



April 26, 2012

Dr. David Shurtleff
Deputy Director
National Institutes of Health
National Institute on Drug Abuse

Dear Dr. Shurtleff:

This letter is in response to the Request for Information (RFI): Input into the Scientific Strategic Plan for the proposed National Institute of Substance Use and Addiction Disorders (Notice Number: NOT-OD-12-045). We offer below 5 points we believe are critical scientific opportunities and public health needs that should be considered when developing the Scientific Strategic Plan of the new institute.

- 1) **Prevention Research Must Remain a Priority and Central to the Scientific Strategic Plan.** The most effective way to halt the manifestation of diseases and disorders is through prevention. Prevention of drug abuse, alcohol misuse and other addictions differs from most other diseases and disorders in that, at the initiation stage, there is choice involved. Overall, NIDA and NIAAA have taken a proactive role in building the field of prevention science, creating a diverse portfolio that encompasses basic research, statistical methodology, efficacy trials, effectiveness research, systems research, and services research. Both institutes have funded numerous trials that have shown that school-, family-, and community-based interventions can prevent early drug use and abuse and alcohol-related problems and misuse. The research funded has demonstrated that alcohol or drug abuse and addictions develop in a complex context of diverse psychological and behavioral problems; thus, prevention is facilitated by interventions that modify one or more risk factors for these problems. The portfolio is a model for addressing these risk factors comprehensively based on the best research on trajectories leading to substance abuse and comorbid disorders. This type of research must continue. Once a disease or disorder is diagnosable, the approach changes from prevention to treatment and many more resources must be expended to care for affected individuals.
- 2) **Establish a Prevention Research Branch**
Establishment of a new combined institute should be used as an opportunity to build from and strengthen NIH's prevention portfolio. This can most effectively occur when a branch of the institute is charged with this priority. We strongly endorse that the new institute include prevention explicitly in the mission and elevate prevention to a research branch with funding allocated to alcohol and drug abuse prevention research at least equal to, and ideally greater than, the sum of the current levels at NIAAA and NIDA.

3) Expand Type 2 Translational Research

To foster innovation and transformation in the next generation of prevention research, we recommend the expansion of Type 2 translational research, including studies of the adoption, implementation, and sustainability of tested and effective programs, policies, and practices in communities, services settings, and populations. This research would ensure that existing knowledge results in reductions in the incidence and prevalence of alcohol or drug abuse and addictions.

4) Greater Emphasis on Social and Behavior Science in the Scientific Strategic Plan

By emphasizing the importance of biological science in understanding alcohol misuse or drug abuse and addictions, the current list of priorities underemphasizes the critical role of social and behavioral science in understanding and addressing these problems. Research suggests that initiation of substance use behaviors is environmentally determined, and that socio-cultural environments (e.g., policy, peers, family, neighborhoods) play pivotal roles in the initiation of, maintenance of, and desistence from drug use, abuse, and dependence. Certainly there is an interaction of environmental and biological influences in the development of addiction. Nevertheless, to downplay the social, cultural, and psychological aspects of drug use is a fundamental mistake that will severely weaken efforts at prevention and treatment.

5) Pursue the Recommendations of the IOM Report

The report on prevention from the National Research Council and the Institute of Medicine (IOM)¹ documents the substantial progress that has been made in prevention research since the IOM's previous report on this topic in 1994. A substantial portion of the research cited in the new report was funded by NIDA. There are a number of recommendations from that committee that are important to pursue: (1) continuing the course of rigorous research both on specific and general risk factors and on protective factors that weaken or strengthen, respectively, age-appropriate competencies; (2) studying dissemination strategies; and (3) creating new research linkages with neuroscience.

Yours truly,

The Board of the Society for Prevention Research

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¹ National Research Council and Institute of Medicine, *Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities*. Washington: The National Academies Press. 2009.