Member News

John Fay of NCADI has retired, effective March 1, 2001. Lizabeth Foster is the new NCADI Librarian. Nancy Winstanley is the new Manager and Librarian at NIAAA/CSR.

Conference Update


We have planned a very informative and exciting program for this year’s Conference. We will be covering topics such as: Overview of American Addiction Literature: 150 years; Electronic Revolution in Medical and Science Publishing; Cataloging, Inventory Control; Providing Information from a Specialist Collection; New Underage Drinking Prevention Resources; Program Evaluations; Finding and Selecting Science Based Treatment Resources in Addictions; Grant-writing for Librarians; Collecting Library Data; Internet based Virtual Clearinghouse and many more.

Spring is a beautiful time to visit Alaska, when the days are 20 hours long and the temperature will be mild at around 50 degrees. The moose will be wandering Anchorage streets and bears will be awake from hibernation. Come view the midnight sun, see you in Anchorage!

Please note that March 20 was the deadline to receive the SALIS Member Early Bird Rate $245.00 ($295.00 after March 20). April 1 is the deadline for exhibit space applications, and April 4 is the deadline for the Conference Special Rate at the Hotel Captain Cook. Payment for exhibit space is due April 20.
News From Canada

Ruth Vaughan, Librarian
Dept. of Health Library, Nova Scotia, Canada

For the last twelve years, I've managed a government library in Nova Scotia. Often it's been a frustrating, but never a boring experience, because I've had the opportunity to learn so much in a time of great change within the health care system, government and our profession.

I started my professional career with the Nova Scotia Commission on Drug Dependency in 1988. I was hired to develop a resource centre focusing on women and addictions to support the Commission's goal of improving treatment services for women throughout the province. It was a challenging opportunity, funded by Health Canada. The resource centre was part of a library, described by many "as the best additions library, east of Montreal". Technologically, the library was very well advanced. It was one of the first libraries in Canada to implement Sydney, the integrated library system from ILS. I felt very fortunate to work for Drug Dependency, because it was obvious that the library was valued and integrated with treatment, community education and prevention.

In 1989, I became Drug Dependency's librarian. I had been in my position for 6 weeks, when the Report of the Royal Commission on Health Care was released. Health care reform had arrived in Nova Scotia. By 1993, the Nova Scotia Commission on Drug Dependency no longer existed. It became Drug Dependency Services, a division of the Department of Health. And I found myself managing the Department's library as well as Drug Dependency's. It was a horrendous experience. We had done too good a job of marketing Drug Dependency's library and I was terribly busy. One afternoon that still stands out in my mind, 29 people used the library in less than 3 hours. Routine library tasks, such as overdues, fell by the wayside. I revised my thinking and decided that a book lost to the library was maybe providing someone with a strategy to stay out of treatment or prevent relapse. And if this was the case, then the library was saving the healthcare system money.

In 1995, the 2 libraries were merged into one and I entered into what I now look back on as the red tape stage of my career. I should have been happy. After all, as Librarian of the Department of Health, I had staff again, a larger budget than I had been accustomed to at Drug Dependency, the catalogue was running on the LAN and I had that office to die for with windows on 2 walls and a view. But professionally, I wasn't happy. Quitting, although tempting, wasn't an option, because my dream at library school had been to manage a health library. Looking back, the problem was that I was trying to reconcile two different workplace cultures. I had great difficulty with it. What I eventually learned was patience.

The solution, although it didn't appear to be a solution at the time, arrived in the spring of 1998. I returned from vacation to discover that the library was being downsized. It was back to being a one-person library, and the challenge was to provide a much better service with less of everything. Instead of being the manager of a very traditional print library, I became the provider of a range of electronic services and resources. Print journal subscriptions were cancelled. They were simply too expensive. I replaced them with a subscription to Health Business, Ebsco's full-text database, as well as subscriptions to several electronic journals, including Tobacco Control and the American Journal of Addictions. I can say now that the decision to cancel the print journal collection was one of the best decisions that I've made. Obviously, it wouldn't work in all libraries but it's given me freedom from some of those dreaded routine chores. The additional time was spent in refining library procedures and making greater use of available technology.

I was recently pleased to discover that my library was mentioned in Charting the Course: Suggestions for Reform from Across the Nova Scotia Public Service. One of the suggestions was to expand the Department of Health's electronic library. It's very rewarding to know that people appreciate the library. The next challenge is to implement Sydney's WE- BOPAC and a library home page.

Don't forget – April 4 is the deadline for the Conference Special Rate at the Hotel Captain Cook. The reservations number is 1-800-843-1950.
Many events have brought tobacco control and prevention activities into the media limelight in recent years – the settlement of the lawsuit between the states and the tobacco companies, the federal government’s lawsuit with the tobacco industry, the release of tobacco industry documents, and efforts at community levels to promote tobacco-free policies. The web resources available on tobacco control activities and issues are plentiful and too great for one Websights column. The focus of this column will be on state level activities related to tobacco control and prevention within the United States. The column will first provide background information on the landmark tobacco settlement and then provide examples of how the states are using the web in their tobacco control efforts.

MASTER SETTLEMENT AGREEMENT

In 1998, 11 tobacco companies executed a legal settlement, the Master Settlement Agreement (MSA), with 46 states, five commonwealths and the District of Columbia. A team of state attorneys general had sued the tobacco industry to recoup Medicaid costs for the care of persons injured by tobacco use. In the settlement, the companies agreed to pay states $206 billion over 25 years. A portion of this money was earmarked to fund the American Legacy Foundation (Legacy) (http://www.americanlegacy.org) to support a nationwide media campaign on tobacco control. In addition to the payment to the states, the settlement agreement contained significant marketing restrictions on the tobacco industry. Four other states – Florida, Minnesota, Mississippi, and Texas – settled separately from the MSA for a total of $40 billion over 25 years. Further details on the MSA are available on the web:

1. The National Association of Attorney Generals web site provides historical information and a full-text copy of the agreement at Tobacco Documents area (http://www.naag.org/tobac/index.html).

2. The Campaign for Tobacco Free Kids (TFK) web site provides a series of fact sheets on the MSA at Understanding the State Tobacco Settlement area (http://tobaccofreekids.org/research/factsheets/index8.shtml)

The decision on how to spend each state’s allocation is left up to each state legislature. States have begun receiving funds and some state legislatures have begun implementing plans for spending the money. Because the intent of the lawsuit was to recoup Medicaid costs, many states are spending the funds to address health issues. As can be imagined because of the large amount of money involved, groups of all kinds are interested in using the funds for their causes. In addition to tobacco control and health related activities, state legislatures have allocated the MSA funds for education, national resources, wellness and social services, economic development, and general state funds. Some states put the question of how the funds should be spent to ballot initiatives, and as of February of this year a few states were still undecided on how the funds were to be allocated. Depending on a states’ budgeting procedure, the state legislature may need to allocate the MSA funds each year. Because of the recent economic downturn, many state legislatures are considering using the funds to cover “budget shortfalls” this year.

A number of national organizations are tracking the states’ plans for use of the settlement funds:

1. TFK, a tobacco control advocacy group, issues regular reports that highlight the extent to which states are using the funds to address tobacco problems specifically. The latest report, Show Us the Money: An Update on the States’ Allocation of the Tobacco Settlement Dollars, was released in January 2001 and is available online (http://tobaccofreekids.org/reports/settlements/).

2. The National Governor’s Association (NGA) is tracking spending decisions and compiles an annual brief on spending initiatives of tobacco settlement revenues. The January 2001 update of State Tobacco Plans can be found at the Center for Best Practices at the NGA web site (http://www.nga.org/special/1,1260, C_MINI_WEB_SITE^D_428,00.html).

3. The Health Policy Tracking Service of the National Conference for State Legislatures (NCSL) issues an annual report tracking how state legislatures

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Anthropologists and social scientists in the field of alcohol research have been fortunate that Dwight Heath has for the last forty years steadfastly collected and disseminated cross-cultural material on drinking behaviors. During this period, he has become the leading advocate for the importance of an anthropological perspective to the field of alcohol research, and has consistently charted and emphasized the cultural differences and similarities that exist in drinking patterns, behaviors, rituals and customs. Given his scholarship and the encyclopedic knowledge that he has accumulated over the years, it is apt that he should have brought together this wide range of information within this one book.

Like a good journalist, Heath examines the place of alcohol in the world by attempting to answer the straight-forward questions of who drinks what, where, when, how and why? He devotes one chapter to each of these individual questions. For example, in chapter five: “What do people drink?” he discusses three types of alcoholic beverages - fermented (beer and wine), distilled, and fortified or mixed.

At the start of each individual chapter, he provides a brief case study describing the drinking behaviors of a particular group of people, emphasizing that aspect of drinking that is the specific focus of the chapter. These case studies are meant to assist the reader to appreciate the richness and diversity of various drinking patterns that are discussed in less detail in the main body of the chapter. For example in chapter five, he uses material from Netting’s study of the Kofyar in Northern Nigeria to illustrate the way in which the consumption of beer is so pervasive in this society that beer is nothing less than a “focus of value”. In chapter three, “Who drinks and who doesn’t?”, he uses material from Levy and Kunitz to discuss drinking practices among the Navajo Native Americans.

Although in providing this wealth of information, his overall aim as noted in the introduction is to be predominantly descriptive rather than prescriptive, focusing on what people do and what they say, his work should not be seen as solely encyclopedic. He is not merely collecting “saucy titbits” as Ernest Gellner once referred to anthropological endeavors. Instead his work over the years has been to emphasize the normal and beneficial features of drinking in opposition to the vast array of literature that has focused on the more pathological elements of drinking. In so doing he has adopted primarily a Durkheimian position on alcohol consumption which contends that if we are to understand and make sense of the abnormal the first step is to delineate the normal. By emphasizing this perspective he has highlighted what Mary Douglas has termed the distinctive anthropological perspective on drinking.

Unfortunately, however, given the fact that Heath was commissioned by the International Center for Alcohol Policies (ICAP), an industry funded organization, the importance of this perspective may become lost in the current debate on the role of the alcohol industry in funding research. In fact at the time of writing this review, a particularly vigorous and lively debate has erupted on the Kettl Bruun Society listserv debating the editorial critique in the journal Addictions of an industry funded book on the health effects of alcohol. Nevertheless in spite of the fact that the stimulus for Heath’s book was the alcohol industry, this should not take away from the important contribution of this book to the field of alcohol research. This book is a further example of Heath’s continued aim of documenting and discussing the myriad practices surrounding alcohol consumption. This type of cross-cultural approach is a vitally important counterbalance to researchers, especially those in the U.S., who view alcohol consumption solely from a North American perspective. For this reason if for no other, Heath’s book deserves to be widely read and disseminated.

Errata
In the last issue, the front page article “Linking Together in Prague” was authored by Andrea Mitchell. Note – The 2001 ELISAD meeting will be in Stockholm from October 25-27, 2001.
The National Institute on Alcohol Abuse and Alcoholism (NIAAA) is pleased to announce that the third edition of *The AOD Thesaurus: A Guide to Concepts and Terminology in Substance Abuse and Addiction* is now available. The Thesaurus originally was developed, in large part, in response to a request from SALIS for a central, authoritative source for substance abuse terminology. The first thesaurus effort, started in 1989, included input from the Center for Substance Abuse Prevention (CSAP), who helped identify terms and concepts related to prevention. Since that edition, the *AOD Thesaurus* has undergone two more revisions, each time responding to the rapidly evolving nature of the AOD field. This third edition better reflects the substance and scope of AOD research today.

Like its predecessor, this third edition is a four volume set, consisting of:

- **Volume 1.** Introduction and Overview, which contains the introduction, history, and user guide to the thesaurus. (389 pages)
- **Volume 2.** Annotated Hierarchical List, which includes an annotated listing of more than 11,000 concepts spanning the AOD field, arranged by subject area. (848 pages)
- **Volume 3.** Alphabetical Index, which features a key-word-out-of-context index leading into the hierarchy through term numbers. (406 pages)
- **Volume 4.** Annotated Alphabetical List, which provides an annotated alphabetical listing of all terms that provides hierarchical and associative relationships among terms. (896 pages)

*The AOD Thesaurus* has undergone a number of changes, which members of SALIS, who are so familiar with its format, are likely to recognize. The most important of these changes are:

- Section L/M “Social Science, Economics, and Law” is now separated into two sections. Section L is “Social Psychology and Related
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have appropriated the tobacco settlement funds. The latest report, *State Allocation of Tobacco Settlement Funds: FY 2000 and FY 2001*, was released in August 2000 and is available only in print through NCSL (http://www.ncsl.org).

In addition to the listed reports, one can track state activities and decisions related to the settlement in the news. The **Tobacco News Daily** at the Tobacco BBS web site (http://www.tobacco.org) is a comprehensive news service on tobacco-related issues, including state news. Tobacco BBS has been compiling news stories on its web site for years. Now with funding from Legacy, the service has been expanded and is delivered via e-mail. Users can select to receive news by subject area (i.e., settlement, etc.) and/or by region (i.e., national, state, or international entity). An archive of the news collection can also be searched at the web site.

It is important to note that many states receive tobacco control funds from sources other than the MSA. In addition to tobacco settlement money, states may use state funds, excise tax revenues, private funding, and federal government funding to support their tobacco control activities. In 1999, the Centers for Disease Control and Prevention (CDC) released a guidance document, *Best Practices for Comprehensive Tobacco Control Programs* (http://www.cdc.gov/tobacco/bestprac.htm), which recommends how much funds each state should allocate to develop comprehensive tobacco control programs. As a follow up to this report, CDC produced *Investment in Tobacco Control: State Highlights 2001* (http://www.cdc.gov/tobacco/statehi/statehi_2000.htm). Released in February 2001, the report places each state's investment in the context of the health and economic consequences of tobacco use in the state, including:

1. how much each State spends on tobacco control and the source of the funds,

2. state-level data on adult and youth tobacco use and health impacts and costs, and

3. each states’ investment compared with the specific funding ranges in the *Best Practices* document.

While the tobacco settlement has brought media attention to state tobacco control activities, the CDC and TFK reports reveal that many states are using little or no tobacco settlement money for tobacco control activities and many are not funding comprehensive programs. Based on research from states that have implemented comprehensive tobacco control programs, CDC has recommended that states only need to use approximately 20 to 25 percent of their settlement funds to establish effective, comprehensive programs. CDC even established a lower minimum funding level for each state, and only six states have met this minimum standard.

**STATE TOBACCO CONTROL ACTIVITIES**

States administer tobacco control activities through their state health departments. These programs implement media campaigns, school programs, and cessation initiatives, and collect data on tobacco use to monitor their efforts. Many of these programs have web sites where you can learn about their activities and access plans and reports. Examples of state tobacco control web sites include:

1. The **Arizona Tobacco Education and Prevention Program** web site (http://www.tepp.org) which includes information on its activities, local projects, and full-text reports.

2. The **California Department of Health Services: Tobacco Control Section** web site (http://www.dhs.ca.gov/tobacco/) which provides access to the state tobacco control plan, fact sheets, and an archive of survey reports and requests for proposals.

3. Oregon's **Tobacco Prevention and Education Program: Information Central** (http://www.ohd.hr.state.or.us/tobacco/welcome.htm) which is a comprehensive resource including information on the state's program, sample advertisements, model ordinances, and fact sheets.

Some states are using the web to post planning documents for public comment. For example the **Hawaii Tobacco Prevention and Control Trust Fund** (http://www.hcf-hawaii.org) recently drafted a Five-year Plan for the State and a One-year Plan for the Tobacco Prevention and Control Trust Fund. These documents were posted on its web site for review and comment.

In addition to maintaining web sites to provide pro-
grammatic information, some states are using the web to complement print, radio, and other traditional means of reaching constituents. For example, many states are implementing telephone quit lines to assist smokers wishing to quit. Some states are augmenting these telephone lines with web-based "quit lines":

1. **Trytostop.org** created by the Massachusetts Department of Public Health has recently implemented a new "quit wizard" that helps smokers develop individualized quit plans.

2. The New Jersey Department of Health and Senior Services (NJ DHSS) sponsors the New Jersey QuitNet (http://www.njquitnet.org/qn_main.htm) which provides many resources for smokers, including a peer support forum, a directory of local programs, and a guide to smoking cessation drugs.

Other states are using the web as part of their media campaigns to educate children about the dangers and consequences of tobacco use. For example, the Texas Department of Health developed the Duck web site (http://www.ducktexas.com) to complement its Tobacco is Foul campaign. The site is graphic-intensive, interactive, and includes examples of the campaign's television and radio spots.

Some states are implementing youth advocacy initiatives to involve teens in the policy-making process and to question the tobacco industry's marketing strategies. Many of these initiatives are maintaining complementary web sites to take advantage of the web's appeal to teens and the web's ability to create communities. These sites often include excerpts from the tobacco industry documents, examples of tobacco advertisements, and information on getting involved in the initiative. Florida supports a number of web sites for teens including the Whole Truth (http://www.wholetruth.com), Students Working Against Tobacco (http://www.wholetruth.com/asp/swat/fs_start.asp), and Tools and Tactics for Fighting Big Tobacco (http://www.ftcc.fsu.edu/teensite/main-page.cfm). The following are just a few of the other examples:

1. **REBEL** (Reaching Everyone By Exposing Lies) developed by the NJ DHSS developed web site (http://www.njrebel.com) to extend its campaign's reach;

2. **Target Market** (http://www.tmvoice.com/), the web site for Minnesota's teen advocacy campaign; and

3. **Question It** (http://www.questionit.com/), maintained by the Partnership for a Healthy Mississippi.

I have not been able to find one web site that compiles all the state tobacco control web sites. To find web resources on your state's tobacco control activities, look for your state's government web site on public health or health services. The **Association of State and Territorial Health Officials (ASTHO)** provides a compilation of links to state health departments (http://www.astho.org/state.html). Keep in mind that not all states have the resources to maintain comprehensive web sites for their tobacco control programs. In some cases, the states are posting tobacco-related resources on the state's department of health web site.

ASTHO's Tobacco Control Project maintains a web page that updates state activities including, the Tobacco Free Press. This newsletter on state tobacco control activities focuses on eliminating disparities, youth prevention, cessation, and environmental tobacco smoke. The newsletter also highlights new publications and upcoming conferences. Current and past issues are available online (http://www.astho.org/prevention/tobacco.html#newsletters).

The ease of using the web to keep updated on tobacco activities across the country varies from state-to-state, but most states are distributing key resources through the web. Further many states are going beyond using the web as a vehicle to disseminate information. Many are using web technology to create health communication vehicles to change attitudes and behavior related to tobacco use.
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Concepts” and Section M is “Social Sciences, Economics and Law.”

- Terminology in Section J, “Prevention, Treatment, and Maintenance. Health Care,” has been restructured.
- Commonly used scientific terms were changed to more familiar terms. For example, “neoplastic disease” was changed to “cancer;” and “gestation” was changed to “pregnancy.”
- Historical information for descriptors was pulled out from the scope notes (SN) and placed into separate history notes (HN).
- The total number of descriptors increased to 11,393 (an increase of 1,008 new terms) and lead-in terms increased to 6,675 (an increase of 1,108). In addition, the number of designated ETOH descriptors is now 5,013 vs. 3,485 in the second edition.

As always, NIAAA welcomes feedback from SALIS on this latest edition. Your input is vital for further honing a product that truly represents the addiction field. We especially would like to hear how SALIS librarians use the thesaurus and hope to develop an article on this topic for a future SALIS newsletter.

The Third Edition of the AOD Thesaurus is available from NIAAA for $100.00 plus shipping and handling. Shipping and handling costs are as follows: Continental US, add $7.00; Alaska, Hawaii, and Puerto Rico add $15.00; Canada add $18.00; and all other countries add $32.00. An order form and additional information can be found at www.niaaa.nih.gov/publication/thes

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New From NIAAA


All full SALIS members will receive these documents.


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**Periodical News**

*Journal of Social Work in the Addictions* Vol. 1 No. 1 has just been published by Haworth Press. Edited by Shulamith Lala Ashenberg Strausser, Professor of Social Work at New York University, this premier issue includes seven articles, covering topics on the role of social workers in addictions, juvenile violence, women and welfare reform, spirituality, natural recovery, and comorbidity. In addition there is a section called “Special Topics” followed by two book reviews, and a very moving poem by Elizabeth Zelvin entitled, “Secrets of the Therapeutic Relationship”. According to the editor, “this journal aims to cover the broad range of social work’s involvement in the addictions field—from primary prevention to treatment to social policy, from program administration to research to education and training” with a “bottom line purpose” of social work practice. Subscription at the library rate of $85.00, includes electronic access to all persons at the same “geographically distinct” address. The journal will be triennial in 2001, moving to a quarterly in 2002. For a free sample copy, contact Haworth Press www.haworthpress.com.
Deadline for next issue of
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