ADDICTION: A PREVENTABLE AND TREATABLE DISEASE
Dear Friends:

Addiction is a complex and often chronic disease of the brain. Since there is no biomarker for addiction yet, we recognize it by the compulsive behaviors that people with the disease exhibit. Most people think of addiction as involving tobacco, alcohol and illicit and prescription drugs, but as the science of addiction has matured, so has our understanding of the disease. Pathological gambling, for example, is now considered another expression of addiction and a growing body of research suggests that other compulsive behaviors such as those linked to eating or sex also may reflect the disease.

As with other diseases, there are risk factors for developing addiction which include a genetic inheritance and a broad range of biological, psychological and environmental influences.

Today, approximately 40 million Americans age 12 and over meet the medical criteria for addiction involving just nicotine, alcohol or other drugs. That’s more than the number of people with heart conditions (27 million), diabetes (26 million) or cancer (13 million). Despite the fact that effective behavioral and pharmaceutical treatments are available, only 11 percent of people in need of treatment for addiction involving alcohol or other drugs receive any form of care, and most who do receive help do not receive evidence-based medical treatment.

An additional 80 million people engage in risky use of addictive substances in ways that can threaten public health and safety, but don’t meet the medical criteria for the disease. Together, risky substance use and addiction are responsible for at least 579,000 of the 2.5 million deaths each year in the U.S., and contribute to more than 70 other diseases requiring medical attention.

CASAColumbia is committed to understanding the science of addiction and its implications for public education, health care and public policy.

We will go where the evidence leads us.

That means:
—Closing the enormous gap between what we know about the disease and what we actually do to prevent and treat it by moving the way we address these health conditions into routine health care and medical practice.
—Searching for and propagating proven means of effectively preventing, treating and managing this debilitating disease.
—and beginning a serious, sustained quest to find a cure.

We have achieved a great deal in the past 20 years under the leadership of CASAColumbia's Founder and Chairman Emeritus Joseph A. Califano, Jr. There remains much more work to do and we need everyone’s help.

There is a passage from Robert Louis Stevenson that—in my opinion—sums up my reasons for taking on the role as CASAColumbia’s chairman:

“A person is a success who has lived well, laughed often and loved much; who has gained the respect of intelligent people and the love of children; who improves the world; who looks for the best in others and gives the best that they can.”

Addiction is a preventable, treatable and perhaps curable disease. Together we must summon the will to make real, lasting change in the way we confront it. I hope you will join us on this important and exciting journey to give the best that we can to improve the world.

Jeffrey B. Lane

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JOIN US IN OUR WORK.
We aim to inform Americans of the economic and social costs of substance use and addiction and its impact on their lives; assess what works in prevention, treatment and disease management; and encourage every individual and institution to take responsibility to reduce these health problems. We strive to provide policy makers, health care providers and individuals with the tools they need to succeed and to remove the stigma of addiction, replacing shame and despair with hope.

THE ONLY SHAME IN THE FIGHT AGAINST ADDICTION IS INDIFFERENCE.

The National Center on Addiction and Substance Abuse at Columbia University (CASAColumbia) is a 501(c)(3) corporation and depends on contributions to support its work. All contributions are tax-deductible to the fullest extent of the law and can be sent to CASAColumbia in the envelope enclosed in this report.

©The National Center on Addiction and Substance Abuse at Columbia University 2013. All rights reserved.

All facts, substance use and addiction statistics in this annual report come from CASAColumbia research unless otherwise noted.
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Addiction is a complex and often chronic disease of the brain. Since there is no biomarker for addiction yet, we recognize it by the compulsive behaviors that people with the disease exhibit. Most people think of addiction as involving tobacco, alcohol and illicit and prescription drugs, but as the science of addiction has matured, so has our understanding of the disease. Pathological gambling, for example, is now considered another expression of addiction and a growing body of research suggests that other compulsive behaviors such as those linked to eating or sex also may reflect the disease.

As with other diseases, there are risk factors for developing addiction which include a genetic inheritance and a broad range of biological, psychological and environmental influences. Today, approximately 40 million Americans age 12 and over meet the medical criteria for addiction involving just nicotine, alcohol or other drugs. That’s more than the number of people with heart conditions (27 million), diabetes (26 million) or cancer (19 million).

Despite the fact that effective behavioral and pharmaceutical treatments are available, only 11 percent of people in need of treatment for addiction involving alcohol or other drugs receive any form of care, and most who do receive help do not receive evidence-based medical treatment.

An additional 80 million people engage in risky use of addictive substances in ways that can threaten public health and safety, but don’t meet the medical criteria for the disease. Together, risky substance use and addiction are responsible for at least 579,000 of the 2.5 million deaths each year in the U.S. and contribute to more than 70 other diseases requiring medical attention.

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Addiction is a serious and complex brain disease that affects approximately 16 percent of the United States population. Today, 40 million Americans are addicted to nicotine, alcohol or other drugs, and another 80 million people are considered risky substance users—meaning they use substances in ways that threaten their health and safety, as well as the health and safety of others. Together, addiction and risky substance use constitute the largest preventable and most costly public health problem we face.

The scope of CASAColumbia’s work touches all Americans, from health care professionals, to policy makers, to parents and families alike.

In 2012, CASAColumbia released three key reports.

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**ADDITION MEDICINE: CLOSING THE GAP BETWEEN SCIENCE AND PRACTICE** (June 2012)

This landmark report examined the science of addiction—a complex disease that involves changes in the structure and function of the brain—and the profound gap between what we know about the disease and how to prevent and treat it versus current health and medical practice. This five-year national study revealed that addiction treatment is largely disconnected from mainstream medical practice. While a wide range of evidence-based screening, intervention, treatment and disease management tools and practices exist, they rarely are employed. The report exposed the fact that most medical professionals who should be providing treatment are not sufficiently trained to diagnose or treat addiction, and most of those providing addiction treatment are not medical professionals and are not equipped with the knowledge, skills or credentials necessary to provide the full range of evidence-based services, including pharmaceutical and psychosocial therapies and other medical care.

**NATIONAL SURVEY OF AMERICAN ATTITUDES ON SUBSTANCE ABUSE XVII: TEENS** (August 2012)

CASAColumbia’s 17th annual back-to-school survey found that 86 percent of American high school students say that some classmates are drugging, drinking and smoking during the school day and almost half know a student who sells drugs at their school. The 2012 survey took a deeper dive into the world of teen social networking and found that three-quarters of 12- to 17-year-olds say that seeing pictures of teens partaking with alcohol or marijuana on a social-networking site encourages others to want to party like that. CASAColumbia’s annual teen survey helps get the word out that parents are the most powerful influence over teens’ decisions whether or not to use substances.

**THE IMPORTANCE OF FAMILY DINNERS VIII** (September 2012)

Released in conjunction with CASAColumbia’s Family Day—A Day to Eat Dinner with Your Children™, this paper noted that compared to teens who have infrequent family dinners (fewer than three per week), teens who have frequent family dinners (five to seven per week) are almost one and a half times likelier to say they have an excellent relationship with their mother and one and a half times likelier to say they have an excellent relationship with their father. Researchers found that teens who have excellent relationships with their mom and dad reported less use of drugs, alcohol or tobacco.

**POLICY AND PRACTICE DIVISION**

CASAColumbia’s Policy Research and Analysis division is responsible for assessing the impact of substance use on American systems and populations; examining the links between substance use, addiction and other health and social problems; and translating scientific knowledge about substance use and addiction into policy and practice.

Projects underway include:

**WHITE PAPER ON ADDICTION SCIENCE**

A growing body of evidence supports the understanding that addiction is a primary disease that can manifest in many ways, some of which are substance-related (tobacco, alcohol and other drugs) and some of which may involve other compulsive behaviors (eating, gambling and sex). CASAColumbia will document—for each of these potential manifestations—the nature and extent of the neurological and social science evidence for common changes in the structure and function of the brain that define addiction and of corresponding genetic, biological, psychological and environmental determinates. This white paper will present recommendations aimed at increasing public understanding of the disease and at translating this knowledge into health care practice.

**PRACTICE GUIDES AND TOOLS**

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COLLABORATORS

In order to more effectively move knowledge about addiction and how to effectively prevent, treat and manage it into policy and practice, staff of the division are working with a broad range of partners including Legacy®, Boston Children’s Hospital, the American Board of Addiction Medicine, the National Governors’ Association, The Fix and Physicians for Responsible Opioid Prescribing.

HEALTH AND TREATMENT RESEARCH AND ANALYSIS DIVISION

CASAColumbia's health and treatment researchers work to realign prevention programs and treatment services to agree with a philosophy that sees addiction as a preventable, often chronic illness requiring integration of care across many systems. CASAColumbia works with state and agencies to develop and evaluate programs that better address the chronic care needs of addicted individuals while containing costs. The end goal is to present a model for federal health care efforts in the current fiscal environment.

JOURNAL ARTICLES AND COMMENTARIES

CASAColumbia has published multiple articles and commentaries addressing the impact of addiction and the cost of addiction, including in the Journal of Substance Abuse Treatment and the journal Addiction Medicine. Topics include, but are not limited to: risky drinking, screening instruments, costs of addiction, public attitudes about addiction and language used to describe risky use and addiction.

NIDA K22 GRANT—INTEGRATED FAMILY-BASED TREATMENT OF CO-OCCURRING ADOLESCENT SUBSTANCE USE DISORDERS (SUD) AND ADHD

Aaron Hogue, PhD, an associate director of the Health and Treatment Research and Analysis Division, whose expertise is in family-based treatment for adolescent SUDs, continues his training under a National Institute on Drug Abuse K22 grant that includes components involving behavioral intervention science, psychopharmacology and neuro-imaging research related to adolescent substance use which will culminate in the development of a family-based treatment model specifically designed to treat adolescent substance users with co-occurring attention deficit hyperactivity disorder (ADHD).

Funded by the National Institute on Drug Abuse.

CASALEAP™ (LEARNING EFFECTIVE APPROACHES TO PREVENTION)

The first study to look at long-term outcomes of evidence-based practices for adolescent substance use in real-world settings and also the first to evaluate community therapist practices in routine settings using observational methods. CASAColumbia researchers are looking at three routine clinical settings for treatment benefits and cost effectiveness for adolescent substance misuse and related mental health problems: hospital-based behavioral health clinics, private addiction counseling clinics and community mental health centers.

Funded by the National Institute on Drug Abuse.

CASAHOPE™ (HOSPITAL OPPORTUNITIES PROGRAM EVALUATION) is an exhaustive evaluation of a new program funded by New York State and City to provide supportive housing to chronically homeless individuals with ongoing substance use, with the goal of promoting the stability needed to allow them to address their substance use and other social needs. The CASAHOPE evaluation will document best practices, evaluate one-year outcomes and conduct a comprehensive cost-benefit analysis to see whether supportive housing reduces costs related to extra emergency services used by homeless clients.

Funded by the New York City Office of Alcoholism and Substance Abuse.

CASACARE™ (CHRONIC CARE APPROACHES TO RECOVERY) is a joint program with the New York State Office on Alcoholism and Substance Abuse Services (OASAS) that provides care management for the most costly users of Medicaid addiction treatment. The CASAColumbia team is advising on strategies for improving care that derive from science (such as evidence-based practices) and business strategies (such as Continuous Quality Improvement programs). The project utilizes CASAColumbia's capacity to apply sophisticated statistical methods to study program effectiveness by analyzing large streams of government data on use of addiction treatment and health care services.

CASAColumbia researchers will evaluate the effectiveness of the disease management program in stabilizing these individuals' lives as well as saving taxpayer dollars.

Funded by the National Institute on Drug Abuse.

CASASARD™ PROGRAM EVALUATION is a comprehensive, 8-year randomized, controlled clinical trial comparing the disease management program they developed which is shown to be effective in reducing substance use, and will study how well an intervention—designed and tested by scientists—will stand up when implemented under real-world conditions.

Funded by the National Institute on Drug Abuse.

CASASARD™ III

CASAColumbia is also conducting a comprehensive economic analysis of a state-run case management program for families with children on welfare. CASAColumbia scientists and the state of New Jersey are collaborating to develop a state-of-the-art behavioral intervention for high-cost, high-need clients. Potential taxpayer benefits derived from reduced drain on publicly financed services (like public welfare, emergency or crisis services) are the focus of the analysis.

Funded by the John D. and Catherine T. MacArthur Foundation.

NEW JERSEY DIVISION OF ADDICTION SERVICES GRANT

CASAColumbia is evaluating a groundbreaking set of programs to improve treatment access and recovery among disenfranchised,
COLLABORATIONS

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HEALTH AND TREATMENT RESEARCH AND ANALYSIS DIVISION

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NIDA K02 GRANT—INTEGRATED FAMILY-BASED TREATMENT OF CO-OCcurring ADOLESCENT SUBSTANCE USE DISORDERS (SUD) AND ADHD

Aaron Higgins, PhD, an associate director of the Health and Treatment Research and Analysis Division, whose expertise is family-based treatment for adolescent SUDs, continues his training under a National Institute on Drug Abuse K02 grant that includes components involving behavioral intervention science, psychopharmacology and neuro-imaging research related to adolescent substance use which will culminate in the development of a family-based treatment model specifically designed to treat adolescent substance users with co-occurring attention deficit hyperactivity disorder (ADHD). Funded by the National Institute on Drug Abuse.

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CASAHOPE^III (HOUSING OPPORTUNITIES PROGRAM EVALUATION) is an exhaustive evaluation of a new program funded by New York State and City to provide supportive housing to chronically homeless individuals with ongoing substance use, with the goal of promoting the stability needed to allow them to address their substance use and other social needs. The CASAHOPE evaluation will document best practices, evaluate one-year outcomes and conduct a comprehensive cost-effectiveness analysis to see whether supportive housing reduces costs related to extra criminal/violent services used by homeless clients. Funded by the John D. and Catherine T. MacArthur Foundation.

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CENTER-WIDE INITIATIVES

FAMILY DAY—A DAY TO EAT WITH YOUR CHILDREN

Family Day—A Day to Eat with Four Children was launched in 2001 by CASAColumbia. Family Day began as a grassroots initiative that grew into a national movement that engages parents that the parental engagement fostered during frequent family dinners is an effective tool to help keep America’s kids substance free. Realizing that everyday activities like having family dinner, helping with homework or attending after-school activities have a lasting effect on kids, Family Day’s mission has now expanded to include all types of parental engagement as simple, yet powerful tools to help kids grow up healthy and safe. Small moments offer an opportunity to connect, share and really listen to what’s on a child’s mind. Research consistently found that children with hands-on parents are less likely to smoke, drink or use other drugs. We have changed our slogan to reflect this new mission. Family Day—Be Involved. Stay Involved—will be celebrated worldwide on Monday, September 23, 2013.

THE CITIZENS’ COMMISSION TO PROTECT THE TRUTH

The Citizens’ Commission to Protect the Truth is a group of former U.S. Secretaries of Health, Education, and Welfare and Health and Human Services; former U.S. Surgeon General; and former Directors of the Centers for Disease Control and Prevention, both Republican and Democrat, formed in March 2004 to prevent youth from smoking. Among its efforts, the Commission shines a spotlight on the continued need to fund truth®, the only independent national youth counter-marketing campaign with demonstrated impact. Family Day’s slogan to reflect this new mission.

INTEGRATING ADDICTION PREVENTION AND TREATMENT INTO ROUTINE MEDICAL CARE AND PROFESSIONAL EDUCATION

Over the past year, CASAColumbia has begun to engage medical centers on ways to integrate addiction prevention and treatment more successfully throughout their system’s medical care and professional programs. The goal of such collaborations is to both improve the quality of care to patients struggling with this disease and to impact the costly health and social consequences of substance use and addiction. To such collaborations, CASAColumbia intends to bring its extensive knowledge about the disease and about how best to implement effective evidence-based practices, thereby improving health and reducing costs. To that end, CASAColumbia and the leadership of North Shore-Long Island Jewish Health System—which includes the Hofstra North Shore-LIJ Health System, CASAColumbia’s “home base”—are discussing opportunities for collaboration with the goal of integrating addiction prevention and treatment into routine medical care and professional education.

THE CENTER FOR COGNITIVE NEUROSCIENCE AND ADDICTION TREATMENT

The Center for Cognitive Neuroscience and Addiction Treatment is a collaborative venture to capitalize on new discoveries in cognitive neuroscience and information technology to develop novel prevention and treatment strategies for addiction. The Center for Cognitive Neuroscience and Addiction Treatment is currently conducting studies on the neural systems that are involved in impaired control of drinking and how effective behavioral treatments impact these neural systems. The center is also conducting studies on developing novel treatments for drinking problems using mobile devices such as smartphones.

NEW YORK STATE CREATING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT (SBIRT)

CASAColumbia is advised by the New York State Office on Alcoholism and Substance Abuse Services (OASAS) on an initiative to promote systems of treatment that better target individuals mired in despair and imposing a large economic burden on the community. Funded by the New York State Office on Alcoholism and Substance Abuse Services (OASAS) to develop a more effective implementation of screening, brief intervention and referral to treatment within medical settings. The aim is to integrate SBIRT throughout the state with the well-established guidelines and recommendations for screening and referral in emergency settings. Implementation is a challenge due to the complexities of instituting new behavioral health interventions in medical settings. CASAColumbia will develop and evaluate strategies based on best business practices as well as science-based models that can be rolled out throughout the state.

NEW YORK STATE SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT (SBIRT)

CASAColumbia is working with the New York State Office on Alcoholism and Substance Abuse Services (OASAS) to develop a more effective implementation of screening, brief intervention and referral to treatment to SBIRT (statewide). SBIRT is an evidence-based practice that modifies the substance use patterns of at-risk substance users and identifies individuals who need more extensive, specialized interventions in medical settings. CASAColumbia will develop and evaluate strategies based on best business practices as well as science-based models that can be rolled out throughout the state.

The Commission is chaired by CASAColumbia Founder and Chairman Emeritus Joseph A. Califano, Jr., and its vice chairman is Louis Sullivan, MD, former secretary of the U.S. Department of Health and Human Services, CASAColumbia’s general counsel and communications and marketing team staff the initiative.

Funded by the New York State Office on Alcoholism and Substance Abuse Services (OASAS). Funded by the New York State Office on Alcoholism and Substance Abuse Services (OASAS). Funded by Family Day sponsors. Funded by the New York State Office on Alcoholism and Substance Abuse Services (OASAS). Funded by Family Day sponsors.
Funded by the New Jersey Division of Alcohol Services.

NEW YORK STATE HEALTH FOUNDATION GRANT: DEVELOPING SUSTAINABLE SCREENING
CASAColumbia is working with the New York State Office on Alcoholism and Substances Abuse Services (OASAS) and Department of Health (DoH) to develop a more effective implementation of screening, brief intervention and referral to treatment within medical settings. Despite the efforts of health professionals, there are well-established guidelines and reccommendations for screening and referral in emergency rooms and urgent care clinics. Implementation is a challenge due to the complexities of instituting new behavioral health interventions in medical settings. CASAColumbia will develop and evaluate strategies based on best business practices as well as science-based models that can be rolled out throughout the state.

Funded by Legacy®.

NEW YORK STATE SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT (SBIRT)
CASAColumbia has partnered with the New York State Office on Alcoholism and Substance Abuse Services (OASAS) on an initiative to help people living with addiction. OASAS guidelines recommend brief intervention and referral to treatment (SBIRT) statewide. SBIRT is an evidence-based practice that modifies the substance use patterns of at-risk substance users and identifies individuals who need more extensive, specialized treatment. SBIRT is a comprehensive, integrated, public health approach to establish systems of treatment that better target interventions in medical settings. CASAColumbia will develop and evaluate strategies based on best business practices as well as science-based models that can be rolled out throughout the state.

Funded by the New York State Health Foundation.

CENTER-WIDE INITIATIVES

FAMILY DAY—A DAY TO EAT DINNER WITH YOUR CHILDREN

Family Day—A Day to Eat Dinner with Your Children was launched in 2001 by CASAColumbia. Family Day began as a grassroots initiative that grew into a national movement that aims to encourage parents that the parental engagement fostered during frequent family dinners is an effective tool to help keep America’s kids substance free. Reading that everybody likes having family dinner, helping with homework or attending after-school activities has a lasting effect on kids, Family Day’s mission has now expanded to include all types of parental engagement as simple, yet powerful tools to help kids grow up healthy and happy. For the first time, small moments offer an opportunity to connect, share and really listen to what’s on a child’s mind. As implementation grows, it consistently found that children with hands-on parents are less likely to smoke, drink or use other drugs. We have changed our slogan to reflect this new mission:

Family Day—Be Involved. Stay Involved.

Funded by the New York State Health Foundation.

The Citizens’ Commission to Protect the Truth is a group of former U.S. Secretaries of Health, Education, and Welfare and of Health and Human Services, former U.S. Surgeon General, and former Directors of the Centers for Disease Control and Prevention, both Republican and Democrat, formed in March 2004 to prevent youth from smoking. Among its efforts, the Commission shines a spotlight on the continued need to fund truth®, the only independent national youth counter-marketing campaign with demonstrated results to help kids grow up healthy and substance free. Each of these initiatives—some of which CASAColumbia is working with the New York State Office on Alcoholism and Substance Abuse Services (OASAS) on an initiative to help people living with addiction. OASAS guidelines recommend brief intervention and referral to treatment (SBIRT) statewide. SBIRT is an evidence-based practice that modifies the substance use patterns of at-risk substance users and identifies individuals who need more extensive, specialized treatment. SBIRT is a comprehensive, integrated, public health approach to establish systems of treatment that better target interventions in medical settings. CASAColumbia will develop and evaluate strategies based on best business practices as well as science-based models that can be rolled out throughout the state.

Funded by Legacy®.

The Citizens’ Commission to Protect the Truth

The Citizens’ Commission to Protect the Truth is a group of former U.S. Secretaries of Health, Education, and Welfare and of Health and Human Services, former U.S. Surgeon General, and former Directors of the Centers for Disease Control and Prevention, both Republican and Democrat, formed in March 2004 to prevent youth from smoking. Among its efforts, the Commission shines a spotlight on the continued need to fund truth®, the only independent national youth counter-marketing campaign with demonstrated results in keeping children and teens from smoking.

The Commission is chaired by CASAColumbia Founder and Chairman Emeritus Joseph A. Saul, MD, former Surgeon General of the United States, and is Louis Sullivan, MD, former secretary of the U.S. Department of Health and Human Services. CASAColumbia’s general counsel and communications and marketing team staff the initiative.

INTEGRATING ADDICTION PREVENTION AND TREATMENT INTO ROUTINE MEDICAL CARE AND PROFESSIONAL EDUCATION

Over the past year, CASAColumbia has begun to engage medical centers on ways to integrate addiction prevention and treatment more successfully throughout their system’s medical care and professional programs. The goal of such collaborations is to both improve the quality of care to patients struggling with this disease and to impact the costly health and social consequences of risky substance use and addiction. To such collaborations, CASAColumbia intends to bring its extensive knowledge about the disease and about how best to implement effective evidence-based practices. CASAColumbia focuses on improving care and reduce costs. To that end, CASAColumbia and the leadership of North Shore-LIジェng Island Jewish Health System—which includes the Hofstra North Shore-LIジェng Island School of Medicine—is launching a series of events—conducted by professionals in the field—on developing novel treatments for drinking or using other drugs at the time of their crime; committed their offense to get money to buy drugs; or were incarcerated for an alcohol or drug-law violation.

Two-thirds of all inmates in the U.S. meet the medical criteria for addiction involving alcohol or other drugs; only 11 percent of them receive treatment during their incarceration.

More than 20 percent of all deaths each year in the U.S. (157,000) are attributable to substance use and addiction.

80 million Americans fall into the category of risky substance users—those who use tobacco, alcohol and other drugs in ways that threaten public health and safety but are not addicted.

More than 50 percent of people with addiction began smoking, drinking or using other drugs before age 18.

7 in 10 people with hypertension, major depression and diabetes receive treatment; but only about 1 in 10 people with addiction receive treatment; but only about 1 in 10 people with addiction.

75 percent of all high school students have used addictive substances including opioids, alcohol, marijuana or cocaine; 1 in 5 of them meets medical criteria for addiction.

85 percent of inmates in the U.S. are addicted; had histories of substance use/week or use those drugs at the time of their crime; committed their offense to get money to buy drugs; or were incarcerated for an alcohol or drug-law violation.

Two-thirds of all inmates in the U.S. meet the medical criteria for addiction involving alcohol or other drugs; only 11 percent of them receive treatment during their incarceration.

More than 20 percent of all deaths each year in the U.S. (157,000) are attributable to substance use and addiction.

80 million Americans fall into the category of risky substance users—those who use tobacco, alcohol and other drugs in ways that threaten public health and safety but are not addicted.
To begin with, there is a pernicious stigma surrounding addiction that often prevents those who need help from getting it. This stigma arises in part from a limited understanding and acceptance among health professionals and the public alike that addiction is a complex brain disease, that it is driven by a complex array of genetic, social and environmental factors, and that it can be prevented, treated and effectively managed. Nicotine, alcohol and illicit and controlled prescription drugs all affect the brain in similar ways and growing evidence suggests that the same pleasure and reward circuits of the brain are involved in other compulsive behaviors linked to gambling, eating and sex.

Misunderstandings about the nature of this public health and medical problem have undermined effective treatment, disconnecting it from mainstream medical practice. There is no other disease for which appropriate medical treatment is available but is not provided by the health care system. Most medical professionals who should be providing care to those with an addiction are not trained to do so, and many of those who are providing care are not equipped with the knowledge, skills or credentials necessary to provide effective treatment. Much of what passes for treatment of addiction bears little resemblance to the treatment of other health conditions or to evidence-based practice.

Our current approach to addiction prevention and treatment is unproven and problematic. Rather than educate our health care professions about this disease, its risk factors and how to prevent, treat and manage it, we wait until the disease worsens and finally erupts, resulting in devastating and costly health and social consequences. These consequences do not just affect those with the disease but spill over into our families, communities and tax bills. Addiction and risks are real and responsible for more than 20 percent of all deaths in the U.S. and cause or contribute to more than 70 other conditions that require medical care. Two-thirds of America’s homes have this disease, but few receive treatment. For every dollar of the $500 billion America spends on health care each year, only 2 cents go to prevention and treatment. It is time to change our approach.

Our health care providers, especially physicians, are our front line in disease prevention and treatment. It is absolutely essential that they understand the risk factors for addiction, screen for risky substance use and intervene when needed, and diagnose, treat and manage addiction just as they do for all other diseases. Other health care providers, including nurse practitioners, physician assistants, psychologists and social workers are critical parts of the solution as well. We need national, evidence-based standards that stipulate who may provide addiction treatment, and care competencies for all health care providers integrated into their educational and licensing requirements. We must regulate addiction treatment facilities and programs and hold them accountable for treatment consistent with medical standards and proven practices, just as other health care facilities are. And finally, it is long past time to begin a search for a cure for this debilitating and deadly disease.

We can no longer stand idly by as millions of people lose their closest friends and family members to this preventable and treatable disease. The time is now for addiction treatment to be fully integrated into health care systems and medical practice.

SUBSTANCE ABUSE DATA ANALYSIS CENTER (SADAC)
CASAColumbia’s Substance Abuse Data Analysis Center (SADAC) gives CASAColumbia a unique research capability. SADAC enables CASAColumbia to analyze a wide variety of government and academic databases and contains a wealth of information. SADAC is a critical tool in CASAColumbia’s ongoing efforts to uncover the impact of the disease of addiction on our nation’s social systems—from health care costs to prison costs. The center is led by Roger Vaughan, Ph.D., M.P.S, professor and chair, department of business analytics in the Mahaney School of Public Health at Columbia University and associate editor for statistics and evaluation of the American Journal for Public Health. SADAC analyses play a key role in all CASAColumbia reports, papers and research.

CASAColumbia by the Numbers

$1.7 million Awarded the 2012 University Awards Dinner honoring Ursula M. Burns, chairman and CEO of Xerox Corporation; Jay S. Fishman, chairman and CEO of The Travelers Companies, Inc.; and Michael I. Roth, chairman and CEO of Interpublic Group.

More than 1,605 print, web, radio and TV stories mentioning CASAColumbia experts and research in 2012.

2.5 billion media impressions in 2012.

79 policy reports and white papers to date.

3 books.

5 manuals.

The U.S. President, 50 governors and more than 1,000 city and county officials proclaimed and supported Family Day—4 Day to Eat Dinner with Your Children® in 2012.

55 professionals, including 1 MD, 10 doctors, 20 masters and 3 lawyers with expertise in fields including addiction, business, communications, education, epidemiology, government, journalism, labor, law, marketing, medicine, psychology, public administration, public health, public policy, social work, sociology and statistics.

206 published articles by CASAColumbia researchers in scientific journals to date.

418 presentations given to date by CASAColumbia researchers at education, policy and scientific conferences.
To begin with, there is a pervasive stigma surrounding addiction that often prevents those who need help from getting it. This stigma arises in part from a limited understanding and acceptance among health professionals and the public alike that addiction is a complex brain disease, that it is driven by a complex array of genetic, social and environmental factors, and that it can be prevented, treated and effectively managed. Nicotine, alcohol and illicit and controlled prescription drugs all affect the brain in similar ways and growing evidence suggests that the same pleasure and reward circuits of the brain are involved in other compulsive behaviors linked to gambling, eating and sex.

Misunderstandings about the nature of this public health and medical problem have undermined effective treatment, disconnecting it from mainstream medical practice. There is no other disease for which appropriate medical treatment is available but is not provided by the health care system. Most medical professionals who should be providing treatment to those with an addiction are not trained to do so, and many of those who are providing care are not equipped with the knowledge, skills or credentials necessary to provide effective treatment. Much of what passes for treatment of addiction bears little resemblance to the treatment of other health conditions or to evidence-based practice.

Our current approach to addiction prevention and treatment is unconscionable and profiteering. Rather than educate our health care professionals and the public about this disease, its risk factors and how to prevent, treat and manage it, we wait until the disease worsens and finally erupts, resulting in devastating and costly health and social consequences. These consequences do not just affect those with the disease but spill over into our families, communities and tax bills. Addiction and risks are unavoidable for more than 20 percent of all deaths in the U.S. and cause or contribute to more than 70 other conditions that require medical care. Two-thirds of America’s inmates have this disease, and deadly disease.

It is long past time to begin a search for a cure for this debilitating and costly health problem each year, only 2 cents of the $500 billion (U.S.) that the U.S. President, 50 governors and more than 1,000 cities and counties spend on this health problem each year, only 2 cents go to prevention and treatment. It is time to change our approach.

Our health care providers, especially physicians, are on the front line in disease prevention and treatment. It is absolutely essential that they understand the risk factors for addiction, screen for risky substance use and intervene when needed, and diagnose, treat and manage addiction just as they do for all other diseases.

Other health care providers, including nurse practitioners, physician assistants, psychologists and social workers are critical parts of the solution as well. We need national, evidence-based standards that stipulate who may provide addiction treatment, and core competencies for all health care providers integrated into their educational and licensing requirements. We must regulate addiction treatment facilities and programs and hold them accountable for treatment consistent with medical standards and proven practices, just as all other health care facilities are. And finally, it is long past time to begin a search for a cure for this debilitating and costly disease.

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**CASABy THE NUMBERS**

| 5.17 MILLION | Awarded at the 2012 Anniversary Awards Dinner honoring Ursula M. Burns, chairman and CEO of Xerox Corporation; Jay S. Faison, chairman and CEO of The Travelers Companies, Inc.; and Michael I. Roth, chairman and CEO of Interpublic Group. |
| 2.5 BILLION | media impressions in 2012 |
| 1,605 | policy reports and white papers to date |
| 3 books. |
| 5 manuals. |

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Throughout 2012, our experts penned letters to the editor and opinion pieces, spoke with the nation’s leading journalists and presented at academic conferences to help spread the word about the enormous costs of this deadly disease to both individuals and society. These events continue our commitment to informing the public that addiction is a complex brain disease that affects millions of people nationwide.

In past years, CASAColumbia continued to capture headlines with our leading-edge research and vital message that addiction is a preventable, treatable disease.

More than 1,605 web, radio and print stories mentioned CASAColumbia in 2012, which resulted in more than 2.5 billion media impressions. The media stories varied from such topics as adolescent substance use to changing the way our nation administers addiction treatment.

Our experts were featured in a wide variety of print media including Reuters, CNN Money, TIME.com, The Los Angeles Times, Geeker, Yahoo!News and many more. Additionally, Rick Center with Brian Williams featured an interview with Susan Foster, vice president and director of policy research and analysis, in a story about addiction treatment.


In addition to media coverage, CASAColumbia researchers presented at various academic and professional conferences, and had five articles published in peer-reviewed journals.

In 2012, we continued our outreach through a targeted social media strategy that included posts on our Family Day Facebook page, tweeting about the importance of family dinners, and messaging around parental engagement in children’s lives on our blog and website.

First Spouses in 33 states—the most ever—served as Honorary Chair of Family Day, helping to raise awareness about the initiative in their respective states.

2012 also featured a new partnership with the world-famous Harlem Globetrotters who created a Family Day public service announcement starring several players, which was shown at games around the country.

Join us in celebrating Family Day 2013 on Monday, September 23rd and “Be Involved. Stay Involved.”®

Remember, everyday activities like having family dinner together, helping your children with their homework or attending their after-school activities have a lasting effect on your kids. Each of these moments offers an opportunity to connect, share and really listen to what’s on their mind. Children with hands-on parents are less likely to smoke, drink or use other drugs.

Parental engagement matters.

Special thanks to our Presenting Sponsor, The Coca-Cola Company, and to the Empire State Building and the Wrigley Building which lit up on September 24, 2012 in red and blue in honor of Family Day.
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Letters to the editor penned by CASAColumbia experts ran in media outlets ranging from The New York Times to The Bangor Daily News while opinion pieces ran in The Huffington Post and The Daily News.

The Addictive Sublime: Closing the Gap between Science and Practice report examined addiction and how to begin to close the gap and address addiction as a disease requiring medical care rather than criminal punishment.

More than 175 media outlets covered the report’s release, and had five articles published in peer-reviewed journals. In addition to media coverage, CASAColumbia researchers presented at various academic and professional conferences, and had five articles published in peer-reviewed journals.

As in past years, CASAColumbia continued to capture headlines with our leading-edge research and vital message that addiction is a preventable, treatable disease.

In 2012, CASAColumbia experts and research continued to capture news headlines across the nation. The media stories varied from such topics as recognizing the alcoholic patient to informing the public that addiction is a complex brain disease that affects millions of people nationwide.

Over the summer, CASAColumbia set the record straight about its content remains a relevant topic in the news media today. More than 175 media outlets covered the report’s release, and had five articles published in peer-reviewed journals.

CASAColumbia is a preventable, treatable disease.

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20TH ANNIVERSARY AWARDS DINNER

On May 8, 2012, CASAColumbia hosted its annual anniversary dinner, honoring three CEOs and their corporations for their longstanding commitment to changing the way Americans think about addiction.

The dinner, A Celebration of American Leadership in Combating Substance Abuse, was held at The Pierre hotel in New York City and was emceed by former “CBS This Morning” anchor Erica Hill. The dinner raised more than $1.7 million to support CASAColumbia’s work in transforming society’s understanding of addiction as a disease.

The CASAColumbia Distinguished Service Award was presented to Ursula M. Burns, chairman and CEO of Xerox Corporation; Jay S. Fishman, chairman and CEO of The Travelers Companies, Inc.; and Michael I. Roth, chairman and CEO of Interpublic Group.

Burns, a CASAColumbia board director, was honored for her personal leadership in the organization’s mission and also for Xerox’s longstanding philanthropic commitment to helping children excel.

Additionally, Fishman and The Travelers Companies were honored for corporate and personal commitments to education and for their support of CASAColumbia’s mission. In his acceptance speech, Fishman announced an additional $100,000 donation from The Travelers Companies to support CASAColumbia’s efforts to find the best ways to prevent and treat addiction.

Finally, Roth, also a CASAColumbia board director, was honored for his ongoing leadership in supporting the organization’s mission and for his commitment to helping parents and communities raise healthy and drug-free kids.

Noted guests attending the dinner included: Leslie Moonves, president and CEO of CBS Corporation; former Florida Governor Jeb Bush; Robert Bazell, NBC News’ chief science and health correspondent; Cheryl Healton, president and CEO of Legacy®; and Gil Kerlikowske, director of the U.S. Office of National Drug Control Policy.

Photos courtesy of Eric Weiss.
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Photos courtesy of Eric Weiss.
Susan E. Foster, MSW
Vice President and Director of Policy Research and Analysis. Ms. Foster is responsible for research and policy analysis on the impact of substance use and addiction on America’s systems and populations and is focused on moving the prevention and treatment of the disease of addiction into public health and mainstream medical practice. Prior to joining CASAColumbia, she advised state and local governments, private agencies and foundations as co-founder of the consulting firm Brizius & Foster and partner of U.S. Data on Demand, Inc. She served as deputy undersecretary for intergovernmental affairs at the U.S. Department of Health, Education, and Welfare, and as assistant to the Governor and Chief of State Planning in Illinois. She is the author of numerous public policy books and articles.

Jon Morgenstern, PhD
Vice President and Director of Health and Treatment Research and Analysis. Dr. Morgenstern’s work at CASAColumbia is focused on researching the integration of addiction prevention and treatment care across multiple government health systems in the same manner as any other chronic disease. Dr. Morgenstern is also professor of clinical psychology in psychiatry at Columbia University College of Physicians and Surgeons and director, substance abuse treatment, New York-Presbyterian Hospital. Dr. Morgenstern, a licensed psychologist in New York and New Jersey, is an expert in substance abuse treatment and health services research. His areas of interest include strategies to improve existing community-based substance abuse treatment. He has published numerous scientific articles and serves as a consultant to the National Institute of Alcohol Abuse and Alcoholism and the National Institute on Drug Abuse.

Joseph A. Califano, Jr., LLB
CASAColumbia’s founder and Chairman Emeritus. Mr. Califano served as President Johnson’s assistant for domestic affairs from 1965 to 1969 and as secretary of health, education, and welfare from 1977 to 1979. He practiced law in Washington, D.C., and New York until 1992, when he founded CASAColumbia. He is the author of 12 books and a member of the National Academy of Science’s Institute of Medicine. His most recent book, How to Raise a Drug-Free Kid: The Straight Dope for Parents, offers practical, user-friendly advice and information to parents.
LEADERSHIP

Jeffrey B. Lane
Chairman of the Board. Mr. Lane has enjoyed a distinguished career in the financial field. His career includes positions as chairman and CEO of Neuberger Berman, president and chief operating officer of Lehman Brothers, and vice chairman of Lehman Group. He is a graduate of the University of Illinois and holds an MBA from Columbia University’s Graduate School of Business. Mr. Lane also serves as a director of the North Shore-Long Island Jewish Hospital System (which includes Lenox Hill Hospital in Manhattan) and co-chair of its investment committee and as a director of Willis Group Holdings PLC.

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Susan P. Brown
Vice President and Director of Finance and Administration, and Secretary-Treasurer. Ms. Brown is responsible for overseeing day-to-day operations of the office including fiscal management, grants and contracts administration, payroll, benefits, accounts payables, library and computer systems. In addition, she acts as liaison with the board of directors and the board’s Audit and Investment Committees. Ms. Brown served as director of administration for the Washington office of the law firm of Dewey Ballantine for nine years prior to joining CASAColumbia. She has also been director of administration for the law firms of Califano, Ross & Heneser and Cohen and Unetz.

William H. Foster, PhD
President and CEO. Dr. Foster is responsible for strategic leadership, intellectual and scholarly oversight, human resource management, budget analysis and implementation, communications and marketing, fundraising, community and government relations and day-to-day operational leadership of CASAColumbia. Prior to this he served as dean of the Edwin S. Muskie School of Public Service, and was the executive director of congressional commission on select social security issues. He has also served as legislative staff on domestic policy to Senator Bill Bradley and as chief of staff and then deputy commissioner of the New Jersey Department of Labor. He spent 17 years teaching and advising graduate programs at the University of Illinois and Rutgers University prior to his work at Columbia and the Muskie School.

Jeffrey B. Lane

Susan E. Foster, MSW

Joseph A. Califano, Jr., LLB

Jon Morgenstern, PhD

Jon Morgenstern, PhD

Jeffrey B. Lane

Susan P. Brown
The National Center on Addiction and Substance Abuse at Columbia University (CASAColumbia) Balance Sheet as of December 31, 2012 and 2011

<table>
<thead>
<tr>
<th>ASSETS 2012</th>
<th>ASSETS 2011</th>
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<tr>
<td>Cash and cash equivalents</td>
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<tr>
<td>Grants and contributions receivable, net</td>
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<td>Prepaid expenses and other assets</td>
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<td>Investments</td>
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<tr>
<td>Property and equipment, net</td>
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<td><strong>TOTAL ASSETS</strong></td>
<td><strong>$67,902,612</strong></td>
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<thead>
<tr>
<th>LIABILITIES 2012</th>
<th>LIABILITIES 2011</th>
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<tr>
<td>Accounts payable and accrued expenses</td>
<td>$1,567,489</td>
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<tr>
<td>Deferred revenue</td>
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<tr>
<td>Bonds payable</td>
<td>$14,000,000</td>
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<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td><strong>$15,808,252</strong></td>
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**TOTAL NET ASSETS** | $52,094,360 |

**DETAILS OF UNRESTRICTED NET ASSETS 2012, 2011**

<table>
<thead>
<tr>
<th>NET ASSETS</th>
<th>UNRESTRICTED</th>
<th>TEMPORARILY RESTRICTED</th>
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<tr>
<td>Operating funds:</td>
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<td>Future periods</td>
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</tr>
<tr>
<td>The Joseph A. Califano, Jr. Institute for Applied Policy</td>
<td>$8,881,051</td>
<td></td>
</tr>
<tr>
<td>Program Concentration Fund</td>
<td>$33,627,383</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL NET ASSETS</strong></td>
<td><strong>$45,820,301</strong></td>
<td></td>
</tr>
</tbody>
</table>

A list of people and their roles on the Advisory Board and financial statements provided above.
### ADVISORY BOARD

- Bobbie Berkowitz, PhD, RN, CNA, FAAN
  Dean of the School of Nursing, Columbia University
- Arnold M. Eisen, PhD
  Chancellor and President of the Faculty of the Jewish Theological Seminary of America
- Linda P. Fried, MD, MPH
  Dean of the Mailman School of Public Health, Columbia University
- Susan H. Fuhrman, PhD
  President of Teachers College, Columbia University
- Lee Goldman, MD, MPH
  Executive Vice President for Health and Biomedical Sciences and Dean of the School of Medicine and of Medicine, College of Physicians and Surgeons, Columbia University
- Deborah L. Spur, PhD
  President of Barnard College
- Jeannette C. Takamura, PhD
  Dean of the School of Social Work, Columbia University
- Jeremy Travis, Esq.
  President of John Jay College of Criminal Justice
- Mark Wigley, PhD
  Dean of the Graduate School of Architecture, Planning and Preservation, Columbia University

### FINANCIAL STATEMENT

The National Center on Addiction and Substance Abuse at Columbia University (CASAColumbia) Balance Sheet as of December 31, 2012 and 2011

<table>
<thead>
<tr>
<th>ASSETS 2012</th>
<th>ASSETS 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$605,010</td>
</tr>
<tr>
<td>Grants and contributions receivable, net</td>
<td>1,101,325</td>
</tr>
<tr>
<td>Prepaid expenses and other assets</td>
<td>277,459</td>
</tr>
<tr>
<td>Investments</td>
<td>13,921,271</td>
</tr>
<tr>
<td>Property and equipment, net</td>
<td>9,989,547</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td><strong>$67,902,612</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable and accrued expenses</td>
</tr>
<tr>
<td>Deferred revenue</td>
</tr>
<tr>
<td>Bonds payable</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
</tr>
</tbody>
</table>

| TOTAL NET ASSETS | 2012 | 2011 |
|-----------------|-----------------|
| $52,094,360 | $51,933,773 |

| DETAIL OF UNRESTRICTED TEMPORARILY RESTRICTED |
|-----------------|-----------------|
| Operating funds: | | |
| Available for operations | $6,150,438 | $6,150,438 |
| Program services | 1,101,325 | 6,097,560 |
| Future periods | 277,459 | 300,056 |
| The Joseph A. Califano, Jr. Institute for Applied Policy | 1,194,934 | 1,978,056 |
| Program Concentration Fund | 34,341,645 | 33,627,383 |
| **TOTAL NET ASSETS** | **$46,820,361** | **$46,274,059** | **$52,094,360** | **$51,933,773** |
All CASAColumbia publications are available for download or purchase on our website, www.casacolumbia.org. For more information, call (212) 841-5227, or fax (212) 956-8020.

- The Importance of Family Dinners VIII. 2012.
- Adolescent Substance Use: America’s #1 Public Health Problem. 2011.
- Wasting the Best and the Brightest: Substance Abuse at America’s Colleges and Universities. 2007.
- Under the Counter: The Discovery and Abuse of Controlled Prescription Drugs in the U.S. 2005.
- Malignant Neglect: Substance Abuse and America’s Schools. 2001.

For a complete list of CASAColumbia publications, visit www.casacolumbia.org.

SPECIAL THANK YOU

We appreciate the pro bono legal counsel of the premier firm of White & Case LLP. We are especially grateful to Robert Chung, Jim Dantzler, Michael Elliott, James Hayden, Tal Marmor, Darren Greenlaw, Morton Pierce, Michelle Rutta and Philip Trillmich.

We are fortunate once again to have had airtime generously donated by the CBS Corporation for our Family Day—A Day to Eat Dinner with Four Children™ public service announcements which increase awareness of the importance of parental engagement in children’s lives.

A special thanks to Eric Weiss who donated photographs for use in this annual report; board member Michael Roth and the Interpublic Group of Companies for their creative expertise in helping CASAColumbia get its message out to millions of Americans, the talented team at Draftfcb—Joyce Aze, Alex Blane, Paul Calvarese, Alex Chu, Oren Gariel, Aurelio Say, Helen Saranell and Nicole Steinwelder—who designed this annual report.

We appreciate the continued assistance of KPMG Post Morvick, our independent auditors led by Lisa Hinckson.
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ADDICTION: A PREVENTABLE AND TREATABLE DISEASE