SALIS 20th Anniversary Conference

For those who do not participate in the SALIS list, we want to make sure you are aware of the August 14-18, 1998 20th Anniversary Conference being planned for Los Angeles -- Inter-Continental Hotel. See salis.org on the web for information about discount travel to LA now available. Deadline for abstracts of presentations is May 18, and for scholarship support May 11. If you need registration forms and do not have web access, please contact SALIS Home at salis@arg.org or phone (510) 642-5208. This promises to be a big event that you won't want to miss.

Lindesmith Library Database

now on  World Wide Web

Leigh Hallingby, Librarian
Lindesmith Center

The Lindesmith Center (TLC) is a policy research institute founded in 1994 that focuses on broadening the debate on drug policy and related issues. The Center houses a Library; organizes seminars and conferences; acts as a link among scholars, government and the media; directs a grants program in Eastern Europe and the former Soviet Union; and undertakes projects on special topics such as methadone policy reform and alternatives to drug testing in the workplace. The guiding principle of the Center is harm reduction, an alternative approach to drug policy and treatment that focuses on minimizing the adverse effects of both drug use and drug prohibition. The Lindesmith Center is a project of the Open Society Institute (OSI), which is also known as the Soros Foundations.

Thanks to the Innagic Web Publishing software, it is now possible to search the holdings of The Lindesmith Center Library from the TLC website. The rapidly-growing collection of more than 3,000 documents primarily includes

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SALIS 1998 Membership List

The current membership list is on page 9 of this issue and includes all members whose dues we had received by April 20th, 1998. If you want to get your name on the addendum to this list in the next issue and continue receiving the SALIS News, we need your dues payments now. If we do not receive your payment, this will be your last issue of News, and you will no longer have access to the SALIS list-serv. Don't forget, if you are planning to attend the 1998 SALIS 20th Anniversary Conference in Los Angeles, California SALIS members receive a sizeable discount! Thank you very much for your support!
ONLINE SEARCHING UPDATE
Sheila Lacroix, Reference Librarian
Addiction Research Foundation Library
Addiction & Mental Health Services Corporation

PART I: Attention All MEDLINE Searchers
Effective 1998, (1) some substance abuse-related Medical Subject Headings (MeSH) have been replaced and (2) some are new. The changes are positive, better describing the field and less "disease" oriented. For example, although the term ALCOHOLISM is still a MeSH, there is a new MeSH, ALCOHOL-RELATED DISORDERS that better describes some of the literature for which we routinely search. Although the changes are positive, transitions always require an adjustment phase as we combine the old and new, and continue to search earlier literature.

(1) Some Terms Replaced
SUBSTANCE DEPENDENCE and SUBSTANCE ABUSE have been replaced by SUBSTANCE-RELATED DISORDERS. This means searching under SUBSTANCE-RELATED DISORDERS will retrieve citations indexed under the former two headings 1997 and earlier.

(2) Some New Terms
AMPHETAMINE-RELATED DISORDERS
COCAINE-RELATED DISORDERS
OPIOID-RELATED DISORDERS

Note: If you search under these terms, you will only pick up literature indexed in 1998. (Not necessarily just 1998 literature, as MEDLINE is behind in indexing.) When searching literature indexed prior to 1998, use, for example: (COCAINE or CRACK COCAINE) and SUBSTANCE-RELATED DISORDERS

(3) Some Unchanged Terms
SUBSTANCE ABUSE, INTRAVENOUS
ALCOHOLISM
COCAINE or CRACK COCAINE (for drug aspects)
MARIJUANA ABUSE

PART II: In Praise of Subject Headings/Descriptors
One day I was called to our CD-ROM Station to assist a library patron having trouble with a MEDLINE search. She was confused because she had retrieved citations dealing with lung disease in coal miners. Glancing through her strategy, I noticed one of the key words she was searching under was "coke". Fortunately, she had also used "cocaïne" but she was faced with an unwieldy number of results. This is an extreme example, but it makes the point. Controlled vocabulary for indexing - Subject Headings, Descriptors, or whatever the term used - was developed for a reason: to save time and to enhance the retrievability of core, focused information. I know many, including librarians, do not take advantage of this search option. It takes time and study to become familiar with the different terms used for the various databases. However, it is well worth the investment. Use of subject headings avoids the problem of international spelling differences, regional or colloquial expressions, and the many synonyms for terms. Often subject headings express a term or idea which is difficult or awkward to express in key words, such as ETOH headings AOD CONSUMPTION, AOD AVAILABILITY and AOD ASSOCIATED CONSEQUENCES. In the case of MEDLINE, subheadings are available for each MeSH. One can take advantage of such subheadings as EPIDEMIOLOGY, REHABILITATION or PREVENTION AND CONTROL to ensure a relationship between terms. There are definitely times when key words must be used in searching, either alone or in combination with subject headings, but subject headings should be included in most search strategies.

PART III: Online Searching - An Art or a Science?
Boolean logic aside, I think most would agree that online searching is not entirely a science. Like a chef, we follow the recipes but a combination of experience, trial and error, experimentation, judgement and the correct balance and combination of search terms add to the outcome. Artificial intelligence has not taken over as yet, and I wonder if, in my lifetime, we will see a seamless search engine that will retrieve a manageable, focused set of results from a variety of databases and other sources. For now, I find myself searching a combination of MEDLINE, EMBASE (more up-to-date MEDLINE), PsycLIT and ETOH, all of which use different subject headings. With advanced technology, life certainly isn't getting any easier. I think I'd rather be at home cooking....

Journal Calls for Papers
Mary Johnson, Library Director at the Missouri Institute of Mental Health Library in St. Louis, is the new editor for Behavioral & Social Sciences Librarian, published by Haworth Press. She is interested in getting article submissions from SALIS members on topics like: outreach programs; serving under-served populations; research on library services . . . the list is almost endless. She asks that you look at what you do, and think how you could share this information with others. If you have questions, or would like contributor information from B&SSL, please email Mary at johnsonm@minh.edu or call her at (314) 644-8860. The deadline for her to receive manuscripts for the first issue will be mid-June, so if you have any ideas you're already working on, please get in touch with her. Also, she asks SALIS members to please consider submitting articles for upcoming issues.
Websights

Samantha Helfert, SALIS Secretary
National Center for the Advancement of Prevention

This Websights column features a promising new website, the Substance Abuse and Mental Health Data Archive (SAMHDA), sponsored by the Substance Abuse and Mental Health Services Administration (SAMSHA) and an agency within the U.S. Department of Health and Human Services. SAMHDA (http://www.icpsr.umich.edu/SAMHDA) was established in March 1998 to provide ready access to United States substance abuse and mental health data. This site includes both a data archive and an online data analysis system.

SAMHDA is operated by the Inter-university Consortium for Political and Social Research (ICPSR) at the University of Michigan. Those familiar with data set collecting will recognize ICPSR as the organization which maintains a large social sciences data archive for its university members. Recently a number of government agencies have joined ICPSR to provide selected data sets to the public for free. The U.S. Department of Justice (www.icpsr.umich.edu/NACJD) and the National Institute on Aging (www.icpsr.umich.edu/NACDA) already sponsor topical data archives. SAMHDA is ICPSR's newest topical archive. ICPSR's interface can be cumbersome to new users, but the interface on SAMHDA has been enhanced to provide user-friendly access to data, reports, and information on the surveys.

Currently, SAMHDA contains the data sets for the National Household Survey on Drug Abuse, the Treatment Episode Data Set (TEDS), and the Monitoring the Future survey. This is just the beginning. The "Surveys" section lists the data sets planned for future inclusion in the archive. Many of these data sets, such as the Drug Abuse Warning Network (DAWN) and the Drug Abuse Treatment Outcomes Study (DATOS), have never before been made available to the public. In addition, the "What's New at SAMHDA" section lists the projected dates for these data set to be included in the archive.

For each data set, SAMHDA provides an abstract, codebooks, and links to full-text reports and related sites. The data can be downloaded with SAS or SPSS data definition files. The downloading process is simple, but can be time-consuming depending on the size of the data. (Some of these files are quite large, so check your server space before downloading!) Before linking to the pages with the downloadable data sets, ICPSR prompts users to submit their email addresses and verify that the data will be used only for responsible research purposes.

For those who need only a simple analysis of survey data, downloading an entire data set can be a cumbersome and time-consuming process. With these users in mind, SAMHDA offers a tool for online data analysis with the Survey Documentation & Analysis System (SDA). The most recent years of selected data sets are now available for online analysis. Over the next year, SAMHDA plans to add more years of data to the SDA. Other government websites, such as CDC Wonder (www.wonder.cdc.gov) and the U.S. Census Bureau (www.census.gov/main/www/access.html), have similar online data analysis systems, but I have not seen many sites which provide both the ability to download entire data sets and perform online analysis.

The SDA at SAMHDA is similar to CDC Wonder, offering the ability to perform cross-tabulations, comparisons of means, and correlations. The system is set up to be user-friendly, with an online manual and links to help information throughout the query process. But be forewarned, this is not a "one-step process" for those unfamiliar with manipulating survey data. The user has to be acquainted with the survey's variables to make queries to the system. To assist users, codebooks can be viewed online and statistical terminology is defined. To further facilitate the use of the system, SAMHDA offers a toll-free helpline. Staff at the SAMHDA project can answer questions about using the SDA and are willing to walk users through the steps of the query process.

If you are looking for a quick statistic, is SAMHDA going to be useful for you? Depending on the statistic you need, yes. If you don't have print copies of a survey's reports, links are provided to full-text reports available online. SAMHDA staff are working on enhancing the site to reach "ready reference" users. The new section, "Substance Abuse at a Glance," will include tables and statistics from the data sets, so users will not need to download entire data sets or run analysis to obtain frequently requested statistics. In the mean time, links could be made to sites which do have press releases and tables, such as the National Clearinghouse for Alcohol and Drug Information's "Research and Statistics" page (www.health.org/pubs/NHSDA/index.htm).

As stated in SAMHDA's welcome page, one of SAMHDA's goals is "to promote the sharing of these data among researchers, academics, policymakers, [and] service providers." Because of the nature of statistics, attempting to develop an interface that is effective for users with such a range of statistical knowledge is a formidable task. SAMHDA is very useful for those who know what they want and are familiar with manipulating survey data (i.e. most academics and researchers).

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Two Companion Videos

Sandy Merriman House is a women's shelter in Victoria, the capital city of British Columbia, Canada's most westerly province. Opened in 1994 the house was the idea of Janmit Rabinovitch. In her years of working with homeless people she knew many services were available but found they were used almost exclusively by men. There was no service specifically for women and there were a lot of women with no place to go; there was also no money available to build an emergency shelter. The project began by seeking out contacts among the "street exposed, at risk" women. These people spread word of the project and interested women came to a community meeting to present ideas and discuss their needs.

The two videos discussed here use much of the same film to present rather different portraits of a community project that involved the shelter’s neighbors, three levels of government, local business and trades people. In To Live In My House two related stories are presented; one is about the creation of the shelter, while the other concerns philosophical and pragmatic aspects of the employment preparation program which made the shelter a reality.

Though there was no money to build the shelter from scratch, there was money available for training. It was decided that the women who would use the shelter would also work on the renovation of an existing building. The skills they would learn would help them to find ongoing employment in skilled trades such as carpentry. Of those who originally applied for the program, twenty eight women were selected to begin, twenty one started training and thirteen graduated to the actual building construction stage. Although only one eventually went on to find full-time employment in the building trade, the program was found to be successful on several levels.

Building Futures, Rebuilding Our Lives focuses more on the process of organizing and co-ordinating the various partners. The careful selection of trades people, the majority of them women, was carried out to insure that the women would learn useful skills and not simply be used as cheap labor. So many different administrations were involved in the project that one participant commented it was "like herding cats." Also explored in the video are the various frictions that developed as the project neared completion. One problem that outsiders seemed to have was in not

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But more information is needed to make the data accessible to those not acquainted with either the surveys or statistical analysis. Features such as the online help and the toll-free helpline are a great start.

To further promote the appropriate utilization of survey data, SAMHDA could provide information on how the different surveys complement each other and the strengths and weaknesses of each survey. This information will help potential users develop a clearer picture of how the different data sets can be used for program planning and making policy decisions. Examples could be given on how the data could be applied, and how it has been used. A bibliography of existing research using the data could be added to the site. In addition, reference and links could be made to some of the new reports which describe how data can be used for planning (for example, see the National Institute on Drug Abuse's (NIDA) Assessing Drug Abuse Within and Across Communities located at www.nih.nida.gov/DEPR/Assessing/Guideindex.html).ICPSR does plan to provide training on the SAMHDA data sets at its Summer Institute in 1999. The training will be great for users who regularly perform data analysis, but a summer workshop might be impractical for users who work with data sets occasionally.

This data archive does not claim to include all surveys related to substance use but unfortunately the SAMHDA's selection criteria is not clearly defined. Currently, most of the survey data targeted for inclusion in SAMHDA are SAMHSA and NIDA surveys, so it is not clear if data sets have been included based on their quality, scope, cost, or sponsoring agency. While other data sets might not be included on SAMHDA for political or economic reasons, references and links should be made to other national surveys which are indicators of substance use. The Youth Risk Behavior Survey and the Behavioral Risk Factor Surveillance System are both important surveys that measure use on the national and state level. In addition, links should be provided to the survey data available on the Web, such as the Drug Use Forecasting data available at the National Archive of Criminal Justice Data. Giving users a broad view of the type of data being collected will help both to educate users and encourage appropriate use of data.

SAMHDA promises to be a dynamic website adding data as soon as it becomes available and adapting the site in response to users' comments. Feedback to the site is encouraged. One can also subscribe to SAMHDA's email list which will announce updates to the site including major data sets and new features added to the archive, as well as any other important new aspects of the project, such as upcoming training sessions. Email SAMHDA staff at samhda@icpsr.umich.edu to be added to the SAMHDA's email list or to forward comments about the project.

As a librarian who has been acquiring data sets, I am well-acquainted with the frustration of the data collection process and the inaccessibility of data needed for researchers and policy makers. SAMHDA is a welcome resource to ease those frustrations. Initially, I think SAMHDA will be used primarily by researchers and librarians whose clients are analyzing data but hopefully, as SAMHDA's resources are expanded, other users will be able to access and apply the data from these national surveys.

Because this column will be monitoring the changes in SAMHDA, I am interested in your feedback and comments on the utility of the site. I will keep you updated in future columns of Websights.

Send comments on Websights' features to helfert@pire.org, 301-984-6500.

NIDA Publications
All Full SALIS members will receive automatically.

Research Monographs
1. Laboratory Behavioral Studies of Vulnerability to Drug Abuse--Research Monograph 169, NIH Pub. 98-4122.

Other Publications
6. Drug Abuse Research and the Health of Women (Executive Summary), NIH Pub. 98-4290. NCADI B KD 259

Research Report Series
Periodical News

Fight Against Drugs: Newsletter of the Phare multi-country programme for the fight against drugs.
Programme Coordination Unit. Baznicas iela 25, Riga LV-1010, Latvia. Drugspcu@pcu.fad.phare.org.

The Phare Drug Programme is a multi-country programme for the fight against drugs in 13 partner countries: Albania, Bosnia and Herzegovina, Bulgaria, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Former Yugoslav Republic of Macedonia, Poland, Romania, Slovak Republic, and Slovenia. This newsletter reports on current projects and those in preparation in the field of policy development, demand reduction and supply reduction. Also in this issue is a piece on the "main arguments for and against the legalization of drugs" and a very useful contact list of names for the above countries, including e-mail addresses.


(Video Review Continues...) understanding why, after six months, the women were still in crisis and could not seem "to move on." It was simply that these formerly homeless women, most of whom had a life history that included personal assault, prostitution, or drug abuse, could not recover that quickly. Finally, for sake of the shelter, the precedence of the work schedule took priority over recovery issues.

The successful completion of the shelter was a powerful testament to the positive outcomes of the program and scenes of the early days is contrasted with the shelter's grand opening. The participants describe many other successes including the fact that they made reliable friends, learned important insights about themselves, and developed a self-confidence they never had before. They found new ways to stay clean and sober and substantially increased their skills and preparedness for a competitive labor market. The reality of the challenges faced by the women in this program are illustrated by the death of one program participant due to a drug overdose mid-way through the project. The videos examine how the participants dealt with and eventually overcame this tragedy and then honored this young woman, Sandy Merriman, in the name of the house.

To Live In My House and Building Futures, Rebuilding Our Lives are contemporary videos which have the ability to both inspire and inform. They are technically well produced programs telling an honest story which will easily hold viewers' attention. Even though conflicts among the project organizers were cited in an open manner in To Live In My House, the video might have benefitted from a closer examination of these differences. This however is dealt with more fully in Building Futures, Rebuilding Our Lives. The project's uniqueness and the videos' efforts towards reflecting the complexity in managing such an endeavor, make these programs which can be viewed from a number of perspectives. To Live In My House provides much more detail on the recovering women's lives and could be show with benefit in recovery programs. Building Futures ... concentrates more on the development and progress of the project. For this reason it is more applicable for use with community action groups and in project management activities. There is no reason that both programs could not be available as resources together an a library collection.

To Live In My House distributed by Kinetic Inc., 800-263-6910, www.kineticinc.com

************* Interested in writing a video review? Contact the column editor Valerie Mead at either (732) 445-5528 or vmead@rci.rutgers.edu


Kuhn, Cynthia, Scott Swartzwelder, and Wilkie Wilson. *Buzzed: the straight facts about the most used and abused drugs from alcohol to ecstasy.* W.W. Norton, 1998. $14.95 paperback


Government Documents & Fugitive Literature


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1998 SALIS Membership List

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Spring 1998
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SALIS News, Vol. 18, No. 1 10 Spring 1998

SALIS News
P.O. Box 9513
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