	c	Case 2:90-cv-00520-LKK-JFM Document 46	617-1 Filed 05/16/13 Page 1 of 35
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	14	UNITED STATES	DISTRICT COURT
	15	EASTERN DISTRIC	CT OF CALIFORNIA
	16		
	17	RALPH COLEMAN, et al.,	Case No. Civ S 90-0520 LKK-JFM
	18	Plaintiffs,	REPLY DECLARATION OF PABLO
	19	v.	STEWART, M.D. IN SUPPORT OF PLAINTIFFS' MOTION FOR
	20	EDMUND G. BROWN, JR., et al.,	ENFORCEMENT OF COURT ORDERS AND AFFIRMATIVE DELIFE DELATED TO INDATIENT
	21	Defendants.	RELIEF RELATED TO INPATIENT TREATMENT
	22		Date: May 23, 2013 Time: 10:00 am
	23		Crtrm: 4 Judge: Hon. Lawrence K. Karlton
	24		
	25		
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	27		
7809-1]	28		
1007-1]			D. IN SUPPORT OF PLS.' MOTION FOR ENFORCEMENT RELIEF RELATED TO INPATIENT TREATMENT

ase 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 2 of 35

1

I, PABLO STEWART, do hereby declare:

2 1. I am a physician licensed to practice in California, with a specialty in clinical 3 and forensic psychiatry. A true and correct copy of my current *curriculum vitae* is 4 attached hereto as **Exhibit A**. My background and experiences as relevant to my expert 5 testimony in this case and this declaration are set forth in my recent March 14, 2013 Expert 6 Declaration in Support of Plaintiffs' Opposition to Defendants' Motion to Terminate, 7 Docket No. 4381 ("3/14/13 Stewart Decl."). I make this Reply Declaration in Support of 8 Plaintiffs' Motion for Enforcement of Court Orders and Affirmative Relief Related to 9 Inpatient Treatment, in Coleman v. Brown.

In response to Defendants' recent motion to terminate all relief in the
 Coleman case, I submitted a 167-page Declaration on March 14, 2013 discussing a wide
 array of problems affecting various areas of mental health care in the CDCR. The
 Declaration was based on my tours of 5 CDCR institutions in January and February of
 2013, and my review of hundreds of pages of documents relevant to the mental health care
 provided in the CDCR.

As part of the development of my opinion in the termination proceedings, I
 toured the Specialized Care program at San Quentin on February 26, 2013 and interviewed
 the three individuals who had been moved into the new program in the hospital at San
 Quentin, and a number of individuals either identified for the program or receiving
 treatment under an earlier version of the program who were housed in East Block at the
 time of my tour. All three individuals in the new Specialized Care program housing had
 been moved into the program shortly before my site visit (since the beginning of the year).

4. In preparing this Reply Declaration, I reviewed Plaintiffs' Motion for
Enforcement of Court Orders and Affirmative Relief Related to Inpatient Treatment. I also
reviewed Defendants' Opposition to Plaintiffs' Motion for Enforcement of Court Orders
and Affirmative Relief Related to Inpatient Treatment (Docket No. 4592, May 9, 2013)
("Defs.' Opp'n.") and the supporting declarations. In particular, I focused on the
Declaration of Eric Monthei in Support of Defendants' Opposition to Plaintiffs' Motion

case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 3 of 35

1 (Docket No. 4593), which extensively discussed the individual cases I reviewed within the
2 Specialized Care program and comments on my discussion of those cases in my March 14,
3 2013 Declaration. I also closely reviewed Dr. Monthei's exhibits containing more recent
4 medical records for these individual cases, many of which were not available at the time I
5 reviewed records for the individuals I met at San Quentin. I also reviewed a coroner's
6 report related to a death in the SVPP intermediate inpatient care program on March 22 of
7 this year.

- 8
- 9

The Declaration of Eric Monthei Contains Numerous Statements that Are Inconsistent With or Contrary to The Medical Records Cited in Support of Those Statements

5. 10 After carefully reviewing the summaries concerning individuals in the Specialized Care program contained in Dr. Monthei's Declaration and the medical records 11 12 attached to the Vorous Declaration that purportedly support those summaries, I found that Dr. Monthei's statements are repeatedly contradicted by the medical records he discusses. 13 14 Also, the summaries contained in Dr. Monthei's Declaration appear to be based solely 15 upon his review of the medical records for these individuals, and not on the same kind of face-to-face individual assessments that I conducted in reaching my conclusions about 16 each of these individual cases. 17

6. 18 Dr. Monthei states that Prisoner DDD's "grooming and hygiene have been 19 good." (Monthei Decl. at ¶ 35, line 14.) However, a medical record note dated March 29, 20 2013 attached as Exhibit 5 to the Vorous Confidential Declaration states that in the last 21 two weeks of March, 2013, Prisoner DDD developed an "inability to retain excretory functions, i.e. urine/saliva/feces." (Ex. 5 to Vorous Confidential Decl. at 067.) The 22 23 medical records also note that Prisoner DDD soiled himself during a group treatment 24 session on March 13, 2013. (Id. at 059.) A note from March 30, 2013 also states that Prisoner DDD was "reported to have been incontinent while in holding modules, and to be 25 spitting frequently." (Id. at 069.) 26

27 7. Dr. Monthei's conclusion that Prisoner DDD has been demonstrating
28 "improvements in his ... level of service participation" is contradicted by the medical

record. (Monthei Decl. at ¶ 35, lines 7-8). A note from March 29, 2013 states that 1 2 Prisoner DDD "presented with multiple catatonic symptoms, including thought blocking and inflexible body posture." (Ex. 5 to Vorous Confidential Decl. at 068.) A clinical note 3 4 from the same day states that Prisoner DDD exhibited "[n]o response to the writer's 5 attempts to engage him other than to walk away from the door, get into bed, and pull the covers over his head." (Id. at 069.) Despite stock language in most of the notes in Exhibit 6 7 5 concerning his participation in treatment, the individual observations of the clinician 8 typically contain comments such as "I/P was observed lying in bed, covered to the neck with his head turned away from the door and the writer. He did not respond to her 9 10 knocking and calling his name, not even a startle response." (Id. at 071, April 7, 2013).

8. 11 Dr. Monthei also fails to contradict or rebut most of the evidence presented in my March 14, 2013 Declaration concerning Prisoner DDD. I noted in my March 14, 12 2013 Declaration that Prisoner DDD's "February 14, 2013 Treatment Plan Level of Care 13 14 Form (CDCR Form 7388B) notes that he requires inpatient level of care treatment." 15 (3/14/2013 Stewart Decl. at ¶ 459.) Dr. Monthei does not dispute this finding by his own 16 treating physicians. Nor does Dr. Monthei dispute that the social workers who provide the 17 bulk of the treatment in the new fourth floor Specialized Care program told me that all 18 three of the patients in the program at the time of my February 26, 2013 visit had been 19 "refusing virtually all out of cell treatment for several years" prior to their placement into 20 the new program in early 2013. (Id. at ¶ 461.) As I noted in my March 14, 2013 21 declaration concerning my inspection at San Quentin, I was very disturbed by this 22 admission by the San Quentin social workers, who told me during the interview during my 23 tour of San Quentin on February 26, 2013 that they are the primary treating clinicians for individuals in the new Specialized Care program on the fourth floor of the new San 24 Quentin Hospital building. (Id.) These clinicians were clearly uncomfortable 25 26 acknowledging the length of time these extremely mentally individuals had been permitted 27 to isolate themselves in their cells on death row in East Block without more intensive mental health care and intervention. 28

9. Similarly, as to Prisoner EEE, Dr. Monthei tells a different story than the
 records he relies upon tell concerning the prisoner. For example, Dr. Monthei states that
 Prisoner EEE "is currently not prescribed psychotropic medication," but does not explain
 that this is because he refuses all such medications and has not been determined to meet
 the criteria for involuntary medication. (Monthei Decl. at ¶ 36, line 7.) As the medical
 record progress notes for Prisoner EEE explain in the section below:

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Pt is known for chronic, moderate paranoid fears, isolative tendencies, and self-neglect. He has been non-compliant with Haldol since last year. He has been under Keyhea orders in the past but these expired in 2009.

9 (Ex. 7 to Vorous Confidential Decl. at 089, March 28, 2013 Progress Note.) The same
10 progress note states that Prisoner EEE continues to refuse psychiatric medications. These
11 progress notes are consistent with what I found when interviewing prisoner EEE and when
12 reviewing his earlier medical records.

13 10. Some of Dr. Monthei's descriptions acknowledge the seriousness of the 14 prisoners' situation and confirm my earlier findings. For example, Dr. Monthei states that 15 Prisoner FFF, whom I found to be a "chronically suicidal, high risk prisoner" who needs 16 inpatient care (3/14/13 Stewart Decl. at ¶ 468), "did see improvement within the several months" (Monthei Decl. at ¶ 37, line 18). However, he then explains that on March 8, 17 18 2013, she was placed into a crisis bed for suicidal ideation and that while in the crisis bed 19 housing, she "engaged in self-injurious behavior such as head-banging and cutting" and 20 was referred to the acute inpatient program at CMF. (Id. at ¶ 37, lines 24-25.) In other 21 words, her clinical course confirmed my assessment and warning in my March 14, 2013 declaration about her need for a higher level of care. 22

11. In most of the case reviews in his declaration, Dr. Monthei references the
groups and other treatment that prisoners are "offered" rather than indicating how many
hours and what types of treatment the prisoners are actually accepting and actually
receiving. The distinction between treatment "offered" and treatment actually "received"
is critical because a mental health patient's refusal of treatment can be a sign of the
seriousness of their mental health condition or of deterioration in their level of functioning.

ase 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 6 of 35

Also, in my experience, refusal to attend treatment in a forensic mental health setting is
 often of particular concern, because prisoners are generally quite easy for staff to locate
 and to encourage to participate in groups and other treatment activities. By contrast,
 individuals in the community who miss treatment sessions often explain that they had
 difficulty with work conflicts, parental duties, or transportation, difficulties that are
 generally not present in the prison context.

7 12. For example, in his declaration, Dr. Monthei indicates that Prisoner GGG is 8 offered a variety of types of mental health therapy and groups. (See Monthei Decl. at ¶ 38, 9 lines 10-13.) However, the records attached as Exhibit 11 to the Vorous Declaration do 10 not include any records of attendance at out-of-cell treatment groups, only meetings with 11 his case manager and in-cell meetings with the recreational therapist. (See Ex. 11 to 12 Vorous Confidential Decl. at 167-180.) When I met him, Prisoner GGG told me that he 13 does not go to groups, and I concluded after evaluating him that he is very psychotic and 14 not taking medications. (See 3/14/13 Stewart Decl. at ¶ 469.) Nothing in Dr. Monthei's 15 declarations or the attached medical records contradicts my findings and conclusions 16 regarding Prisoner GGG.

17 13. In another example, Dr. Monthei says that Prisoner HHH's "participation in the [new specialized care program] has included the following mental health interventions: 18 19 individual therapy, group therapy, daily wellness checks, bi-monthly psychiatric contacts, 20 recreational therapy, therapeutic yards, and month interdisciplinary treatment team 21 meetings." (Monthei Decl. at ¶ 39, lines 25-28.) However, the treatment records for 22 Prisoner HHH uniformly indicated that he never leaves his cell for treatment. The most 23 recent individual treatment team meeting note from April 16, 2013 makes clear that 24 Prisoner HHH "continues to refuse groups which are offered daily." (Ex. 14 to Vorous 25 Confidential Decl. at 212.)

26 14. Using almost identical language, Dr. Monthei asserts that Prisoner III "has
27 been offered the following mental health treatment interventions: individual therapy,
28 group therapy, daily wellness checks, bi-monthly psychiatric contacts, recreational

case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 7 of 35

therapy, therapeutic yard, and monthly interdisciplinary treatment team meetings." 1 2 (Monthei Decl. at ¶ 40, lines 9-12.) However, the most recent treatment notes for Prisoner 3 III attached to the Vorous Confidential Declaration explained on March 25, 2013 that 4 Prisoner III "doesn't like to go out to yard because he feels there is 'no need' for him to 5 go" and also noted in an individual contact note on April 11, 2013 that the prisoner "did not get up from bed or turn on light" and refused to come out of his cell for his regular 6 7 individual case manager contact. (Ex. 16 to Vorous Confidential Decl. at 225, 231.) A 8 note from April 16, 2013 indicates that he is "encouraged to attend groups as his 9 attendance has declined in recent weeks." (Id. at 233.) The last note in the set of medical records indicates that Prisoner III "is scheduled for numerous groups which he frequently 10 refuses." (Id. at 235.) 11

12 15. Dr. Monthei also cites Progress Notes from March 11, 2013 to April 17, 13 2013 as indicating that Prisoner III "has demonstrated 'a progressive improvement in his 14 functioning, grooming, and mental health service participation." (Monthei Decl. at ¶ 40, 15 lines 14-15.) However the treatment note dated April 16, 2013 notes that Prisoner III's "group attendance has decreased recently" and also explains that Prisoner III "continues to 16 correspond with 'the underground' and 'nation patrol'" and also that Prisoner III 17 18 "continues to believe he frequently transforms into a 'new [Prisoner III]' that is distinct from previous versions of himself, his brain is located in his legs, and he has a computer 19 20 chip in his neck." (Ex. 16 to Vorous Confidential Decl. at 233.) Finally, in the last note 21 concerning Prisoner III in Exhibit 16 to the Vorous Confidential Declaration, it states that 22 Prisoner III "abruptly asked this writer [i.e. his clinician] if I had a new body, and whether 23 the computers 'painted your armpits before you leave.'" (Id. at 235.) Clearly, Prisoner III 24 remains delusional, as he was when I saw him cell front in East Block on February 26, 25 2013 and he was raving incoherently and unwilling to speak to me. These descriptions from the treatment records are clearly descriptions of a profoundly mentally ill individual 26 27 who requires long-term, intensive mental health treatment at an intermediate inpatient level of care. 28

My review of these medical records confirms my conclusion in my
 March 14, 2013 Declaration that "I was alarmed by the degree of psychiatric disability that
 I observed among the death row prisoners I interviewed. These individuals in the new
 Specialized Care Program were all very acutely mentally ill, and many of them had been
 left to suffer in very regressed, psychotic, and/or gravely disabled state with very little
 intervention for years at a time." (3/14/13 Stewart Decl. at ¶ 474.)

7

My Experiences Working With Death Row Prisoners

8 17. Defendants' Opposition Brief asserts that I "have failed to indicate [my] background working with or evaluating condemned populations" and they assert that I 9 10 have never run "a program in a correctional facility for condemned inmates." (Defs.' Opp'n at 6:17-19.) In my work as a forensic psychiatrist, I have evaluated approximately 11 12 200 condemned mentally ill inmates in California and across the nation. I have also frequently testified in court concerning the mental health condition of these condemned 13 14 prisoners, and I have frequently been qualified as an expert in these proceedings. And 15 therefore, I am very familiar with the severity and types of mental illness commonly seen in this population. Although the mental illness among this population is often exacerbated 16 by the stress of death row living, these individuals generally suffer from the same types of 17 18 mental illness as non-death row prisoners. For this reason it is critical that they have 19 access to all of the same levels of mental health care as non-death row prisoners, including 20 intermediate inpatient care.

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My Review of the Description of the Specialized Care Program in Dr. Monthei's Declaration

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18. I have also reviewed the portion of Dr. Monthei's Declaration describing the
Specialized Care program at San Quentin. (*See* Monthei Decl. at ¶¶ 4-26.)

19. As an initial matter, I note that in paragraph 4 of his Declaration,
Dr. Monthei explains that the Specialized Care program was developed to meet the
treatment needs of condemned individuals who met the criteria for placement in the DSH
intermediate care facility programs. Based on my assessments of individuals in this

Case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 9 of 35

program as well as file reviews when I visited San Quentin on February 26, 2013, it is my
opinion that the individuals I met who were in this program all were extremely mentally ill
individuals who require an inpatient level of care. (3/14/13 Stewart Decl. at ¶¶ 458-471,
474.) In other words, it appears that we both agree that the prisoners in this program meet
the criteria for an intermediate hospital-based mental health treatment program.

- 6 20. Dr. Monthei's Declaration asserts that the Specialized Care program is based
 7 on the "assertive community treatment model" and he explains that because of this model,
 8 the managers of the program have been unable to define admission and discharge criteria.
 9 Specifically, he explains that during a visit by the Special Master's experts to the program
 10 in December 2012:
 - I explained why the services proved under the Specialized Care plan were not amenable to formal operating procedures defining admission and discharge criteria. Specifically, I explained that the model of assertive community treatment and emphasis on individual care, did not allow for such exacting program definitions given that we were following a model in which the service defined the level of care rather than the level of care defining the services provided.
- 15 (Monthei Decl. at ¶ 14, lines 24-1.)

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21. 16 This statement does not make sense to me. The level of care provided to any given mentally ill individual should be defined by the mental health care needs of the 17 individual patient. I am familiar with the model of assertive community treatment. As 18 19 noted in my Curriculum Vitae, I served as the Chief of the Intensive Psychiatric 20 Community Care Program (IPCC) at the Department of Veteran's Affairs Medical Center in San Francisco between March of 1995 and January 1996. In this position, I was the 21 22 managing psychiatrist for an assertive community treatment program. Such treatment 23 programs were instituted in the community to treat individuals with chronic mental health 24 conditions who are frequently hospitalized. The idea of these intensive outpatient 25 treatment models was that more extensive outpatient treatment, while expensive, would reduce the duration and frequency of hospitalizations for this group of individuals and 26 27maximize their ability to function in the community. In the California prison system, my understanding of the analogue for treatment programs of this sort in the community is the 28

ase 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 10 of 35

1 Enhanced Outpatient Program, a program designed to maximize functioning and return the 2 mentally ill prisoners to general population settings. This kind of program does not in my opinion provide a substitute for hospital-based care at the intermediate inpatient level. 3 Moreover, given that Dr. Monthei indicates the target population for his Specialized Care 4 5 program is those individuals meeting the criteria for admission to inpatient care, this is not the appropriate population for an assertive community treatment program model, unless 6 7 and until they return from inpatient hospitalization. Moreover, operating procedures, including admission and discharge criteria, are integral to the successful functioning of any 8 9 mental health care unit or program.

10 22. In his Declaration, Dr. Monthei says that "[d]ue to the unique nature of the condemned inmate population, we believe that providing services near the inmate's home 11 12 and within their community is clinically indicated." (Monthei Decl. at ¶ 6, lines 27-28.) As stated above, it is my belief that the psychiatric needs of the inmate population are not 13 14 significantly different from the needs of the general population. The whole point of 15 assertive community treatment is to keep people out of the hospital as much as possible, but individuals receiving this form of treatment nonetheless must be provided with 16 inpatient hospital care when they need it. Depriving an individual of the level of care they 17 need is never clinically appropriate. A community treatment model is not appropriate for 18 19 individuals like those I evaluated at San Quentin, whose condition has deteriorated to the 20point that they already require inpatient hospitalization.

23. 21 What is required for these class members at San Quentin is what the program guide provides for: "highly structured inpatient psychiatric care with 24-hour nursing 22 supervision" for patients who "would benefit from a comprehensive treatment program 23 24 with an emphasis on skill (i.e. coping, daily living, medication compliance) development 25 with increased programming and structured treatment environment." (Ex. 2 to Decl. of William Downer in Support of Defs.' Opp'n, Docket No. 4585 (Program Guide 12-6-7).) 26 27 The program guide also outlines the breadth of treatment programs available in ICF 28 hospital programs: "an individualized treatment program is developed from a wide variety

1 of treatment modalities including group and individual psychotherapy, medication 2 management, depression and crisis management, training in daily living skills and 3 interpersonal skills, substance abuse, management of assaultive behavior, supportive 4 counseling, modification of maladaptive behaviors, and educational and vocational 5 programs." Id. A person who needs inpatient hospital care needs inpatient hospital care, 6 not something less. It is my opinion that if given a lengthy period of appropriate treatment 7 at the intermediate inpatient level in a psychiatric hospital, many or most of the individuals 8 I met who were identified as needing treatment in the new Specialized Care Program at San Quentin could see a meaningful reduction in their suicidal risk, psychotic symptoms, 9 10 and other mental health symptoms.

11 My Review of the Coroner's Report Concerning the Death of a Coleman Class Member in the SVPP Intermediate Inpatient Psychiatric Program on March 22, 2013

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24. 13 I also reviewed the Monterey County Sheriff-Coroner's Report concerning 14 the death of a Coleman class member in the SVPP inpatient program on March 22, 2013. 15 This Report was cited in Defendants' Opposition as evidence that this death was 16 accidental. (See Decl. of Kathryn Radtkey-Gaither in Supp. of Defs.' Opp'n, Docket No. 17 4602, at ¶ 36.) I noted from the report that this individual, when examined by the Coroner, had a sodium level of 99 mmol/L. (Ex. 1 to Declaration of Krista Stone-Manista.) The 18 19 normal range is 135-150 mmol/L. The Coroner's Report states that this sodium level "is 20consistent with dilutional hyponatremia and is caused by the acute intake of large volumes 21 of water over a short period of time." (Coroner's Report at 4.) The report also notes that 22 this individual "had been previously hospitalized for acute mental status changes related to 23 hyponatremia, believed at the time to be due to psychogenic polydipsia." (Id.) This prior 24 hospitalization took place in November of 2012 while the patient was in the SVPP 25 program.

26 25. Psychogenic polydipsia is a serious psychiatric condition that requires close
27 monitoring and ongoing intensive treatment given its potentially fatal effects. I have not
28 reviewed any medical records or suicide reviews concerning this recent prisoner death,

dase 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 12 of 35

other than the Coroner's report. However, at a minimum, this death raises concerns about 1 2 proper supervision of a prisoner with a recent history of psychogenic polydipsia, which 3 was severe enough to require treatment in an outside hospital. The standard of care for a 4 patient with this condition requires that the patient be placed on water restriction, which 5 includes strictly limiting access to water, and frequent monitoring of serum electrolytes to 6 ensure that the patient is not surreptitiously consuming excessive water. Given the 7 concerns raised in my prior declaration about DSH staffing levels, this death also at the 8 very least illustrates the high stakes and severe potential dangers of staffing shortages in an 9 inpatient psychiatric hospital, given that such shortages could make it difficult or 10 impossible to adequately monitor an individual with this condition.

26. Psychogenic Polydipsia is commonly associated with untreated or
undertreated mania. Often patients in a manic phase will consume large quantities of
water in a pathologic manner, as was apparently the case with this prisoner. Questions
about the quality of the decedents' psychiatric care for his Schizoaffective Disorder are
thus also raised by this patient's death.

I do so declare, under the penalty of perjury under the laws of the United States and
of the State of California, that the foregoing is true and correct and that this declaration
was executed this 15th day of May 2013, at San Francisco, California.

Pablo Stewart, M.D.

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Case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 13 of 35

EXHIBIT A

CURRICULUM VITAE

PABLO STEWART, M.D. 824 Ashbury Street San Francisco, California 94117 (415) 753-0321; fax (415) 753-5479; e-mail: pab4emi@aol.com (Updated January 2013)

EDUCATION:	University of California School of Medicine, San Francisco, California, M.D., 1982
	United States Naval Academy Annapolis, MD, B.S. 1973, Major: Chemistry
<u>LICENSURE:</u>	California Medical License #GO50899 Hawai'i Medical License #MD11784 Federal Drug Enforcement Agency #BS0546981 Diplomate in Psychiatry, American Board of Psychiatry and Neurology, Certificate #32564
ΔΟΔΟΕΜΙΟ ΔΡΡΟΙΝΤΜΕΙ	NTS:

ACADEMIC APPOINTMENTS:

September 2006- Present	<u>Academic Appointment:</u> Clinical Professor, Department of Psychiatry, University of California, San Francisco, School of Medicine.
July 1995 - August 2006	<u>Academic Appointment:</u> Associate Clinical Professor, Department of Psychiatry, University of California, San Francisco, School of Medicine.
August 1989 - June 1995	<u>Academic Appointment:</u> Assistant Clinical Professor, Department of Psychiatry, University of California, San Francisco, School of Medicine.
August 1986 - July 1989	<u>Academic Appointment:</u> Clinical Instructor, Department of Psychiatry, University of California, San Francisco, School of Medicine.
EMPLOYMENT:	

December 1996-	<u>Psychiatric Consultant</u>
Present	Provide consultation to governmental and private agencies on a
	variety of psychiatric, forensic, substance abuse and organizational
	issues; extensive experience in all phases of capital litigation.

Case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 15 of 35

January 1997- September 1998	Director of Clinical Services, San Francisco Target Cities <u>Project</u> . Overall responsibility for ensuring the quality of the clinical services provided by the various departments of the project including the Central Intake Unit, the ACCESS Project and the San Francisco Drug Court Also responsible for providing clinical in- service trainings for the staff of the Project and community agencies that requested technical assistance.
February 1996 - November 1996	Medical Director, Comprehensive Homeless Center, Department of Veterans Affairs Medical Center, San Francisco. Overall responsibility for the medical and psychiatric services at the Homeless Center.
March 1995 - January 1996	<u>Chief, Intensive Psychiatric Community Care Program,</u> (IPCC) Department of Veterans Affairs Medical Center, San <u>Francisco.</u> Overall clinical/administrative responsibility for the IPCC, a community based case management program. Duties also include medical/psychiatric consultation to Veteran Comprehensive Homeless Center. This is a social work managed program that provides comprehensive social services to homeless veterans.
April 1991 - February 1995	<u>Chief, Substance Abuse Inpatient Unit, (SAIU), Department</u> of Veterans Affairs Medical Center, San Francisco. Overall clinical/administrative responsibility for SAIU.
September 1990 - March 1991	<u>Psychiatrist, Substance Abuse Inpatient Unit, Veterans</u> <u>Affairs Medical Center, San Francisco.</u> Clinical responsibility for patients admitted to SAIU. Provide consultation to the Medical/Surgical Units regarding patients with substance abuse issues.
August 1988 - December 1989	Director, Forensic Psychiatric Services, City and County of San Francisco. Administrative and clinical responsibility for psychiatric services provided to the inmate population of San Francisco. Duties included direct clinical and administrative responsibility for the Jail Psychiatric Services and the Forensic Unit at San Francisco General Hospital.
July 1986 - August 1990	Senior Attending Psychiatrist, Forensic Unit, University of California, San Francisco General Hospital. Administrative and clinical responsibility for a 12-bed, maximum-security psychiatric ward. Clinical supervision for psychiatric residents, postdoctoral psychology fellows and medical students assigned to the ward. Liaison with Jail Psychiatric Services, City and County of San Francisco. Advise San Francisco City Attorney on issues pertaining to forensic psychiatry.

Case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 16 of 35

July 1985 June 1986	<u>Chief Resident, Department of Psychiatry, University of</u> <u>California San Francisco General Hospital.</u> Team leader of the Latino-focus inpatient treatment team (involving 10-12 patients with bicultural/bilingual issues); direct clinical supervision of 7 psychiatric residents and 3-6 medical students; organized weekly departmental Grand Rounds; administered and supervised departmental residents' call schedule; psychiatric consultant to hospital general medical clinic; assistant coordinator of medical student education; group seminar leader for introduction to clinical psychiatry course for UCSF second year medical students.
July 1984 - March 1987	<u>Physician Specialist, Westside Crisis Center, San Francisco,</u> <u>CA.</u> Responsibility for Crisis Center operations during assigned shifts; admitting privileges at Mount Zion Hospital. Provided psychiatric consultation for the patients admitted to Mount Zion Hospital when requested.
April 1984 - July 1985	Psychiatric Consultant, Marin Alternative Treatment, (ACT). Provided medical and psychiatric evaluation and treatment of residential drug and alcohol clients; consultant to staff concerning medical/psychiatric issues.
August 1983 - November 1984	Physician Specialist, Mission Mental Health Crisis Center, San Francisco, CA. Clinical responsibility for Crisis Center clients; consultant to staff concerning medical/psychiatric issues.
July 1982- July 1985	Psychiatric Resident, University of California, San Francisco. Primary Therapist and Medical Consultant for the adult inpatient units at San Francisco General Hospital and San Francisco Veterans Affairs Medical Center; Medical Coordinator/Primary Therapist - Alcohol Inpatient Unit and Substance Abuse Clinic at San Francisco Veterans Affairs Medical Center; Outpatient Adult/Child Psychotherapist; Psychiatric Consultant - Adult Day Treatment Center - San Francisco Veterans Affairs Medical Center; Primary Therapist and Medial Consultant - San Francisco General Hospital Psychiatric Emergency Services; Psychiatric Consultant, Inpatient Medical/Surgical Units - San Francisco General Hospital.
June 1973 - July 1978	Infantry Officer - United States Marine Corps. Rifle Platoon Commander; Anti-tank Platoon Commander; 81mm Mortar Platoon Commander; Rifle Company Executive Officer; Rifle Company Commander; Assistant Battalion Operations Officer; Embarkation Officer; Recruitment Officer; Drug, Alcohol and Human Relations Counselor; Parachutist and Scuba Diver; Commander of a Vietnamese Refugee Camp. Received an Honorable Discharge. Highest rank attained was Captain.

HONORS AND AWARDS:

June 1995	Selected by the graduating class of the University of California, San Francisco, School of Medicine as the outstanding psychiatric faculty member for the academic year 1994/1995.
June 1993	Selected by the class of 1996, University of California, San Francisco, School of Medicine as outstanding lecturer, academic year 1992/1993.
May 1993	Elected to Membership of Medical Honor Society, AOA, by the AOA Member of the 1993 Graduating Class of the University of California, San Francisco, School of Medicine.
May 1991	Selected by the graduating class of the University of California, San Francisco, School of Medicine as the outstanding psychiatric faculty member for the academic year 1990-1991.
May 1990	Selected by the graduating class of the University of California, San Francisco, School of Medicine as the outstanding psychiatric faculty member for the academic year 1989-1990.
May 1989	Selected by the graduating class of the University of California, San Francisco, School of Medicine as the outstanding psychiatric faculty member for the academic year 1988-1989.
May 1987	Selected by the faculty and students of the University of California, San Francisco, School of Medicine as the recipient of the Henry J. Kaiser Award For Excellence in Teaching.
May 1987	Selected by the graduating class of the University of California, San Francisco, School of Medicine as Outstanding Psychiatric Resident. The award covered the period of 1 July 1985 to 30 June 1986, during which time I served as Chief Psychiatric resident, San Francisco General Hospital.
May 1985	Selected by the graduating class of the University of California, San Francisco, School of Medicine as Outstanding Psychiatric Resident.
1985	Mead-Johnson American Psychiatric Association Fellowship. One of sixteen nation-wide psychiatric residents selected because of a demonstrated commitment to public sector psychiatry. Made presentation at Annual Hospital and Community Psychiatry Meeting in Montreal, Canada in October 1985, on the "Psychiatric Aspects of the Acquired Immunodeficiency Syndrome."

Case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 18 of 35

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June 2000- May 2008	California Association of Drug Court Professionals.
July 1997- June 1998	President, Alumni-Faculty Association, University of California, San Francisco, School of Medicine.
July 1996 - June 1997	President-Elect, Alumni-Faculty Association, University of California, San Francisco, School of Medicine.
July 1995 - June 1996	Vice President, Northern California Area, Alumni-Faculty Association, University of California, San Francisco, School of Medicine.
April 1995 - April 2002	Associate Clinical Member, American Group Psychotherapy Association.
July 1992 - June 1995	Secretary-Treasurer, Alumni-Faculty Association, University of California, San Francisco, School of Medicine.
July 1990 - June 1992	Councilor-at-large, Alumni-Faculty Association, University of California, San Francisco, School of Medicine
PUBLIC SERVICE:	
June 1992 -	Examiner, American Board of Psychiatry and Neurology, Inc.
November 1992 - January 1994	California Tuberculosis Elimination Task Force, Institutional Control Subcommittee.
September 2000- April 2005	Editorial Advisory Board, Juvenile Correctional Mental Health Report.
May 2001- Present	Psychiatric and Substance Abuse Consultant, San Francisco Police Officers' Association.
January 2002- June 2003	Psychiatric Consultant, San Francisco Sheriff's Department Peer Support Program.
February 2003- April 2004	Proposition "N" (Care Not Cash) Service Providers' Advisory Committee, Department of Human Services, City and County of San Francisco.
December 2003- January 2004	Member of San Francisco Mayor-Elect Gavin Newsom's Transition Team.
February 2004- June 2004	Mayor's Homeless Coalition, San Francisco, CA.
April 2004- January 2006	Member of Human Services Commission, City and County of San Francisco.

Case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 19 of 35

February 2006- January 2007	Vice President, Human Services Commission, City and County of San Francisco.
February 2007- Present	President, Human Services Commission, City and County of San Francisco.
UNIVERSITY SERVICE:	
July 1999- July 2001	Seminar Leader, National Youth Leadership Forum On Medicine.
October 1999- October 2001	Lecturer, University of California, San Francisco, School of Medicine Post Baccalaureate Reapplicant Program.
November 1998- November 2001	Lecturer, University of California, San Francisco, School of Nursing, Department of Family Health Care Nursing. Lecture to the Advanced Practice Nurse Practitioner Students on Alcohol, Tobacco and Other Drug Dependencies.
January 1994 - January 2001	Preceptor/Lecturer, UCSF Homeless Clinic Project.
June 1990 - November 1996	Curriculum Advisor, University of California, San Francisco, School of Medicine.
June 1987 - June 1992	Facilitate weekly Support Groups for interns in the Department of Medicine. Also, provide crisis intervention and psychiatric referral for Department of Medicine housestaff.
January 1987 – June 1988	Student Impairment Committee, University of California San Francisco, School of Medicine. Advise the Dean of the School of Medicine on methods to identify, treat and prevent student impairment.
January 1986 – June 1996	Recruitment/Retention Subcommittee of the Admissions Committee, University of California, San Francisco, School of Medicine. Advise the Dean of the School of Medicine on methods to attract and retain minority students and faculty.
October 1986 - September 1987	Member Steering Committee for the Hispanic Medical Education Resource Committee. Plan and present educational programs to increase awareness of the special health needs of Hispanics in the United States.
September 1983 - June 1989	Admissions Committee, University of California, School of Medicine. Duties included screening applications and interviewing candidates for medical school.
October 1978 - December 1980	Co-Founder and Director of the University of California, San Francisco Running Clinic. Provided free instruction to the public on proper methods of exercise and preventative health measures.

TEACHING RESPONSIBILITIES:

July 2003- Present	Facilitate weekly psychotherapy training group for residents in the Department of Psychiatry.
September 2001- June 2003	Supervisor, San Mateo County Psychiatric Residency Program.
January 2002- January 2004	Course Coordinator of Elective Course University of California, San Francisco, School of Medicine, "Prisoner Health." This is a 1-unit course, which covers the unique health needs of prisoners.
April 1999- April 2001	Lecturer, UCSF School of Pharmacy, Committee for Drug Awareness Community Outreach Project.
February 1998- June 2000	Lecturer, UCSF Student Enrichment Program.
January 1996 - November 1996	Supervisor, Psychiatry 110 students, Veterans Comprehensive Homeless Center.
March 1995- Present	Supervisor, UCSF School of Medicine, Department of Psychiatry, Substance Abuse Fellowship Program.
September 1994 - June 1999	Course Coordinator of Elective Course, University of California, San Francisco, School of Medicine. Designed, planned and taught course, Psychiatry 170.02, "Drug and Alcohol Abuse." This is a 1-unit course, which covers the major aspects of drug and alcohol abuse.
August 1994 - February 2006	Supervisor, Psychiatric Continuity Clinic, Haight Ashbury Free Clinic, Drug Detoxification and Aftercare Project. Supervise 4th Year medical students in the care of dual diagnostic patients.
February 1994 - February 2006	Consultant, Napa State Hospital Chemical Dependency Program Monthly Conference.
July 1992 - June 1994	Facilitate weekly psychiatric intern seminar, "Psychiatric Aspects of Medicine," University of California, San Francisco, School of Medicine.
July 1991- Present	Group and individual psychotherapy supervisor, Outpatient Clinic, Department of Psychiatry, University of California, San Francisco, School of Medicine.
January 1991	Lecturer, University of California, San Francisco, School of Pharmacy course, "Addictionology and Substance Abuse Prevention."
September 1990 - February 1995	Clinical supervisor, substance abuse fellows, and psychiatric residents, Substance Abuse Inpatient Unit, San Francisco Veterans Affairs Medical Center.

Case 2:90-cv-00520-LKK-JFM Document 4617-1 Filed 05/16/13 Page 21 of 35

September 1990 - November 1996	Off ward supervisor, PGY II psychiatric residents, Psychiatric Inpatient Unit, San Francisco Veterans Affairs Medical Center.
September 1990 -	Group therapy supervisor, Psychiatric Inpatient Unit, (PIU),
June 1991	San Francisco Veterans Affairs Medical Center.
September 1990 -	Course coordinator, Psychiatry 110, San Francisco Veterans
June 1994	Affairs Medical Center.
September 1989 - November 1996	Seminar leader/lecturer, Psychiatry 100 A/B.
July 1988 -	Clinical supervisor, PGY III psychiatric residents, Haight
June 1992	Ashbury Free Clinic, Drug Detoxification and Aftercare Project.
September 1987 -	Tavistock Organizational Consultant.
Present	Extensive experience as a consultant in numerous Tavistock conferences.
September 1987 - December 1993	Course Coordinator of Elective Course, University of California, San Francisco, School of Medicine. Designed, planned and taught course, Psychiatry 170.02, "Alcoholism". This is a 1- unit course offered to medical students, which covers alcoholism with special emphasis on the health professional. This course is offered fall quarter each academic year.
July 1987-	Clinical supervisor/lecturer FCM 110, San Francisco
June 1994	General Hospital and Veterans Affairs Medical Center.
July 1986 - June 1996	Seminar leader/lecturer Psychiatry 131 A/B.
July 1986 -	Clinical supervisor, Psychology interns/fellows,
August 1990	San Francisco General Hospital.
July 1986 -	Clinical supervisor PGY I psychiatric residents,
August 1990	San Francisco General Hospital
July 1986 - August 1990	Coordinator of Medical Student Education, University of California, San Francisco General Hospital, Department of Psychiatry. Teach seminars and supervise clerkships to medical students including: Psychological Core of Medicine 100 A/B; Introduction to Clinical Psychiatry 131 A/B; Core Psychiatric Clerkship 110 and Advanced Clinical Clerkship in Psychiatry 141.01.
July 1985 - August 1990	Psychiatric Consultant to the General Medical Clinic, University of California, San Francisco General Hospital. Teach and supervise medical residents in interviewing and communication skills. Provide instruction to the clinic on the psychiatric aspects of ambulatory medical care.

COMMUNITY SERVICE AND PRISON CONDITIONS EXPERT WORK:

October 2007 -Present	Plaintiffs' expert in 2007-2010 overcrowding litigation and in opposing current efforts by defendants to terminate the injunctive relief in <i>Coleman v. Brown</i> , United States District Court, Eastern District of California, Case No. 2:90-cv-00520- LKK-JFM. The Litigation involves plaintiffs' claim that overcrowding is causing unconstitutional medical and mental health care in the California state prison system. Plaintiffs won an order requiring the state to reduce its population by approximately 45,000 state prisoners. My expert opinion was cited several times in the landmark United States Supreme Court decision upholding the prison population reduction order. <i>See Plata v. Brown</i> , U.S, 131 S. Ct. 1910, at 1933, n.6, and at 1935, 179 L. Ed. 2d 969, at 992, n. 6, and at 994 (2011).
July/August 2008	Plaintiff psychiatric expert in the case of Fred Graves, et al., plaintiffs v. Joseph Arpaio, et al., defendants (District Court, Phoenix, Arizona.) This case involved Federal oversight of the mental health treatment provided to pre-trial detainees in the Maricopa County Jails.
February 2006- December 2009	Board of Directors, Physician Foundation at California Pacific Medical Center.
June 2004- September 2012	Psychiatric Consultant, Hawaii Drug Court.
November 2003- June 2008	Organizational/Psychiatric Consultant, State of Hawaii, Department of Human Services.
June 2003- December 2004	Monitor of the psychiatric sections of the "Ayers Agreement," New Mexico Corrections Department (NMCD). This is a settlement arrived at between plaintiffs and the NMCD regarding the provision of constitutionally mandated psychiatric services for inmates placed within the Department's "Supermax" unit.
October 2002- August 2006	Juvenile Mental Health and Medical Consultant, United States Department of Justice, Civil Rights Division, Special Litigation Section.
July 1998- June 2000	Psychiatric Consultant to the Pacific Research and Training Alliance's Alcohol and Drug Disability Technical Assistance Project. This Project provides assistance to programs and communities that will have long lasting impact and permanently improve the quality of alcohol and other drug services available to individuals with disabilities.
July 1998- February 2004	Psychiatric Consultant to the National Council on Crime and Delinquency (NCCD) in its monitoring of the State of Georgia's secure juvenile detention and treatment facilities. NCCD is acting as the monitor of the agreement between the United States and Georgia to improve the quality of the juvenile justice facilities,

	critical mental health, medical and educational services, and treatment programs. NCCD ceased to be the monitoring agency for this project in June 1999. At that time, the Institute of Crime, Justice and Corrections at the George Washington University became the monitoring agency. The work remained unchanged.
July 1998- July 2001	Psychiatric Consultant to the San Francisco Campaign Against Drug Abuse (SF CADA).
March 1997- Present	Technical Assistance Consultant, Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, Department of Health and Human Services.
January 1996- June 2003	Psychiatric Consultant to the San Francisco Drug Court.
November 1993- June 2001	Executive Committee, Addiction Technology Transfer Center (ATTC), University of California, San Diego.
December 1992 - December 1994	Institutional Review Board, Haight Ashbury Free Clinics, Inc. Review all research protocols for the clinic per Department of Health and Human Services guidelines.
June 1991- February 2006	Chief of Psychiatric Services, Haight Ashbury Free Clinic. Overall responsibility for psychiatric services at the clinic.
December 1990 - June 1991	Medical Director, Haight Ashbury Free Clinic, Drug Detoxification and Aftercare Project. Responsible for directing all medical and psychiatric care at the clinic.
October 1996- July 1997	Psychiatric Expert for the U. S. Federal Court in the case of Madrid v. Gomez. Report directly to the Special Master regarding the implementation of constitutionally mandated psychiatric care to the inmates at Pelican Bay State Prison.
April 1990 - January 2000	Psychiatric Expert for the U.S. Federal Court in the case of Gates v. Deukmejian. Report directly to the court regarding implementation and monitoring of the consent decree in this case. (This case involves the provision of adequate psychiatric care to the inmates at the California Medical Facility, Vacaville).
January 1984 - December 1990	Chief of Psychiatric Services, Haight Ashbury Free Clinic, Drug Detoxification and Aftercare Project. Direct medical/psychiatric management of project clients; consultant to staff on substance abuse issues. Special emphasis on dual diagnostic patients.
July - December 1981	Medical/Psychiatric Consultant, Youth Services, Hospitality Hospitality House, San Francisco, CA. Advised youth services staff on client management. Provided training on various topics related to adolescents. Facilitated weekly client support groups.

SERVICE TO ELEMENTARY AND SECONDARY EDUCATION:

January 1996 - June 2002	Baseball, Basketball and Volleyball Coach, Convent of the Sacred Heart Elementary School, San Francisco, CA.
September 1994 - Present	Soccer Coach, Convent of the Sacred Heart Elementary School, San Francisco, CA.
June 1991- June 1994	Board of Directors, Pacific Primary School, San Francisco, CA.
April 1989 - July 1996	Umpire, Rincon Valley Little League, Santa Rosa, CA.
September 1988 - May 1995	Numerous presentations on Mental Health/Substance Abuse issues to the student body, Hidden Valley Elementary School and Santa Rosa Jr. High School, Santa Rosa, CA.

PRESENTATIONS:

- 1. San Francisco Treatment Research Unit, University of California, San Francisco, Colloquium #1. (10/12/1990). "The Use of Anti-Depressant Medications with Substance-Abusing Clients."
- 2. Grand Rounds. Department of Psychiatry, University of California, San Francisco, School of Medicine. (12/5/1990). "Advances in the Field of Dual Diagnosis."
- 3. Associates Council, American College of Physicians, Northern California Region, Program for Leadership Conference. (3/3/1991). "Planning a Satisfying Life in Medicine."
- 4. 24th Annual Medical Symposium on Renal Disease, sponsored by the Medical Advisory Board of the National Kidney Foundation of Northern California. (9/11/1991). "The Chronically III Substance Abuser."
- 5. Mentoring Skills Conference, University of California, San Francisco, School of Medicine, Department of Pediatrics. (11/26/91). "Mentoring as an Art."
- 6. Continuing Medical Education Conference, Sponsored by the Department of Psychiatry, University of California, San Francisco, School of Medicine. (4/25/1992). "Clinical & Research Advances in the Treatment of Alcoholism and Drug Abuse."
- 7. First International Conference of Mental Health and Leisure. University of Utah. (7/9/1992). "The Use of Commonly Abused Street Drugs in the Treatment of Mental Illness."
- 8. American Group Psychotherapy Association Annual Meeting. (2/20/1993). "Inpatient Groups in Initial-Stage Addiction Treatment."
- 9. Grand Rounds. Department of Child Psychiatry, Stanford University School of Medicine. (3/17/93, 9/11/96). "Issues in Adolescent Substance Abuse."

- 10. University of California, Extension. Alcohol and Drug Abuse Studies Program. (5/14/93), (6/24/94), (9/22/95), (2/28/97). "Dual Diagnosis."
- 11. American Psychiatric Association Annual Meeting. (5/26/1993). "Issues in the Treatment of the Dual Diagnosis Patient."
- 12. Long Beach Regional Medical Education Center and Social Work Service, San Francisco Veterans Affairs Medical Center Conference on Dual Diagnosis. (6/23/1993). "Dual Diagnosis Treatment Issues."
- 13. Utah Medical Association Annual Meeting. (10/7/93). "Prescription Drug Abuse Helping your Patient, Protecting Yourself."
- 14. Saint Francis Memorial Hospital, San Francisco, Medical Staff Conference. (11/30/1993). "Management of Patients with Dual Diagnosis and Alcohol Withdrawal."
- 15. Haight Ashbury Free Clinic's 27th Anniversary Conference. (6/10/94). "Attention Deficit Disorder, Substance Abuse, Psychiatric Disorders and Related Issues."
- 16. University of California, San Diego. Addiction Technology Transfer Center Annual Summer Clinical Institute: (8/30/94), (8/29/95), (8/5/96), (8/4/97), (8/3/98). "Treating Multiple Disorders."
- 17. National Resource Center on Homelessness and Mental Illness, A Training Institute for Psychiatrists. (9/10/94). "Psychiatry, Homelessness, and Serious Mental Illness."
- 18. Value Behavioral Health/American Psychiatry Management Seminar. (12/1/1994). "Substance Abuse/Dual Diagnosis in the Work Setting."
- 19. Grand Rounds. Department of Oral and Maxillofacial Surgery, University of California, San Francisco, School of Dentistry. (1/24/1995). "Models of Addiction."
- 20. San Francisco State University, School of Social Work, Title IV-E Child Welfare Training Project. (1/25/95, 1/24/96, 1/13/97, 1/21/98, 1/13/99, 1/24/00, 1/12/01). "Demystifying Dual Diagnosis."
- 21. First Annual Conference on the Dually Disordered. (3/10/1995). "Assessment of Substance Abuse." Sponsored by the Division of Mental Health and Substance Abuse Services and Target Cities Project, Department of Public Health, City and County of San Francisco.
- 22. Delta Memorial Hospital, Antioch, California, Medical Staff Conference. (3/28/1995). "Dealing with the Alcohol and Drug Dependent Patient." Sponsored by University of California, San Francisco, School of Medicine, Office of Continuing Medical Education.
- 23. Centre Hospitalier Robert-Giffaard, Beoupont (Quebec), Canada. (11/23/95). "Reconfiguration of Psychiatric Services in Quebec Based on the San Francisco Experience."
- 24. The Labor and Employment Section of the State Bar of California. (1/19/96). "Understanding Alcoholism and its Impact on the Legal Profession." MCCE Conference, San Francisco, CA.

- 25. American Group Psychotherapy Association, Annual Training Institute. (2/13-2/14/96), National Instructor Designate training group.
- 26. American Group Psychotherapy Association, Annual Meeting. (2/10/96). "The Process Group at Work."
- 27. Medical Staff Conference, Kaiser Foundation Hospital, Pleasanton, California, "The Management of Prescription Drug Addiction". (4/24/96)
- 28. International European Drug Abuse Treatment Training Project, Ankaran, Slovenia, "The Management of the Dually Diagnosed Patient in Former Soviet Block Europe". (10/5-10/11/96)
- 29. Contra Costa County Dual Diagnosis Conference, Pleasant Hill, California, "Two Philosophies, Two Approaches: One Client". (11/14/96)
- 30. Faith Initiative Conference, San Francisco, California, "Spirituality: The Forgotten Dimension of Recovery". (11/22/96)
- 31. Alameda County Dual Diagnosis Conference, Alameda, California, "Medical Management of the Dually Diagnosed Patient". (2/4/97, 3/4/97)
- 32. Haight Ashbury Free Clinic's 30th Anniversary Conference, San Francisco, California, "Indicators for the Use of the New Antipsychotics". (6/4/97)
- 33. DPH/Community Substance Abuse Services/San Francisco Target Cities Project sponsored conference, "Intake, Assessment and Service Linkages in the Substance Abuse System of Care", San Francisco, California. (7/31/97)
- 34. The Institute of Addictions Studies and Lewis and Clark College sponsored conference, 1997 Northwest Regional Summer Institute, "Addictions Treatment: What We Know Today, How We'll Practice Tomorrow; Assessment and Treatment of the High-Risk Offender". Wilsonville, Oregon. (8/1/97)
- 35. The California Council of Community Mental Health Agencies Winter Conference, Key Note Presentation, "Combining funding sources and integrating treatment for addiction problems for children, adolescents and adults, as well as coordination of addiction treatment for parents with mental health services to severely emotionally disturbed children." Newport Beach, California. (2/12/98)
- 36. American Group Psychotherapy Association, Annual Training Institute, (2/16-2/28/1998), Intermediate Level Process Group Leader.
- 37. "Multimodal Psychoanalytic Treatment of Psychotic Disorders: Learning from the Quebec Experience." The Haight Ashbury Free Clinics Inc., in conjunction sponsored this seminar with the San Francisco Society for Lacanian Studies and the Lacanian School of Psychoanalysis. San Francisco, California. (3/6-3/8/1998)
- 38. "AIDS Update for Primary Care: Substance Use & HIV: Problem Solving at the Intersection." The East Bay AIDS Education & Training Center and the East Bay AIDS Center, Alta Bates Medical Center, Berkeley, California sponsored this conference. (6/4/1998)

- 39. Haight Ashbury Free Clinic's 31st Anniversary Conference, San Francisco, California, "Commonly Encountered Psychiatric Problems in Women." (6/11/1998)
- 40. Community Networking Breakfast sponsored by San Mateo County Alcohol & Drug Services and Youth Empowering Systems, Belmont, California, "Dual Diagnosis, Two Approaches, Two Philosophies, One Patient." (6/17/1998)
- 41. Grand Rounds, Department of Medicine, Alameda County Medical Center-Highland Campus, Oakland, California, "Medical/Psychiatric Presentation of the Patient with both Psychiatric and Substance Abuse Problems." (6/19/1998)
- 42. "Rehabilitation, Recovery, and Reality: Community Treatment of the Dually Diagnosed Consumer." The Occupational Therapy Association of California, Dominican College of San Rafael and the Psychiatric Occupational Therapy Action Coalition sponsored this conference. San Rafael, California. (6/20/1998)
- 43. "Assessment, Diagnosis and Treatment of the Patient with a Dual Diagnosis", Los Angeles County Department of Mental Health sponsored conference, Los Angeles, CA. (6/29/98)
- 44. Grand Rounds, Wai'anae Coast Comprehensive Health Center, Wai'anae, Hawaii, "Assessment and Treatment of the Patient who presents with concurrent Depression and Substance Abuse." (7/15/1998)
- 45. "Dual Diagnostic Aspects of Methamphetamine Abuse", Hawaii Department of Health, Alcohol and Drug Abuse Division sponsored conference, Honolulu, Hawaii. (9/2/98)
- 46. 9th Annual Advanced Pain and Symptom Management, the Art of Pain Management Conference, sponsored by Visiting Nurses and Hospice of San Francisco. "Care Issues and Pain Management for Chemically Dependent Patients." San Francisco, CA. (9/10/98)
- 47. Latino Behavioral Health Institute Annual Conference, "Margin to Mainstream III: Latino Health Care 2000." "Mental Illness and Substance Abuse Assessment: Diagnosis and Treatment Planning for the Dually Diagnosed", Los Angeles, CA. (9/18/98)
- 48. Chemical Dependency Conference, Department of Mental Health, Napa State Hospital, "Substance Abuse and Major Depressive Disorder." Napa, CA. (9/23/98)
- 49. "Assessment, Diagnosis and Treatment of the Patient with a Dual Diagnosis", San Mateo County Drug and Alcohol Services, Belmont, CA. (9/30/98)
- 50. "Assessment, Diagnosis and Treatment of the Patient with a Dual Diagnosis", Sacramento County Department of Mental Health, Sacramento, CA. (10/13/98)
- 51. California Department of Health, Office of AIDS, 1998 Annual AIDS Case Management Program/Medi-Cal Waiver Program (CMP/MCWP) Conference, "Triple Diagnosis: What's Really Happening with your Patient." Concord, CA. (10/15/98)
- 52. California Mental Health Director's Association Meeting: Dual Diagnosis, Effective Models of Collaboration; "Multiple Problem Patients: Designing a System to Meet Their Unique Needs", San Francisco Park Plaza Hotel. (10/15/98)

- 53. Northwest GTA Health Corporation, PEEL MEMORIAL HOSPITAL, Annual Mental Health Conference, "Recognition and Assessment of Substance Abuse in Mental Illness." Brampton, Ontario, Canada. (10/23/98)
- 54. 1998 California Drug Court Symposium, "Mental Health Issues and Drug Involved Offenders." Sacramento, CA. (12/11/98)
- 55. "Assessment, Diagnosis and Treatment Planning for the Dually Diagnosed", Mono County Alcohol and Drug Programs, Mammoth Lakes, CA. (1/7/99)
- 56. Medical Staff Conference, Kaiser Foundation Hospital, Walnut Creek, CA, "Substance Abuse and Major Depressive Disorder." (1/19/99)
- 57. "Issues and Strategies in the Treatment of Substance Abusers", Alameda County Consolidated Drug Courts, Oakland, CA. (1/22 & 2/5/99)
- 58. Compass Health Care's 12th Annual Winter Conference on Addiction, Tucson, AZ: "Dual Systems, Dual Philosophies, One Patient", "Substance Abuse and Developmental Disabilities" & "Assessment and Treatment of the High Risk Offender." (2/17/99)
- 59. American Group Psychotherapy Association, Annual Training Institute, (2/22-2/24/1999). Entry Level Process Group Leader.
- 60. "Exploring A New Framework: New Technologies For Addiction And Recovery", Maui County Department of Housing and Human Concerns, Malama Family Recovery Center, Maui, Hawaii. (3/5 & 3/6/99)
- 61. "Assessment, Diagnosis and Treatment of the Dual Diagnostic Patient", San Bernardino County Office of Alcohol & Drug Treatment Services, San Bernardino, CA. (3/10/99)
- 62. "Smoking Cessation in the Chronically Mentally III, Part 1", California Department of Mental Health, Napa State Hospital, Napa, CA. (3/11/99)
- 63. "Dual Diagnosis and Effective Methods of Collaboration", County of Tulare Health & Human Services Agency, Visalia, CA. (3/17/99)
- 64. Pfizer Pharmaceuticals sponsored lecture tour of Hawai'i. Lectures included: Major Depressive Disorder and Substance Abuse, Treatment Strategies for Depression and Anxiety with the Substance Abusing Patient, Advances in the Field of Dual Diagnosis & Addressing the Needs of the Patient with Multiple Substance Dependencies. Lecture sites included: Straub Hospital, Honolulu; Maui County Community Mental Health; Veterans Administration Hospital, Honolulu; Hawai'i (Big Island) County Community Mental Health; Mililani (Oahu) Physicians Center; Kahi Mohala (Oahu) Psychiatric Hospital; Hale ola Ka'u (Big Island) Residential Treatment Facility. (4/2-4/9/99)
- 65. "Assessment, Diagnosis and Treatment of the Patient with Multiple Disorders", Mendocino County Department of Public Health, Division of Alcohol & Other Drug Programs, Ukiah, CA. (4/14/99)
- 66. "Assessment of the Substance Abusing & Mentally III Female Patient in Early Recovery", Ujima Family Services Agency, Richmond, CA. (4/21/99)
- 67. California Institute for Mental Health, Adult System of Care Conference, "Partners in Excellence", Riverside, California. (4/29/99)

- 68. "Advances in the Field of Dual Diagnosis", University of Hawai'i School of Medicine, Department of Psychiatry Grand Rounds, Queens Hospital, Honolulu, Hawai'i. (4/30/99)
- 69. State of Hawai'i Department of Health, Mental Health Division, "Strategic Planning to Address the Concerns of the United States Department of Justice for the Alleged Civil Rights Abuses in the Kaneohe State Hospital." Honolulu, Hawai'i. (4/30/99)
- 70. "Assessment, Diagnosis and Treatment Planning for the Patient with Dual/Triple Diagnosis", State of Hawai'i, Department of Health, Drug and Alcohol Abuse Division, Dole Cannery, Honolulu, Hawai'i. (4/30/99)
- 71. 11th Annual Early Intervention Program Conference, State of California Department of Health Services, Office of Aids, "Addressing the Substance Abuse and Mental Health Needs of the HIV (+) Patient." Concord, California. (5/6/99)
- 72. The HIV Challenge Medical Conference, Sponsored by the North County (San Diego) AIDS Coalition, "Addressing the Substance Abuse and Mental Health Needs of the HIV (+) Patient." Escondido, California. (5/7/99)
- 73. "Assessment, Diagnosis and Treatment of the Patient with Multiple Disorders", Sonoma County Community Mental Health's Monthly Grand Rounds, Community Hospital, Santa Rosa, California. (5/13/99)
- 74. "Developing & Providing Effective Services for Dually Diagnosed or High Service Utilizing Consumers", Third annual conference presented by the Southern California Mental Health Directors Association. Anaheim, California. (5/21/99)
- 75. 15th Annual Idaho Conference on Alcohol and Drug Dependency, lectures included "Dual Diagnostic Issues", "Impulse Control Disorders" and "Major Depressive Disorder." Boise State University, Boise, Idaho. (5/25/99)
- 76. "Smoking Cessation in the Chronically Mentally Ill, Part 2", California Department of Mental Health, Napa State Hospital, Napa, California. (6/3/99)
- 77. "Alcohol and Drug Abuse: Systems of Care and Treatment in the United States", Ando Hospital, Kyoto, Japan. (6/14/99)
- 78. "Alcoholism: Practical Approaches to Diagnosis and Treatment", National Institute On Alcoholism, Kurihama National Hospital, Yokosuka, Japan. (6/17/99)
- 79. "Adolescent Drug and Alcohol Abuse", Kusatsu Kinrofukushi Center, Kusatsu, Japan. (6/22/99)
- 80. "Assessment, Diagnosis and Treatment of the Patient with Multiple Diagnoses", Osaka Drug Addiction Rehabilitation Center Support Network, Kobe, Japan. (6/26/99)
- 81. "Assessment, Diagnosis and Treatment of the Patient with Multiple Diagnoses", Santa Barbara County Department of Alcohol, Drug, & Mental Health Services, Buellton, California. (7/13/99)
- 82. "Drug and Alcohol Issues in the Primary Care Setting", County of Tulare Health & Human Services Agency, Edison Ag Tac Center, Tulare, California. (7/15/99)

- 83. "Working with the Substance Abuser in the Criminal Justice System", San Mateo County Alcohol and Drug Services and Adult Probation Department, Redwood City, California. (7/22/99)
- 84. 1999 Summer Clinical Institute In Addiction Studies, University of California, San Diego School of Medicine, Department of Psychiatry. Lectures included: "Triple Diagnosis: HIV, Substance Abuse and Mental Illness. What's Really Happening to your Patient?" "Psychiatric Assessment in the Criminal Justice Setting, Learning to Detect Malingering." La Jolla, California. (8/3/99)
- 85. "Assessment, Diagnosis and Treatment Planning for the Patient with Dual and Triple Diagnoses", Maui County Department of Housing and Human Concerns, Maui Memorial Medical Center. Kahului, Maui. (8/23/99)
- 86. "Proper Assessment of the Asian/Pacific Islander Dual Diagnostic Patient", Asian American Recovery Services, Inc., San Francisco, California. (9/13/99)
- 87. "Assessment and Treatment of the Dual Diagnostic Patient in a Health Maintenance Organization", Alcohol and Drug Abuse Program, the Permanente Medical Group, Inc., Santa Rosa, California. (9/14/99)
- 88. "Dual Diagnosis", Residential Care Providers of Adult Residential Facilities and Facilities for the Elderly, City and County of San Francisco, Department of Public Health, Public Health Division, San Francisco, California. (9/16/99)
- 89. "Medical and Psychiatric Aspects of Methamphetamine Abuse", Fifth Annual Latino Behavioral Health Institute Conference, Universal City, California. (9/23/99)
- 90. "Criminal Justice & Substance Abuse", University of California, San Diego & Arizona Department of Corrections, Phoenix, Arizona. (9/28/99)
- 91. "Creating Balance in the Ohana: Assessment and Treatment Planning", Hale O Ka'u Center, Pahala, Hawai'i. (10/8-10/10/99)
- 92. "Substance Abuse Issues of Runaway and Homeless Youth", Homeless Youth 101, Oakland Asian Cultural Center, Oakland, California. (10/12/99)
- 93. "Mental Illness & Drug Abuse Part II", Sonoma County Department of Mental Health Grand Rounds, Santa Rosa, California. (10/14/99)
- 94. "Dual Diagnosis/Co-Existing Disorders Training", Yolo County Department of Alcohol, Drug and Mental Health Services, Davis, California. (10/21/99)
- 95. "Mental Health/Substance Abuse Assessment Skills for the Frontline Staff", Los Angeles County Department of Mental Health, Los Angeles, California. (1/27/00)
- 96. "Spirituality in Substance Abuse Treatment", Asian American Recovery Services, Inc., San Francisco, California. (3/6/00)
- 97. "What Every Probation Officer Needs to Know about Alcohol Abuse", San Mateo County Probation Department, San Mateo, California. (3/16/00)
- 98. "Empathy at its Finest", Plenary Presentation to the California Forensic Mental Health Association's Annual Conference, Asilomar, California. (3/17/00)

- 99. "Model for Health Appraisal for Minors Entering Detention", Juvenile Justice Health Care Committee's Annual Conference, Asilomar, California. (4/3/00)
- 100. "The Impact of Alcohol/Drug Abuse and Mental Disorders on Adolescent Development", Humboldt County Department of Mental Health and Substance Abuse Services, Eureka, California. (4/4-4/5/00)
- 101. "The Dual Diagnosed Client", Imperial County Children's System of Care Spring Training, Holtville, California. (5/15/00)
- 102. National Association of Drug Court Professionals 6th Annual Training Conference, San Francisco, California. "Managing People of Different Pathologies in Mental Health Courts", (5/31 & 6/1/00); "Assessment and Management of Co-Occurring Disorders" (6/2/00).
- 103. "Culture, Age and Gender Specific Perspectives on Dual Diagnosis", University of California Berkeley Extension Course, San Francisco, California. (6/9/00)
- 104. "The Impact of Alcohol/Drug Abuse and Mental Disorders on Adolescent Development", Thunderoad Adolescent Treatment Centers, Inc., Oakland, California. (6/29 & 7/27/00)
- 105. "Assessing the Needs of the Entire Patient: Empathy at its Finest", NAMI California Annual Conference, Burlingame, California. (9/8/00)
- 106. "The Effects of Drugs and Alcohol on the Brain and Behavior", The Second National Seminar on Mental Health and the Criminal Law, San Francisco, California. (9/9/00)
- 107. Annual Conference of the Associated Treatment Providers of New Jersey, Atlantic City, New Jersey. "Advances in Psychopharmacological Treatment with the Chemically Dependent Person" & "Treatment of the Adolescent Substance Abuser" (10/25/00).
- 108. "Psychiatric Crises In The Primary Care Setting", Doctor Marina Bermudez Issues In College Health, San Francisco State University Student Health Service. (11/1/00, 3/13/01)
- 109. "Co-Occurring Disorders: Substance Abuse and Mental Health", California Continuing Judicial Studies Program, Center For Judicial Education and Research, Long Beach, California. (11/12-11/17/00)
- 110. "Adolescent Substance Abuse Treatment", Alameda County Behavioral Health Care Services, Oakland, California. (12/5/00)
- 111. "Wasn't One Problem Enough?" Mental Health and Substance Abuse Issues. 2001California Drug Court Symposium, "Taking Drug Courts into the New Millennium." Costa Mesa, California. (3/2/01)
- 112. "The Impact of Alcohol/Drug Abuse and Mental Health Disorders on the Developmental Process." County of Sonoma Department of Health Services, Alcohol and Other Drug Services Division. Santa Rosa, California. (3/8 & 4/5/01)
- 113. "Assessment of the Patient with Substance Abuse and Mental Health Issues." San Mateo County General Hospital Grand Rounds. San Mateo, California. (3/13/01)

- 114. "Dual Diagnosis-Assessment and treatment Issues." Ventura County Behavioral Health Department Alcohol and Drug Programs Training Institute, Ventura, California. (5/8/01)
- 115. Alameda County District Attorney's Office 4th Annual 3R Conference, "Strategies for Dealing with Teen Substance Abuse." Berkeley, California. (5/10/01)
- 116. National Association of Drug Court Professionals 7th Annual Training Conference, "Changing the Face of Criminal Justice." I presented three separate lectures on the following topics: Marijuana, Opiates and Alcohol. New Orleans, LA. (6/1-6/2/01)
- 117. Santa Clara County Drug Court Training Institute, "The Assessment, Diagnosis and Treatment of the Patient with Multiple Disorders." San Jose, California. (6/15/01)
- 118. Washington Association of Prosecuting Attorneys Annual Conference, "Psychiatric Complications of the Methamphetamine Abuser." Olympia, Washington. (11/15/01)
- 119. The California Association for Alcohol and Drug Educators 16th Annual Conference, "Assessment, Diagnosis and Treatment of Patients with Multiple Diagnoses." Burlingame, California. (4/25/02)
- 120. Marin County Department of Health and Human Services, Dual Diagnosis and Cultural Competence Conference, "Cultural Considerations in Working with the Latino Patient." (5/21/02)
- 121. 3rd Annual Los Angeles County Law Enforcement and Mental Health Conference, "The Impact of Mental Illness and Substance Abuse on the Criminal Justice System." (6/5/02)
- 122. New Mexico Department of Corrections, "Group Psychotherapy Training." Santa Fe, New Mexico. (8/5/02)
- 123. Judicial Council of California, Administrative Office of the Courts, "Juvenile Delinquency and the Courts: 2002." Berkeley, California. (8/15/02)
- 124. California Department of Alcohol and Drug Programs, "Adolescent Development and Dual Diagnosis." Sacramento, California. (8/22/02)
- 125. San Francisco State University, School of Social Work, Title IV-E Child Welfare Training Project, "Adolescent Development and Dual Diagnosis." (1/14/02)
- 126. First Annual Bi-National Conference sponsored by the Imperial County Behavioral Health Services, "Models of Family Interventions in Border Areas." El Centro, California. (1/28/02)
- 127. Haight Ashbury Free Clinic's 36th Anniversary Conference, San Francisco, California, "Psychiatric Approaches to Treating the Multiple Diagnostic Patient." (6/6/03)
- 128. Motivational Speaker for Regional Co-Occurring Disorders Training sponsored by the California State Department of Alcohol and Drug Programs and Mental Health and the Substance Abuse Mental Health Services Administration-Center for Substance Abuse Treatment, Samuel Merritt College, Health Education Center, Oakland, California. (9/4/03)
- 129. "Recreational Drugs, Parts I and II", Doctor Marina Bermudez Issues In College Health, San Francisco State University Student Health Service. (10/1/03), (12/3/03)

- 130. "Detecting Substance Abuse in our Clients", California Attorneys for Criminal Justice Annual Conference, Berkeley, California. (10/18/03)
- 131. "Alcohol, Alcoholism and the Labor Relations Professional", 10th Annual Labor and Employment Public Sector Program, sponsored by the State Bar of California. Labor and Employment Section. Pasadena, California. (4/2/04)
- 132. Lecture tour of Japan (4/8-4/18/04). "Best Practices for Drug and Alcohol Treatment." Lectures were presented in Osaka, Tokyo and Kyoto for the Drug Abuse Rehabilitation Center of Japan.
- 133. San Francisco State University, School of Social Work, Title IV-E Child Welfare Training Project, "Adolescent Development and Dual Diagnosis." (9/9/04)
- 134. "Substance Abuse and the Labor Relations Professional", 11th Annual Labor and Employment Public Sector Program, sponsored by the State Bar of California. Labor and Employment Section. Sacramento, California. (4/8/05)
- 135. "Substance Abuse Treatment in the United States", Clinical Masters Japan Program, Alliant International University. San Francisco, California. (8/13/05)
- 136. Habeas Corpus Resource Center, Mental Health Update, "Understanding Substance Abuse." San Francisco, California. (10/24/05)
- 137. Yolo County Department of Behavioral Health, "Psychiatric Aspects of Drug and Alcohol Abuse." Woodland, California. (1/25/06), (6/23/06)
- 138. "Methamphetamine-Induced Dual Diagnostic Issues", Medical Grand Rounds, Wilcox Memorial Hospital, Lihue, Kauai. (2/13/06)
- 139. Lecture tour of Japan (4/13-4/23/06). "Assessment and Treatment of the Patient with Substance Abuse and Mental Illness." Lectures were presented in Hiroshima and Kyoto for the Drug Abuse Rehabilitation Center of Japan.
- "Co-Occurring Disorders: Isn't It Time We Finally Got It Right?" California Association of Drug Court Professionals, 2006 Annual Conference. Sacramento, California. (4/25/06)
- 141. "Proper Assessment of Drug Court Clients", Hawaii Drug Court, Honolulu. (6/29/06)
- 142. "Understanding Normal Adolescent Development," California Association of Drug Court Professionals, 2007 Annual Conference. Sacramento, California. (4/27/07)
- 143. "Dual Diagnosis in the United States," Conference sponsored by the Genesis Substance Abuse Treatment Network. Medford, Oregon. (5/10/07)
- 144. "Substance Abuse and Mental Illness: One Plus One Equals Trouble," National Association of Criminal Defense Lawyers 2007 Annual Meeting & Seminar. San Francisco, California. (8/2/07)
- 145. "Capital Punishment," Human Writes 2007 Conference. London, England. (10/6/07)
- 146. "Co-Occurring Disorders for the New Millennium," California Hispanic Commission on Alcohol and Drug Abuse, Montebello, California. (10/30/07)

- 147. "Methamphetamine-Induced Dual Diagnostic Issues for the Child Welfare Professional," Beyond the Bench Conference. San Diego, California. (12/13/07)
- 148. "Working with Mentally Ill Clients and Effectively Using Your Expert(s)," 2008 National Defender Investigator Association (NDIA), National Conference, Las Vegas, Nevada. (4/10/08)
- 149. "Mental Health Aspects of Diminished Capacity and Competency," Washington Courts District/Municipal Court Judges' Spring Program. Chelan, Washington. (6/3/08)
- 150. "Reflection on a Career in Substance Abuse Treatment, Progress not Perfection," California Department of Alcohol and Drug Programs 2008 Conference. Burlingame, California. (6/19/08)
- 151. Mental Health and Substance Abuse Training, Wyoming Department of Health, "Diagnosis and Treatment of Co-occurring Mental Health and Substance Abuse." Buffalo, Wyoming. (10/6/09)
- 152. 2010 B. E. Witkin Judicial College of California, "Alcohol and Other Drugs and the Courts." San Jose, California. (August 4th & 5th.)
- 153. Facilitating Offender Re-entry to Reduce Recidivism: A Workshop for Teams, Menlo Park, CA. This conference was designed to assist the Federal Court to reduce recidivism. "The Mentally-III Offender in Reentry Courts," (9/15/2010)
- 154. Juvenile Delinquency Orientation, "Adolescent Substance Abuse." This was part of the "Primary Assignment Orientations" for newly appointed Juvenile Court Judges presented by The Center for Judicial Education and Research of the Administrative Office of the Court. San Francisco, California. (1/12/2011 & 1/25/12)
- 155. 2011 B. E. Witkin Judicial College of California, "Alcohol and Other Drugs and the Courts." San Jose, California. (August 4th.)
- 156. 2012 B. E. Witkin Judicial College of California, "Alcohol and Other Drugs and the Courts." San Jose, California. (August 2nd.)

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- 1) Kanas, N., Stewart, P. and Haney, K. (1988). *Content and outcome in a short-term therapy group for schizophrenic outpatients*. <u>Hospital and Community Psychiatry</u>, 39, 437-439.
- 2) Kanas, N., Stewart, P. (1989). *Group process in short-term outpatient therapy groups for schizophrenics*. <u>Group</u>, Volume 13, Number 2, Summer 1989.
- 3) Zweben, J.E., Smith, D.E. and Stewart, P. (1991). *Psychotic Conditions and Substance Use: Prescribing Guidelines and Other Treatment Issues*. Journal of Psychoactive Drugs, Vol. 23(4) Oct-Dec 1991, 387395.

- 4) Banys, P., Clark, W.H., Tusel, D.J., Sees, K., Stewart, P., Mongan, L., Delucchi, K., and Callaway, E. (1994). *An Open Trial of Low Dose Buprenorphine in Treating Methadone Withdrawal*. Journal of Substance Abuse Treatment, Vol 11(1), 9-15.
- 5) Hall, S.M., Tunis, S., Triffleman, E., Banys, P., Clark, W.H., Tusel, D., Stewart, P., and Presti, D. (1994). *Continuity of Care and Desipramine in Primary Cocaine Abusers*. <u>The</u> Journal of Nervous and Mental Disease, Vol 182(10), 570-575.
- 6) Galloway, G.P., Frederick, S.L., Thomas, S., Hayner, G., Staggers, F.E., Wiehl, W. O., Sajo, E., Amodia, D., and Stewart, P. (1996). *A Historically Controlled Trail Of Tyrosine for Cocaine Dependence*. Journal of Psychoactive Drugs, Vol. 28(3), July-September 1996
- 7) Stewart, P. (1999). *Alcoholism: Practical Approaches To Diagnosis And Treatment*. <u>Prevention</u>, (Newsletter for the National Institute On Alcoholism, Kurihama Hospital, Yokosuka, Japan) No. 82, 1999
- 8) Stewart, P. (1999). <u>New Approaches and Future Strategies Toward Understanding</u> <u>Substance Abuse</u>. Published by the Osaka DARC (Drug Abuse Rehabilitation Center) Support Center, Osaka, Japan, November 11, 1999.
- 9) Stewart, P. (2002). *Treatment Is A Right, Not A Privilege*. Chapter in the book, <u>Understanding Addictions-From Illness to Recovery and Rebirth,</u> ed. By Hiroyuki Imamichi and Naoko Takiguchi, Academia Press (Akademia Syuppankai): Kyoto, Japan, 2002.
- 10) Stewart, P., Inaba, D.S., and Cohen, W.E. (2004). *Mental Health & Drugs*. Chapter in the book, *Uppers, Downers, All Arounders, Fifth Edition*, CNS Publications, Inc., Ashland, Oregon.
- 11) James Austin, Ph.D., Kenneth McGinnis, Karl K. Becker, Kathy Dennehy, Michael V. Fair, Patricia L. Hardyman, Ph.D. and Pablo Stewart, M.D. (2004) *Classification of High Risk and Special Management Prisoners, A National Assessment of Current Practices.* National Institute of Corrections, Accession Number 019468.
- 12) Stanley L. Brodsky, Ph.D., Keith R. Curry, Ph.D., Karen Froming, Ph.D., Carl Fulwiler, M.D., Ph.D., Craig Haney, Ph.D., J.D., Pablo Stewart, M.D. and Hans Toch, Ph.D. (2005) Brief of Professors and Practitioners of Psychology and Psychiatry as <u>AMICUS</u> <u>CURIAE</u> in Support of Respondent: Charles E. Austin, et al. (Respondents) v. Reginald S. Wilkinson, et al. (Petitioners), In The Supreme Court of the United States, No. 04-495.
- 13) Stewart, P., Inaba, D.S., and Cohen, W.E. (2007). *Mental Health & Drugs*. Chapter in the book, *Uppers, Downers, All Arounders, Sixth Edition*, CNS Publications, Inc., Ashland, Oregon
- 14) Stewart, P., Inaba, D.S. and Cohen, W.E. (2011). *Mental Health & Drugs*. Chapter in the book, <u>Uppers, Downers, All Arounders, Seventh Edition</u>, CNS Publications, Inc., Ashland, Oregon