligman, M. *Counseling Persons with Physical Disabilities: Theoretical and Clinical Perspectives*. Austin, TX: PRO-ED, 1993.

May Lai, T.-F. Ethnocultural background and substance abuse treatment of Chinese Americans. In: Straussner, S.L.A., ed. *Ethnocultural Factors in Substance Abuse Treatment*. New York: Guilford Press, 2001. pp. 345-367.

McCollum, E.E., and Trepper, T.S. *Family Solutions for Substance Abuse: Clinical and Counseling Approaches*. Binghamton, NY: Haworth Press, 2001.

McCrady, B.S., and Epstein, E.E. Theoretical bases of family approaches to substance abuse treatment. In: Rotgers, F., and Keller, D.S., eds. *Treating Substance Abuse: Theory and Technique*. New York: Guilford Press, 1996. pp. 117-142.

McGee, G., Johnson, L., and Bell, P. Black, Beautiful, and Recovering. Center City, MN: Hazelden, 1985.

McGill, D.W., and Pearce, J.K. American families with English ancestors from the colonial era: Anglo Americans. In: McGoldrick, M., Giordano, J., and Pearce, J.K., eds. *Ethnicity and Family Therapy*. 2d ed. New York: Guilford Press, 1996. pp. 451-466.

McGoldrick, M. Normal families: An ethnic perspective. In: Walsh, F., ed. *Normal Family Processes*. New York: Guilford Press, 1982. pp. 399-424.

McGoldrick, M. *You Can Go Home Again: Reconnecting with Your Family*. New York: W.W. Norton, 1995.

McGoldrick, M., and Gerson, R. *Genograms in Family Assessment*. New York: W.W. Norton, 1985.

McLellan, A.T., Arndt, I.O., Metzger, D.S., Woody, G.E., and O'Brien, C.P. The effects of psychosocial services in substance abuse treatment. *Journal of the American Medical Association* 269(15):1953-1959, 1993.

McVinney, D. Clinical issues with bisexuals. In: Center for Substance Abuse Treatment, ed. *A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals*. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2001. pp. 87-90.

Mercado, M.M. The invisible family: Counseling Asian American substance abusers and their families. *Family Journal* 8(3):267-273, 2000.

Merikangas, K.R., and Dierker, L.C. Psychopathology among offspring of parents with substance abuse and/or anxiety disorders: A high-risk study. *Journal of Child Psychology and Psychiatry* 39(5):711-720, 1998.

Meyers, R.J., and Smith, J.E. *Clinical Guide to Alcohol Treatment: The Community Reinforcement Approach*. New York: Guilford Press, 1995.

Miller, L., Davies, M., and Greenwald, S. Religiosity and substance use and abuse among adolescents in the National Comorbidity Survey. *Journal of the American Academy of Child and Adolescent Psychiatry* 39(9):1190-1197, 2000.

Miller, W.R., Andrews, N.R., Wilbourne, P., and Bennett, M.E. A wealth of alternatives: Effective treatments for alcohol problems. In: Miller, W.R., and Heather, N., eds. *Treating Addictive Behaviors*. 2d ed. New York: Plenum Press, 1998. pp. 203-216.

Miller, W.R., Benefield, R.G., and Tonigan, J.S. Enhancing motivation for change in problem drinking: A controlled comparison of two therapist styles. *Journal of Consulting and Clinical Psychology* 61(3):455-461, 1993.

Minuchin, S. *Families and Family Therapy*. London: Tavistock, 1974.

Minuchin, S., and Fishman, H.C. *Family Therapy Techniques*. Cambridge, MA: Harvard University Press, 1981.

Moll, L.C., Rueda, R.S., Reza, R., Herrera, J., and Vasquez, L.P. Mental health services in East Los Angeles: An urban community case study. In: Miranda, M.R., ed. *Psychotherapy with the Spanish Speaking: Issues in Research and Service Delivery*. Los Angeles: University of California, Spanish Speaking Mental Health Research Center, 1976. pp. 52-65.

Moncher, M.S., Holden, G.W., and Trimble, J.E. Substance abuse among Native-American youth. *Journal of Consulting and Clinical Psychology* 58(4):408-415, 1990.

Montalvo, B., and Gutierrez, M. A perspective for the use of the cultural dimension in family therapy. *Family Therapy Collections* 6:15-32, 1983.

Moore, D., and Li, L. Substance use among rehabilitation consumers for vocational rehabilitation services. *Journal of Rehabilitation* 60(4):48-53, 1994.

Moore, D., and Polsgrove, L. Disabilities, developmental handicaps, and substance misuse: A review. International *Journal of the Addictions* 26(1):65-90, 1991.

Moos, R.H., Brennan, P.L., and Moos, B.S. Short-term processes of remission and nonremission among late-life problem drinkers. *Alcoholism: Clinical and Experimental Research* 15(6):948-955, 1991.

Motet-Grigoras, C.N., and Schuckit, M.A. Depression and substance abuse in handicapped young men. *Journal of Clinical Psychiatry* 47(5):234-237, 1986.

Mueser, K.T., Bond, G.R., Drake, R.E., and Resnick, S.G. Models of community care for severe mental illness: A review of research on case management. *Schizophrenia Bulletin* 24(1):37-74, 1998.

Muetzell, S. Are children of alcoholic mothers more psychologically damaged compared with children of mothers from the general population? *Early Child Development and Care* 109(May):159-173, 1995.

Murphy, J.M., Jellinek, M., Quinn, D., Smith, G., Poitrast, F.G., and Goshko, M. Substance abuse and serious child mistreatment: Prevalence, risk, and outcome in a court sample. *Child Abuse and Neglect* 15(3):197-211, 1991.

Myers, J.K., Weissman, M.M., Tischler, G.L., Holzer, C.E., III, Leaf, P.J., Orvaschel, H., Anthony, J.C., Boyd, J.H., Burke, J.D., Jr., Kramer, M., and Stolzman, R. Six-month prevalence of psychiatric disorders in three communities 1980 to 1982. *Archives of General Psychiatry* 41(10):959-967, 1984.

Napoliello, A.L., and Sweet, E.S. Salvador Minuchin's structural family therapy and its application to Native Americans. *Family Therapy* 19(2):155-165, 1992.

National Center on Addiction and Substance Abuse. *No Place to Hide: Substance Abuse in Mid-Size Cities and Rural America*. New York: National Center on Addiction and Substance Abuse, 2000.

National Center on Addiction and Substance Abuse. *So Help Me God: Substance Abuse, Religion and Spirituality*. New York: National Center on Addiction and Substance Abuse, 2001.

National Coalition for Homeless Veterans. *Background and Statistics*. Washington, DC: National Coalition for Homeless Veterans, 2002.

National Coalition for the Homeless. *Who is Homeless?* Washington, DC: National Coalition for the Homeless, 1999.

National Institute on Drug Abuse. *Use of Selected Drugs Among Hispanics: Mexican-Americans, Puerto Ricans, and Cuban-Americans*. Findings from the Hispanic Health and Nutrition Examination Survey. HHS Publication No. (ADM) 87-1527. Rockville, MD: National Institute on Drug Abuse, 1987.

National Institute on Drug Abuse. *Principles of Drug Addiction Treatment: A Research-Based Guide*. NIH Publication No. 00-4180. Bethesda, MD: National Institutes of Health, 1999*a*.

National Institute on Drug Abuse. *Treatment Medications*. NIDA InfoFax 13560. Rockville, MD: National Institute on Drug Abuse, 1999*b*.

National Institute on Drug Abuse. *Prescription Drugs: Abuse and Addiction*. National Institute on Drug Abuse Research Report Series. Rockville, MD: National Institute on Drug Abuse, 2001.

National Institute on Drug Abuse. *Stress and Substance Abuse: A Special Report*. Rockville, MD: National Institute on Drug Abuse, 2002.

Nelipovich, M., and Buss, E. Alcohol abuse and persons who are blind: Treatment considerations. *Alcohol Health and Research World* 13(2):129-131, 1989.

New York State Education Department—Office of Bilingual Education. *Directory of Languages*. Albany, NY: New York State Education Department, Office of Bilingual Education, 1997.

Nichols, M.P., and Schwartz, R.C. *The Essentials of Family Therapy*. Boston: Allyn and Bacon, 2001.

Noel, N.E., and McCrady, B.S. Alcohol-focused spouse involvement with behavioral marital therapy. In: O'Farrell, T.J., ed. *Treating Alcohol Problems: Marital and Family Interventions*. New York: Guilford Press, 1993. pp. 210-235.

Northey, W.F., Jr. Characteristics and clinical practices of marriage and family therapists: A national survey. *Journal of Marital and Family Therapy* 28(4):487-494, 2002.

O'Farrell, T.J. A behavioral marital therapy couples group program for alcoholics and their spouses. In: O'Farrell, T.J., ed. *Treating Alcohol Problems: Marital and Family Interventions*. New York: Guilford Press, 1993. pp. 170-209.

O'Farrell, T.J., Choquette, K.A., Cutter, H.S.G., Brown, E., Bayog, R., McCourt, W., Lowe, J., Chan, A., and Deneault, P. Cost-benefit and cost-effectiveness analyses of behavioral marital therapy with and without relapse prevention sessions for alcoholics and their spouses. *Behavior Therapy* 27(1):7-24, 1996*a*.

O'Farrell, T.J., Choquette, K.A., Cutter, H.S., Floyd, F.J., Bayog, R., Brown, E.D., Lowe, J., Chan, A., and Deneault, P. Cost-benefit and cost-effectiveness analyses of behavioral marital therapy as an addition to outpatient alcoholism treatment. *Journal of Substance Abuse* 8(2):145-166, 1996*b*.

O'Farrell, T.J., and Fals-Stewart, W. Treatment models and methods: Family models. In: McCrady, B.S., and Epstein, E.E., eds. *Addictions: A Comprehensive Guidebook*. New York: Oxford University Press, 1999. pp. 287-305.

O'Farrell, T.J., and Fals-Stewart, W. Behavioral couples therapy for alcoholism and drug abuse. *Journal of Substance Abuse Treatment* 18(1):51-54, 2000.

Office of Applied Studies. *Prevalence of Substance Use Among Racial and Ethnic Subgroups in the United States: 1991-1993*. Analytic Series: A-6. HHS Publication No. (SMA) 98-3202. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1998.

Office of Applied Studies. *Summary of Findings from the 2000 National Household Survey on Drug Abuse*. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2001*a*.

Office of Applied Studies. *Treatment Episode Data Set (TEDS): 1994-1999. National Admissions to Substance Abuse Treatment Services*. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2001*b*.

Office of Applied Studies. *National Survey of Substance Abuse Treatment Services (N-SSATS): 2000. Data on Substance Abuse Treatment Facilities*. DASIS Series: S-16. HHS Publication No. (SMA) 02-3668. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2002*a*.

Office of Applied Studies. *Prescription and Over-the-Counter Drug Abuse Admissions*. The DASIS Report. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2002*b*.

Office of Applied Studies. *Results from the 2001 National Household Survey on Drug Abuse: Vol.1. Summary of National Findings*. National Household Survey on Drug Abuse Series: H-17. HHS Publication No. (SMA) 02-3758. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2002*c*.

Office of Applied Studies. *Results from the 2001 National Household Survey on Drug Abuse: Vol. 2. Technical Appendices and Selected Data Tables*. National Household Survey on Drug Abuse Series: H-18. HHS Publication No. (SMA) 02-3759. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2002*d*.

Office of Applied Studies. *Overview of Findings from the 2002 National Survey on Drug Use and Health*. (Office of Applied Studies, NHSDA Series H-21, HHS Publication No. SMA 03-3774). Rockville, MD: Substance Abuse and Mental Health Services Administration, 2003*a*.

Office of Applied Studies. *Veterans in Substance Abuse Treatment: 1995-2000*. The DASIS Report. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2003*b*.

Ogunwole, S.U. *The American Indian and Alaska Native Population: 2000*. Census 2000 Brief. Washington, DC: U.S. Census Bureau, 2002.

Olsen, L. Services for substance abuse-affected families: The Project Connect experience. *Child and Adolescent Social Work Journal* 12(3):183-196, 1995.

Onken, L.S., Blaine, J., and Boren, J.D., eds. *Beyond the Therapeutic Alliance: Keeping the Drug-Dependent Individual in Treatment*. NIDA Research Monograph 165. NIH Publication No. 97-4142. Rockville, MD: National Institute on Drug Abuse, 1997.

Osborn, C.J. Does disease matter? Incorporating solution-focused brief therapy in alcoholism treatment. *Journal of Alcohol and Drug Education* 43(1):18-30, 1997.

Oxford, M.L., Harachi, T.W., Catalano, R.F., and Abbott, R.D. Preadolescent predictors of substance initiation: A test of both the direct and mediated effect of family social control factors on deviant peer associations and substance initiation. *American Journal of Drug and Alcohol Abuse* 27(4):599-616, 2001.

Paniagua, F.A. *Assessing and Treating Culturally Diverse Clients: A Practical Guide*. 2d ed. Thousand Oaks, CA: Sage Publications, 1998.

Pardini, D.A., Plante, T.G., Sherman, A., and Stump, J.E. Religious faith and spirituality in substance abuse recovery: Determining the mental health benefits. *Journal of Substance Abuse Treatment* 19(4):347-354, 2000.

Penn, N.E., Kar, S., Kramer, J., Skinner, J., and Zambrana, R.E. Ethnic minorities, health care systems, and behavior. *Health Psychology* 14(7):641-646, 1995.

Pequegnat, W., Bauman, L.J., Bray, J.H., DiClemente, R., DiIorio, C., Hoppe, S.K., Jemmott, L.S., Krauss, B., Miles, M., Paikoff, R., Rapkin, B., Rotheram-Borus, M.J., and Szapocznik, J. Measurement of the role of families in prevention and adaptation to HIV/AIDS. *AIDS and Behavior* 5(1):1-19, 2001.

Perez, M., and Pilsecker, C. Family therapy with spinal cord injured substance abusers. *Social Work in Health Care* 14(2):15-25, 1989.

Pfeffer, C.R., Normandin, L., and Kakuma, T. Suicidal children grow up: Relations between family psychopathology and adolescents' lifetime suicidal behavior. *Journal of Nervous and Mental Disease* 186(5):269-275, 1998.

Pinsof, W.M., Wynne, L.C., and Hambright, A.B. The outcomes of couple and family therapy: Findings, conclusions, and recommendations. *Psychotherapy: Theory, Research, Practice, Training* 33(2):321-331, 1996.

Pion, G.M., Keller, P., and McCombs, H. *Mental Health Providers in Rural and Isolated Areas: Final Report of the Ad Hoc Rural Mental Health Provider Work Group*. HHS Publication No. (SMA) 98-3166. Rockville, MD: Center for Mental Health Services, 1997.

Polk, G.W. Treatment of problem drinking behavior using solution-focused brief therapy: A single subject design. *Crisis Intervention and Time-Limited Treatment* 3(1):13-24, 1996.

Popenoe, D. The American family crisis. *National Forum* 75(3):15-19, 1995.

Prochaska, J.O., DiClemente, C.C., and Norcross, J.C. In search of how people change: Applications to addictive behaviors. *American Psychologist* 47(9):1102-1114, 1992.

Ray, W.A., Thapa, P.B., and Shorr, R.I. Medications and the older driver. *Clinics in Geriatric Medicine* 9(2):413-438, 1993.

Rehabilitation Research and Training Center on Drugs and Disability. *Substance Abuse, Disability and Vocational Rehabilitation*. Dayton, OH: Rehabilitation Research and Training Center on Drugs and Disability, Wright State University, 1996.

Reid, D.J. Addiction, African Americans, and a Christian recovery. In: Krestan, J.A., ed. *Bridges to Recovery: Addiction, Family Therapy, and Multicultural Treatment*. New York: The Free Press, 2000. pp. 145-172.

Reilly, D.M. Drug-abusing families: Intrafamilial dynamics and brief triphasic treatment. In: Kaufman, E., and Kaufmann, P., eds. *Family Therapy of Drug and Alcohol Abuse*. 2d ed. Boston: Allyn and Bacon, 1992. pp. 105-119.

Rhoades, J.A., and Chu, M.C. *Health Insurance Status of the Civilian Noninstitutionalized Population: 1999*. Rockville, MD: Agency for Healthcare Research and Quality, 2000.

Richardson, D. Structural and strategic family therapy techniques: Application to chemically dependent families. *Journal of Chemical Dependency Treatment* 4(1):29-39, 1991.

Robbins, M.S., Schwartz, S.J., and Szapocznik, J. Structural ecosystems therapy with adolescents exhibiting disruptive behavior disorders. In: Ancis, J.R., ed. *Culturally-Based Interventions: Alternative Approaches to Working with Diverse Populations and Culture-Bound Syndromes*. New York: Brunner/Routledge, in press.

Robbins, M.S. and Szapocznik, J. Brief *Strategic Family Therapy.* Juvenile Justice Bulletin. Washington, DC: Office of Juvenile Justice and Delinquency Prevention, 2000.

Robert Wood Johnson Foundation. *The Robert Wood Johnson Foundation Annual Report 1994: Cost Containment*. Princeton, NJ: Robert Wood Johnson Foundation, 1994.

Roberts, J. How to recognise a therapeutic community. *Prison Service Journal* 111:4-7, 1997.

Rose, L.R. Healing from racism. *Winds of Change* 10(2):14-17, 1995.

Rowe, D., and Grills, C. African-centered drug treatment: An alternative conceptual paradigm for drug counseling with African-American clients. *Journal of Psychoactive Drugs* 25(1):21-33, 1993.

Ryglewicz, H. Psychoeducation for clients and families: A way in, out, and through in working with people with dual disorders. *Psychosocial Rehabilitation Journal* 15(2):79-89, 1991.

Sacks, S., Sacks, J., De Leon, G., Bernhardt, A.I., and Staines, G.L. Modified therapeutic community for mentally ill chemical "abusers": Background; influences; program description; preliminary findings. *Substance Use & Misuse* 32(9):1217-1259, 1997.

Sandhu, D.S. Psychocultural profiles of Asian and Pacific Islander Americans: Implications for counseling and psychotherapy. *Journal of Multicultural Counseling and Development* 25(1):7-22, 1997.

Santisteban, D.A., Coatsworth, J.D., Perez-Vidal, A., Mitrani, V., Jean-Gilles, M., and Szapocznik, J. Brief structural/strategic family therapy with African American and Hispanic high-risk youth. *Journal of Community Psychology* 25(5):453-471, 1997.

Santisteban, D.A., Muir, J.A., Mena, M.P., Mitrani, V.B. Integrated Borderline Adolescent Family Therapy: Meeting the challenges of treating borderline adolescents. *Psychotherapy: Theory/Research/Practice/Training* 40(4), 251-264, 2003.

Santisteban, D.A., Muir-Malcolm, J.A., Mitrani, V.B., and Szapocznik, J. Integrating the study of ethnic culture and family psychology intervention science. In: Liddle, H.A., Santisteban, D.A., Levant, R.F., and Bray, J.H., eds. *Family Psychology: Science-Based Interventions*. Washington, DC: American Psychological Association, 2002. pp. 331-351.

Santisteban, D.A., Szapocznik, J., Perez-Vidal, A., Murray, E.J., Kurtines, W.M., and LaPerriere, A. Efficacy of intervention for engaging youth and families into treatment and some variables that may contribute to differential effectiveness. Journal of Family Psychology 10(1):35-44, 1996.

Sargent, A.J., III. The family: A pediatric assessment. *Journal of Pediatrics* 102(6): 973-976, 1983.

Sayger, T.V., and Heid, K.O. Counseling the impoverished rural client: Issues for family therapists. *Psychotherapy Patient* 7(1-2):161-168, 1990.

Schaschl, S., and Straw, D. Results of a model intervention program for physically impaired persons. *Alcohol Health and Research World* 13(2):150-153, 1989.

Schmidt, S.E., Liddle, H.A., and Dakof, G.A. Changes in parenting practices and adolescent drug abuse during multidimensional family therapy. *Journal of Family Psychology* 10(1):12-27, 1996.

Schuckit, M.A. *Drug and Alcohol Abuse: A Clinical Guide to Diagnosis and Treatment*. 5th ed. New York: Kluwer Academic/Plenum Publishers, 2000.

Schwab, A.J., and DiNitto, D.M. Factors related to the successful vocational rehabilitation of substance abusers. *Journal of Applied Rehabilitation Counseling* 24(3):11-20, 1993.

Sexton, T.L., and Alexander, J.F. *Functional Family Therapy*. Washington, DC: Office of Juvenile Justice and Delinquency Prevention, 2000.

Sexton, T.L., and Alexander, J.F. Functional family therapy for adolescents and their families. In: Patterson, T., ed. *Comprehensive Handbook of Psychotherapy*. New York: Wiley & Sons, 2002.

Shapiro, C. *Integrating Family-Focused Interventions into the Criminal Justice System*. New York: The Vera Institute of Justice, 1999.

Sheahan, S.L., Coons, S.J., Robbins, C.A., Martin, S.S., Hendricks, J., and Latimer, M. Psychoactive medication, alcohol use, and falls among older adults. *Journal of Behavioral Medicine* 18(2):127-140, 1995.

Sheahan, S.L., Hendricks, J., and Coons, S.J. Drug misuse among the elderly: A covert problem. *Health Values* 13(3):22-29, 1989.

Sheils, R., and Rolfe, T.J. Towards an integrated approach to a family intervention for co-occurring substance abuse and schizophrenia. *Australian & New Zealand Journal of Family Therapy* 21(2):81-87, 2000.

Sher, K.J. Psychological characteristics of children of alcoholics. *Alcohol Health and Research World* 21(3):247-254, 1997.

Shon, S.P., and Ja, D.Y. Asian families. In: McGoldrick, M., Pearce, J.K., and Giordano, J., eds. *Ethnicity and Family Therapy*. New York: Guilford Press, 1982. pp. 208-228.

Simonelli, R., and Ferrigno, B. Alcoholic recovery and the 12 Steps. *Winds of Change* 8(3):41-47, 1993.

Sisson, R.W., and Azrin, N.H. Family-member involvement to initiate and promote treatment of problem drinkers. *Journal of Behavior Therapy and Experimental Psychiatry* 17(1):15-21, 1986.

Sisson, R.W., and Azrin, N.H. Community reinforcement training for families: A method to get alcoholics into treatment. In: O'Farrell, T.J., ed. *Treating Alcohol Problems: Marital and Family Interventions*. New York: Guilford Press, 1993. pp. 34-53.

Skinner, H.A., Holt, S., Schuller, R., Roy, J., and Israel, Y. Identification of alcohol abuse using laboratory tests and a history of trauma. *Annals of Internal Medicine* 101:847-851, 1984.

Sluzki, C.E. Social networks and the elderly: Conceptual and clinical issues, and a family consultation. *Family Process* 39(3):271-284, 2000.

Spear, L. Modeling adolescent development and alcohol use in animals. *Alcohol Research and Health* 24(2):115-123, 2000.

Stack, C.B. *All Our Kin: Strategies for Survival in a Black Community*. New York: Harper and Row, 1974.

Stanton, M.D. An integrated structural/strategic approach to family therapy. *Journal of Marital and Family Therapy* 7(4):427-439, 1981*a*.

Stanton, M.D. Strategic approaches to family therapy. In: Gurman, A.S., and Kniskern, D.P., eds. *Handbook of Family Therapy: Vol. 1*. New York: Brunner/Mazel, 1981*b*. pp. 361-402.

Stanton, M.D. Breaking away: The use of strategic and Bowenian techniques in treating an alcoholic family through one member. In: Kaufman, E., ed. *Power to Change: Family Case Studies in the Treatment of Alcoholism*. New York: Gardner Press, 1984*a*. pp. 253-266.

Stanton, M.D. Fusion, compression, diversion, and the workings of paradox: A theory of therapeutic/systemic change. *Family Process* 23(2):135-167, 1984*b*.

Stanton, M.D. Coursework and self-study in the family treatment of alcohol and drug abuse: Expanding Heath and Atkinson's curriculum. *Journal of Marital and Family Therapy* 14(4):419-427, 1988.

Stanton, M.D. The role of family and significant others in the engagement and retention of drug-dependent individuals. In: Onken, L.S., Blaine, J.D., and Boren, J.J., eds. *Beyond the Therapeutic Alliance: Keeping the Drug Dependent Individual in Treatment*. NIDA Research Monograph 165. NIH Publication No. 97-4142. Rockville, MD: National Institute on Drug Abuse, 1997. pp. 157-180.

Stanton, M.D., and Shadish, W.R. Outcome, attrition, and family-couples treatment for drug abuse: A meta-analysis and review of the controlled, comparative studies. *Psychological Bulletin* 122(2):170-191, 1997.

Stanton, M.D., Todd, T.C., and Associates. The Family Therapy of Drug Abuse and Addiction. New York: Guilford Press, 1982.

Stanton, M.D., Todd, T.C., Heard, D.B., Kirschner, S., Kleiman, J.I., Mowatt, D.T., Riley, P., Scott, S.M., and Van Deusen, J.M. Heroin addiction as a family phenomenon: A new conceptual model. *American Journal of Drug and Alcohol Abuse* 5(2):125-150, 1978.

Stein, L.I., and Santos, A.B. *Assertive Community Treatment of Persons with Severe Mental Illness*. New York: W.W. Norton, 1998.

Stein, L.I., and Test, M.A. Alternative to mental hospital treatment: I. Conceptual model, treatment program, and clinical evaluation. *Archives of General Psychiatry* 37(4):392-397, 1980.

Steinglass, P. Family therapy: Alcohol. In: Galanter, M., and Kleber, H.D., eds. *Textbook of Substance Abuse Treatment*. 2d ed. Washington, DC: American Psychiatric Press, 1999. pp. 379-387.

Steinglass, P., Bennett, L.A., Wolin, S.J., and Reiss, D. *The Alcoholic Family*. New York: BasicBooks, 1987.

Stevens, M., Youells, F., Whaley, F., and Linsey, S. Drug use prevalence in a rural school-age population: The New Hampshire survey. *American Journal of Preventive Medicine* 11:105-113, 1995.

Stith, S.M., Rosen, K.H., McCollum, E.E., and Coleman, J.U. The voices of children: Preadolescent children's experiences in family therapy. *Journal of Marital and Family Therapy* 22(1):69-86, 1996.

Su, S.S., Hoffmann, J.P., Gerstein, D.R., and Johnson, R.A. The effect of home environment on adolescent substance use and depressive symptoms. *Journal of Drug Issues* 27(4):851-877, 1997.

Substance Abuse and Mental Health Services Administration. *Children's Program Kit: Supportive Education for Children of Addicted Parents*. HHS Publication No. (SMA) 03-3825. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, 2003.

Sue, D. Multicultural training. *International Journal of Intercultural Relations* 21(2): 175-193, 1997.

Sue, D.W., and Sue, D. *Counseling the Culturally Different: Theory and Practice*. 3d ed. New York: John Wiley and Sons, 1999.

Sue, S., and Zane, N. The role of culture and cultural techniques in psychotherapy: A critique and reformulation. *American Psychologist* 42(1):37-45, 1987.

Sullivan, E., Mino, M., Nelson, K., and Pope, J. *Families as a Resource in Recovery from Drug Abuse: An Evaluation of La Bodega de la Familia*. New York: Vera Institute of Justice, 2002.

Susser, E.S., Lin, S.P., and Conover, S.A. Risk factors for homelessness among patients admitted to a state mental hospital. *American Journal of Psychiatry* 148(12):1659-1664, 1991.

Sutton, C.T., and Broken Nose, M.A. American Indian families: An overview. In: McGoldrick, M., Giordano, J., and Pearce, J.K., eds. *Ethnicity and Family Therapy*. 2d ed. New York: Guilford Press, 1996. pp. 31-44.

Szapocznik, J., Hervis, O., and Schwartz, S. *Brief Strategic Family Therapy*. Rockville, MD: National Institute on Drug Abuse, in press.

Szapocznik, J., Hervis, O., and Schwartz, S. *Therapy Manuals for Drug Addiction: Brief Strategic Family Therapy for Adolescent Drug Abuse*. Bethesda, MD: National Institute on Drug Abuse, 2003. http://archives.drugabuse.gov/pdf/Manual5.pdf [Accessed February 11, 2004].

Szapocznik, J., and Kurtines, W.M. *Breakthroughs in Family Therapy with Drug Abusing and Problem Youth*. New York: Springer Publishing, 1989.

Szapocznik, J., Kurtines, W.M., Foote, F., Perez-Vidal, A., and Hervis, O. Conjoint versus one-person family therapy: Some evidence for the effectiveness of conducting family therapy through one person. *Journal of Consulting and Clinical Psychology* 51(6):889-899, 1983.

Szapocznik, J., Kurtines, W.M., Foote, F., Perez-Vidal, A., and Hervis, O. Conjoint versus one-person family therapy: Further evidence for the effectiveness of conducting family therapy through one person with drug-abusing adolescents. *Journal of Consulting and Clinical Psychology* 54(3):395-397, 1986.

Szapocznik, J., Perez-Vidal, A., Brickman, A.L., Foote, F.H., Santisteban, D., Hervis, O., and Kurtines, W.M. Engaging adolescent drug abusers and their families in treatment: A strategic structural systems approach. *Journal of Consulting and Clinical Psychology* 56(4):552-557, 1988.

Szapocznik, J., and Williams, R.A. Brief strategic family therapy: Twenty-five years of interplay among theory, research and practice in adolescent behavior problems and drug abuse. *Clinical Child and Family Psychology Review* 3(2):117-134, 2000.

Tatum, T. Rural women's recovery program and women's outreach: Serving rural Appalachian women and families in Ohio. In: Center for Substance Abuse Treatment, ed. *Treating Alcohol and Other Drug Abusers in Rural and Frontier Areas*. Technical Assistance Publication Series 17. HHS Publication No. (SMA) 99-3339. Rockville, MD: Substance Abuse and Mental Health Services Administration, 1995. pp. 13-20.

Teachman, J.D., Tedrow, L.M., and Crowder, K.D. The changing demography of America's families. *Journal of Marriage and the Family* 62(4):1234-1246, 2000.

Test, M.A. Training in community living. In: Liberman, R.P., ed. *Handbook of Psychiatric Rehabilitation*. New York: Macmillan Publishing, 1992. pp. 153-170.

Thomas, E.J., and Ager, R.D. Unilateral family therapy with spouses of uncooperative alcohol abusers. In: O'Farrell, T.J., ed. *Treating Alcohol Problems: Marital and Family Interventions*. New York: Guilford Press, 1993. pp. 3-33.

Thomas, E.J., Santa, C., Bronson, D., and Oyserman, D. Unilateral family therapy with the spouses of alcoholics. *Journal of Social Service Research* 10(2-4):145-162, 1987.

Thomas, E.J., and Yoshioka, M.R. Spouse interventive confrontations in unilateral family therapy for alcohol abuse. *Social Casework* 70:340-347, 1989.

Thomas, E.J., Yoshioka, M., Ager, R., and Adams, K.B. "Experimental outcomes of spouse intervention to reach the uncooperative alcohol abuser: A preliminary report." Paper presented at the Fifth Congress of the International Society for Bio-Medical Research on Alcoholism, Toronto, ON, June, 1990.

Toarmino, D., and Chun, C.-A. Issues and strategies in counseling Korean Americans. In: Lee, C.C., ed. *Multicultural Issues in Counseling: New Approaches to Diversity*. 2d ed. Alexandria, VA: American Counseling Association, 1997. pp. 233-254.

Trepper, T.S., Nelson, T.S., McCollum, E.E., and McAvoy, P. Improving substance abuse service delivery to Hispanic women through increased cultural competencies: A qualitative study. *Journal of Substance Abuse Treatment* 14(3):225-234, 1997.

Tung, M.P. Symbolic meanings of the body in Chinese culture and "somatization." *Culture, Medicine, and Psychiatry* 18(4):483-492, 1994.

U.S. Census Bureau. *Census 2000 PHC-T-10: Hispanic or Latino Origin for the United States, Regions, Divisions, States, and for Puerto Rico*. 2000. Washington, DC: U.S. Census Bureau, 2001*a*.

U.S. Census Bureau. *CH-3: Living Arrangements of Black Children Under 18 Years Old*. 1960 to Present. Washington, DC: U.S. Census Bureau, 2001*b*.

U.S. Census Bureau. *Statistical Abstract of the United States, 2001: The National Data Book*. Washington, DC: U.S. Census Bureau, 2001*c*.

U.S. Department of Health and Human Services. *Research Shows Needle Exchange Programs Reduce HIV Infections Without Increasing Drug Use*. Washington, DC: U.S. Department of Health and Human Services, 1998.

U.S. Department of Housing and Urban Development. *Martinez Outlines Bush Administration Strategy to Combat Chronic Homelessness: Speech to Homeless Advocates Outlines Coordinated Federal Response to Homelessness*. Washington, DC: Department of Housing and Urban Development, 2002.

Uehara, E.S., Takeuchi, D.T., and Smukler, M. Effects of combining disparate groups in the analysis of ethnic differences: Variations among Asian American mental health service consumers in level of community functioning. *American Journal of Community Psychology* 22(1):83-99, 1994.

Vaillant, G.E. *The Natural History of Alcoholism Revisited*. Cambridge: Harvard University Press, 1995.

Vanderbilt University Institute for Public Policy Studies. *Homeless Families Program Overview*. Washington, DC: Vanderbilt University Institute for Public Policy Studies, 1999.

Varley, C.K. Schizophreniform psychoses in mentally retarded adolescent girls following sexual assault. *American Journal of Psychiatry* 141(4):593-595, 1984.

Vash, C.L. *The Psychology of Disability*. New York: Springer, 1981.

Wagenfeld, M.O., Murray, J.D., Mohatt, D.F., and DeBruyn, J.C. *Mental Health and Rural America: 1980-1993. An Overview and Annotated Bibliography*. NIH Pub. No. 94-3500. Rockville, MD: Health Resources and Services Administration and National Institute of Mental Health, 1994.

Waldron, H.B. Adolescent substance abuse and family therapy outcome: A review of randomized trials. *Advances in Clinical Child Psychology* 19:199-234, 1997.

Waldron, H.B., Brody, J.L., and Slesnick, N. Integrative behavioral and family therapy for adolescent substance abuse. In: Monti, P.M., and Colby, S.M., eds. *Adolescents, Alcohol and Substance Abuse: Reaching Teens Through Brief Interventions*. New York: Guilford Press, 2000. pp. 216-243.

Walitzer, K.S. Family therapy. In: Ott, P.J., Tarter, R.E., and Ammerman, R.T., eds. *Sourcebook on Substance Abuse: Etiology, Epidemiology, Assessment, and Treatment*. Needham Heights, MA: Allyn and Bacon, 1999. pp. 337-349.

Wallace, J. A biopsychosocial model of alcoholism. *Social Casework* 70(6):325-332, 1989.

Walsh, F. Family therapy: Systems approaches to clinical practice. In: Brandell, J.R., ed. *Theory and Practice in Clinical Social Work*. New York: The Free Press, 1997. pp. 132-163.

Watzlawick, P., Weakland, J.H., and Fisch, R. *Change: Principles of Problem Formation and Problem Resolution*. New York: W.W. Norton, 1974.

Weaver, H.N. Native Americans and substance abuse. In: Straussner, S.L.A., ed. *Ethnocultural Factors in Substance Abuse Treatment*. New York: Guilford Press, 2001. pp. 77-96.

Wegscheider, S. *Another Chance: Hope and Health for the Alcoholic Family*. Palo Alto, CA: Science and Behavior Books, 1981.

Wermuth, L., and Scheidt, S. Enlisting family support in drug treatment. *Family Process* 25:25-33, 1986.

Werner, E.E. Resilient offspring of alcoholics: A longitudinal study from birth to age 18. *Journal of Studies on Alcohol* 47:34-40, 1986.

Westermeyer, J., and Neider, J. Substance disorder among 100 American Indian versus 200 other patients. *Alcoholism: Clinical and Experimental Research* 18(3):692-694, 1994.

White, J.L. Toward a black psychology. In: Jones, R.L., ed. *Black Psychology*. 2d ed. Berkeley, CA: Cobb & Henry Publishers, 1980. pp. 5-12.

White, M., and Epston, D. *Narrative Means to Therapeutic Ends*. New York: W.W. Norton, 1990.

Wilkinson, D. Family ethnicity in America. In: McAdoo, H.P., ed. *Family Ethnicity: Strength in Diversity*. Thousand Oaks, CA: Sage Publications, 1993. pp. 15-59.

Wilkinson, H. Celebrate the new family: Are "supply mums" and "supply dads" such a bad thing? *New Statesman* (August 9):21-23, 1999.

Wolin, S.J., and Wolin, S. *The Resilient Self: How Survivors of Troubled Families Rise Above Adversity*. New York: Villard Books, 1993.

Woods, J.H., and Winger, G. Current benzodiazepine issues. *Psychopharmacology* 118(2):107-115, 1995.

Wright, E.M. Substance abuse in African American communities. In: Straussner, S.L.A., ed. *Ethnocultural Factors in Substance Abuse Treatment*. New York: Guilford Press, 2001. pp. 31-51.

Yates, F.E. The evaluation of a 'co-operative counselling' alcohol service which uses family and affected others to reach and influence problem drinkers. *British Journal of Addiction* 83(11):1309-1319, 1988.

Young, T.J. Alcoholism prevention among Native-American youth. *Child Psychiatry and Human Development* 24(1):41-47, 1993.

Zeig, J.K., ed. *Ericksonian Psychotherapy*. New York: Brunner/Mazel, 1985.

Zitzow, D., and Estes, G. The heritage consistency continuum in counseling Native American children. In: *American Indian Issues in Higher Education*. Los Angeles: American Indian Studies Center, 1981. pp. 133-139.