



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

February 6, 2008

National Institute of Drug Abuse
Attn: Draft Strategic Plan
6001 Executive Blvd.
Suite 5213, MSC 9561
Bethesda, MD 20892-9561

Dear Colleagues:

The American Psychological Association is pleased to have the opportunity to comment on the draft version of the National Institute on Drug Abuse Strategic Plan. With over 148,000 members, the APA is the world's largest organization of scientific and professional psychologists. The comments presented here are an integration of the views of a wide range of individual members and governance groups of APA.

To begin, APA commends NIDA for the broad and ambitious scope of the draft plan. The four major goal areas (Prevention; Treatment; HIV/AIDS; and Cross-cutting Priorities) comprise a vision that broadly surveys a number of important domains of substance abuse research in the context of current scientific understanding. The goals outlined provide a useful framework for advancing and integrating efforts across many of the research and practice areas that contribute to our understanding of the prevention, etiology, and treatment of substance use disorders. Especially within a tight budget environment, it is encouraging to see NIDA maintain its commitment to a rich and varied portfolio of basic, clinical, and services research and to the dissemination and implementation of research findings for the benefit of all communities.

APA also appreciates the opportunity to provide comment on the draft strategic plan but is concerned that the National Advisory Council on Drug Abuse (or some other body of external independent scientific expertise) was not explicitly involved in the development of the draft. It may be that NIDA would benefit from an examination of the process used by the National Institute on Alcohol Abuse and Alcoholism which constructed its draft strategic plan in active consultation with its Extramural Advisory Board prior to releasing it for public comment.

In seeking input on the draft, the majority of comments APA received from its scientific leadership related to the goal area of Prevention. A number of

independent comments suggested that this section of the plan could benefit from greater integration across the stratification from basic to community level research. While the Prevention chapter addresses important research themes including the continued collection of epidemiologic data; analysis of vulnerability/protective factors; and efficacy testing of promising interventions, much of the plan is described in reductionist terms suggesting that genetic, biological, electrophysiological, and neuroimaging approaches will dominate NIDA's prevention research portfolio.

APA is concerned that an overemphasis on these aspects of prevention science may come at the expense of, for example, research on mechanisms of action of successful interventions at the family, school, and community level. Further, such a biologically driven approach may inadvertently lead readers of the draft to underestimate NIDA's rich appreciation of the importance of psychosocial factors in prevention research. APA hopes that the final draft will include a greater emphasis on research in the behavioral and social sciences that are demonstrating such promise for understanding the nature and development of the cognitive, affective, motivational, and social processes in youth who are the principal targets of prevention interventions.

APA is concerned about whether the draft strategic plan adequately reflects the "state of the science" with respect to prevention research. NIDA cites productive collaborations with its sister institutes NIAAA and NIMH in a number of important research areas. However, APA believes NIDA would also benefit from near-term collaboration with the National Academies in revising its draft to expand the scope of translation/implementation research in prevention. APA is aware that the Institute of Medicine is nearing completion of a report on Prevention of Mental Disorders and Substance Abuse in Children and Young Adults: Research Advances and Promising Interventions. An examination of just school-based prevention research reveals a host of issues related to understanding the "fidelity versus adaptation" debate as well as the need to understand how practitioners adopt the best matched empirically based prevention programs and effectively implement them in their local populations.

While school-based interventions have been shown to be effective whether focused on the organizational structure of the school and classroom, focused on large populations of students (universal interventions), or focused on targeted subpopulations of students (selected or indicated interventions), many research questions remain unanswered. Where studies have demonstrated promising but small effects of unknown duration they require independent replication with longer longitudinal follow-up. Studies that have demonstrated stronger effects need to be tested for their ability to generalize across cultural groups, understudied populations and contexts. Complex multi-component interventions should be studied with dismantling and factorial designs that would provide insight into the mechanisms that mediate positive outcomes. Research on

targeted interventions would benefit from the inclusion of active controls and research on cost-effectiveness would inform policy-making decisions.

NIDA has demonstrated remarkable success in developing partnerships for translating treatment research into practice via the Clinical Trials Network and via its blending initiatives with SAMHSA and APA encourages NIDA to expand its description of similar partnerships for the translation of prevention research. APA appreciates NIDA's sponsorship of its Prevention Network of research centers but believes that the final draft of the strategic plan should place greater emphasis on systems integration and translational prevention research. Successfully translating science to practice will involve systems integration across developmental stages and across levels of care. Translation and dissemination research examining the adoption, maintenance and sustainability of empirically-validated interventions in real world settings on a large scale will be critical if the results derived from smaller scale studies are to benefit individuals, families, schools and their communities.

Further, prevention research is now ripe for innovation and a revised draft should highlight possible areas of emphasis. For example, would NIDA promote blending initiatives that combine behavioral ecological models of classroom management with social and emotional learning? How will NIDA's prevention research portfolio accommodate variations in the knowledge, attitudes, and coping abilities of teachers? Perhaps combinations of teacher skill training and interventions that include social and emotional learning would have synergistic effects.

None of the above comments are meant to discourage the critical developmental work NIDA conducts related to understanding the basic neural circuitry underlying reward, decision-making, risk-taking, emotional control, desires, motivation, inhibition, and other executive functions. Continued emphasis must be placed on this essential basic research with equal emphasis on the promise of research into the development of curricula and training programs that promote personal self-regulation and executive function skills. NIDA's support of the Study of Normal Brain Development is to be commended and should contribute to the understanding of risk and protective factors for drug abuse. Such longitudinal studies are critical given the significant gaps in our collective understanding of what normal brain development looks like. Further, they will provide a more refined developmental emphasis on substance abuse by allowing comparisons of addictive processes to current and future knowledge about normal processes. In fact, developmental research in general is so crucial to NIDA's overall research portfolio, that it may be better represented as a distinct "goal area" rather than being subsumed under Prevention as in the current draft.

Finally, APA received a few additional comments on the draft worth noting including concerns that it overstates the current benefits of extant knowledge (e.g., imaging) to understand the processes underlying drug use and treatment;

that the definition of addiction as a "chronic-relapsing brain disease" is not a definition that has full acceptance in the field and may serve to minimize the role of other important processes in the development and maintenance of addictive behaviors and disorders; that understanding ethnic differences in substance use/abuse patterns is equally important to the examination of gender differences; that in addition to treatment efforts aimed at co-occurring disorders, NIDA should consider special emphasis on developing and refining treatment approaches for addiction to multiple substances; and that lesbian, gay, bisexual, and transgender populations might be populations for which tailored preventive approaches are indicated in addition to the target audiences identified explicitly in the draft.

APA hopes that NIDA finds these comments helpful. Please contact us if you would like further information. APA stands ready to work with NIDA and the behavioral and social science communities to encourage rigorous and innovative multidisciplinary research that will contribute to understanding the determinants of substance use disorders and to developing more effective methods for preventing and treating substance use disorders.

Sincerely,

A handwritten signature in cursive script that reads "Steven J. Breckler".

Steven J. Breckler
Executive Director for Science

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