



center for behavioral &
addiction medicine

ANNUAL REPORT

July 2023 - June 2024



A Letter from our Executive Director



With all of the uncertainty around us, there is one thing of which I'm sure: the time is now to "lean in" to our commitment and to our mission of leveraging science and service to improve the lives of people who use drugs, especially methamphetamine.

I take great pride in the productivity of CBAM. Whether faculty member, staff member, student or Community Advisory Board member, we produce high quality evidence and guidance in how to bring highest impact, new treatments to people frequently excluded from the health care system.

We have key findings coming out. Our team is publishing papers describing outcomes for the HIV Prevention Trials Network 094 project, the randomized controlled trial of mobile medical units to deliver 26-weeks of integrated services compared to referral to community agencies. This multisite study was fielded in five U.S. cities for people who inject drugs. Findings are going to lead Los Angeles and the U.S. in providing services when and where they are needed.

We lead in innovation. CBAM is evaluating ways that contingency management can be adapted to reduce substance use and other behaviors that can lead to eviction for persons in subsidized housing settings in Los Angeles County. The goal is to measure ways contingency management shows value in interrupting the cycle of chronic homelessness – from people living on the street to getting a subsidized permanent housing unit only to return to the street when symptoms of substance use or other behavioral disorders cause eviction. And in the new year, this work will be extended by evaluating whether gains are similar when contingency management is implemented for residents in shelter bed-type housing situations.

Yet there are clouds on the horizon. This year California voters and our political leaders shifted in perspective to demand a more conservative approach to responding to people with active substance use disorders who are living on the street or in encampments. There is a risk this shift will involve withdrawal of support for harm reduction supplies and services. While these strategies may remove people who use drugs from plain sight, there is no benefit to mandated treatments, which have no evidence of efficacy, and are instead likely to cause harms.

With these thoughts in mind, this is the year, perhaps more than any other, where the people who use drugs and face health risks will need the evidence we can provide, but more importantly, the support we can provide by our willingness to be champions. People who use drugs are not a constituency group, even though they pay taxes! In that spirit, I challenge each of us move beyond what we did last year and join a commission, interact with the Community Advisory Board, make your voice heard at City Hall, and band together with like-minded others to amplify the voices of the people we serve, whose voices often are silenced or ignored.



A Letter from our Medical Director



During one of our Vine Street Clinic staff meetings, we discussed a participant who had "graduated" from their research study and was sad about not coming back to see our team anymore. But a staff member commented, "They're always sad to leave, in every study. They enjoy coming to see us." And I found the remark both routine and remarkable—routine because our team always goes the extra mile, every day, to make participants in our studies and other people that we work with feel that they are heard, valued, and welcomed. But also remarkable, because many of the people that we work with have been beaten up by life and marginalized by society, and the fact that so many of them feel a connection with the people

on our team suggests that maybe we are doing something important here.

Some of the highlights from this year include:

- Contributed as a lead-enrolling site for the PURPOSE-2 trial demonstrating the outstanding efficacy of injectable Lenacapavir for preventing HIV acquisition among sexual and gender minority (SGM) individuals. This trial, made a point of enrolling the racial and ethnic minority cis-gender men, transwomen and transmen, and gender non-binary people at greatest risk for acquiring HIV. It provides a powerful new tool to prevent HIV and maybe, hopefully end the HIV epidemic. In the coming year, we are excited to extend this work by enrolling participants for the PURPOSE-4 trial to assess the effect of Lenacapavir for HIV prevention among people who inject drugs.
- Continued efforts to develop new medical therapies for substance use through the NIDA Clinical Trials Network to manage stimulant use disorders, as well as the NIDA-VA 1036 trial validating the success of our previous ADAPT-2 trial which provided the only clinically proven treatment for controlling methamphetamine use. Together with the behavioral approaches to stimulant use that Dr. Shoptaw and our team previously developed, these medications provide the hope of being able to manage substance use and avoid the devastating consequences of uncontrolled addiction.
- Defined the epidemiology of HIV in racial and ethnic minority SGM. With the upcoming close of the mSTUDY cohort of substance use and HIV among racial and ethnic minority men who have sex with men, we will turn our attention to the HPTN 113 trial of PrEP choice for Latine SGM. Although we are sad to close this chapter and say goodbye to our mSTUDY participants, we look forward to the opportunity to work with our Latine community to improve uptake of PrEP, reduce disparities in access to HIV prevention tools, and together limit the spread of HIV through their networks.

All of these accomplishments—all of them—depend on our team and their commitment to their work and their community. We have sadly said goodbye to treasured colleagues while welcoming wonderful new additions to the group. As some of our researchers departed for distant shores and new challenges, former trainees joined the faculty and initiated exciting and innovative new approaches to addressing the intersection of HIV, substance use, biomarkers and inflammation. Core members of the Vine Street research group have taken on new responsibilities in team leadership and study coordination. New and valued members of the Research and Education/Outreach team have brought new perspectives as well as a ray of light into our office. Writing these words has given me the chance to reflect on the past year and remind myself how lucky I am to get to do what I do, who I do it with, and where I do it. I hope that reading these words inspire you to feel the same.

Jesse Clark, MD, MSc

Research Highlights



In pursuit of our mission, CBAM conducts research on medical, behavioral, and combination approaches to the prevention and treatment of chronic illnesses, with a particular focus on addiction and HIV. We stress the values of integrity and scientific rigor in the conduct of our research and work closely with the communities we serve to ensure that the best of care is given. The following pages highlight our research activities over the past year.



New Studies



Evaluation of Contingency Management (CM) to Facilitate Retention in Supportive Housing in LA

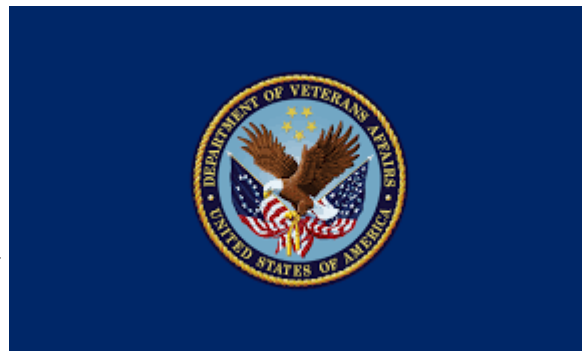
Contingency management is a program that rewards individuals through monetary or other means for evidence of positive behavior change. It has been proven as an effective intervention for substance use disorders. CBAM partnered with the Los Angeles County Department of Health, The People Concern, and Brilliant Corners to evaluate their innovative use of contingency

management to reduce substance use, as well as other behaviors that can lead to eviction from their housing programs. It is well documented that the number of persons experiencing homelessness in Los Angeles has been steadily increasing and that those individuals can have a difficult time transitioning back into permanent housing. Many landlords and program managers face few choices but to evict persons from low-income housing units and interim housing facilities for a variety of behavioral issues and rules infractions, contributing to a cycling of residents from housed to unhoused status. The goal of this program is to evaluate whether providing contingency management might prolong residency status and potentially prevent evictions.

Coming Soon

NIDA/CS 1036

In the coming year, the UCLA Vine Street Clinic will be a participating site in a study titled, "Randomized, Placebo Controlled, Multi Site Trial of Extended-Release Naltrexone Injection/Bupropion XL Tablets in the Treatment of Methamphetamine Use Disorder". This study is sponsored by the National Institute on Drug Abuse and the US Department of Veteran's Affairs Cooperative Studies Program. It aims to confirm the efficacy of naltrexone plus bupropion as a combination medication therapy to treat individuals with methamphetamine use disorder (MUD). This combination was shown effective in previous trials, including the much lauded ADAPT-2 study, the results of which were published in the [New England Journal of Medicine](#) in 2021. CBAM's Director, Dr. Steve Shoptaw, was anchor author on that paper and our Vine Street Clinic served as a study site for that trial. This has the potential to bring us one step closer to FDA approval of a medication to treat methamphetamine use disorder.



HIV and STI Prevention



We are also working closely with the HIV Prevention Trials Network to bring to clinic two new studies. One will evaluate the pharmacokinetics and safety of a long-acting injectable medication for pre-exposure prophylaxis in people who inject drugs. The other will employ an integrated strategy of HIV PrEP and STI PEP for young Latino gay, bisexual, and other cisgender men who have sex with men. Both populations face a disproportionate HIV burden and are more likely to experience

negative health outcomes associated with HIV and STI's. These studies seek to ensure that new interventions for prevention are tailored to them.

Study Results



HPTN 094: INTEGRA Mobile Clinic Study

In the United States, persons with opioid use disorders who inject drugs face multiple and intertwining health risks including high risk for HIV and Hep C. The HPTN 094 (INTEGRA) study was designed to test the efficacy of an integrated whole-person strategy that addresses substance use, HIV, HCV and basic primary care needs of its participants. The first papers on this study have been published. As we reported earlier, half of participants in this study were assigned to receive treatment on a mobile health delivery unit while the other half were referred to a brick and mortar clinic. All received peer health navigation. There were five participating sites across the country including Los Angeles. Findings from this study will inform policy decision makers on ways to deal with physical and geographic barriers and to engage people who inject drugs in care. The [first article](#) resulting from the study is a descriptive piece detailing the study design. The [second article](#) to come out of the study describes the data-driven approach used to determine the geographic locations of the study population in order to target service delivery to those areas and the multiple factors that impacted the viability of those locations.

CA Bridge Patient Outcomes Research Evaluation

UCLA CBAM worked in collaboration with Public Health International to examine the association between buprenorphine treatment in the Emergency Department (ED) and follow-up engagement in opioid use disorder (OUD) treatment 1 month later. This multisite cohort study was conducted in 7 California Emergency Departments participating in the statewide Bridge to Treatment program to improve access to buprenorphine treatment. The study population included ED patients aged at least 18 years identified with OUD between April 1, 2021, and June 30, 2022. All participants were offered buprenorphine treatment, either administered in the emergency department, prescribed, or both. The [results](#) of this cohort study showed that in EDs providing accessible medication options for OUD, patients who received buprenorphine were significantly more likely to engage in follow-up treatment after 1 month.

New Findings from the ADAPT-2 Trial for People with MA Use Disorder

Though overdose deaths continue to surge, there is no approved medication to treat methamphetamine (MA) use disorder. Dr. Michael Li and colleagues evaluated data from the ADAPT-2 trial which studied the impact of extended-release injectable naltrexone combined with extended-release oral bupropion (NTX + BUPN) on methamphetamine use disorder. This trial ran from May 2017 to July 2019 at eight U.S. sites. More than 400 participants were included. Li et al found that over the full 12 weeks, the increase in MA-negative tests was notably higher for participants on NTX + BUPN than for those on placebo. These results emphasize the significant therapeutic benefit of NTX + BUPN in managing MA use disorder, offering a promising treatment option. These [findings](#) have been published in the journal *Addiction*. Results were also picked up by multiple health and sciences blogs with a quote in the SciTechDaily [article](#) stating “These findings have important implications for pharmacological treatment for methamphetamine use disorder. There is no FDA-approved medication for it, yet methamphetamine-involved overdoses have greatly increased over the past decade”

Discovery Year Students

DGSOM Discovery is a required component of the M.D. curriculum at UCLA. Its goal is to provide third-year medical students with protected time for a deep and substantive creative and scholarly experience in an area of their interest. This year, the Department of Family Medicine offered student fellowships under the Health Justice and Advocacy area of concentration. Students engaged in capacity and skill building, experiential learning, and scholarly activity culminating in a Capstone experience. Two medical students, Denise Guzman Naranjo and Grace Yi, spent their Discovery Year with CBAM, conducting qualitative interviews as part of an evaluation project looking at the use of contingency management to impact behaviors that lead residents to be evicted from housing. They also analyzed data from the mSTUDY cohort and Grace was accepted for an oral presentation on those findings at this year's College on Problems of Drug Dependence (CPDD) annual conference. The presentation was titled "Comparing Cardiovascular and Health Management Outcomes by Methamphetamine Use and Frequency in Men who Have Sex With Men (MSM)". Grace also received the Primm-Singleton Travel Award from CPDD.



Case-Based Learning Collaborative on Stimulants

CBAM launched the Case-Based Learning Collaborative on Stimulants this year. The learning objectives for this series include:

- To use a case-based learning approach to share experiences, educate, and disseminate the latest evidence-based data on the use of medications and other therapies for treating stimulant use disorders.
- To generate a network of providers and provide a reliable forum to discuss stimulant use disorders and their treatment.
- To present current evidence for treatment of stimulant use disorders to guide treatment decisions and to destigmatize treatment.

The Los Angeles County Substance Abuse Prevention and Control program and the UT Southwestern Clinical Trials Network Big Couth/West Node partnered with CBAM for the series and inaugural presentations were made by Drs. Shoptaw and Clark. Eleven presentations were made between October and June and attendees included physicians, nurses, physician associates, psychologists, social workers, recovery specialists, community health workers, students and anyone interested in improving the care of persons with stimulant use disorders. Links to the presentations can be found on our [website](#).

Ending the HIV Epidemic National Conference

CHIPTS and the UCLA-CDU Center for AIDS Research (CFAR) were honored to co-host the 3rd National Ending the HIV Epidemic Partnerships for Research Meeting on April 15-16, 2024, at the UCLA Meyer and Renee Luskin Conference Center. The meeting welcomed over 300 participants from the CFAR/ARC Ending the HIV Epidemic (EHE) supplement project teams funded by the National Institutes of Health (NIH), community and public health partners, and others interested in HIV implementation research and practice. This year's theme was "Accelerating Innovations for Equitable Reach and Uptake of HIV Services". The goal of the meeting was to facilitate the dissemination of innovative implementation strategies and generalizable findings from the EHE supplement projects, to promote best practices for research-community partnerships in HIV implementation research, and to offer opportunities for networking and exploring new collaborations to accelerate progress towards ending the HIV epidemic. A [Summary Report](#) of the meeting can be found on the CHIPTS website.



Above: Conference attendees

Left: CHIPTS Leadership with Dr. Chris Gordon (Chief of the HIV Treatment and Translational Science Branch at the Division of AIDS Research of NIMH)

Right: Our amazing CHIPTS Staff



Recognition

George F. Kneller Endowed Chair

Dr. Shoptaw was honored this year with the George F. Kneller Endowed Chair in Family Medicine. This chair is a symbol of excellence in research and teaching within our department.

His appointment to the chair is a testament to his outstanding scholarship and leadership. A ceremony was held on April 30th to present Dr. Shoptaw with a plaque and to celebrate his achievements and the impact he has made on our department.

We congratulate Dr. Shoptaw on this well-deserved honor. He is pictured to the right with the Chair of the Department of Family Medicine, Dr. Gerardo Moreno.



UCLA Public Impact Research Award

Dr. Shoptaw received the prestigious [Public Impact Research Award](#) from the UCLA Office of the Vice Chancellor for Research and Creative Activities (ORCA). The Public Impact Research Award recognizes faculty whose research or other creative work has had a significant beneficial public impact. He was among four awardees selected this year. Dr. Shoptaw was recognized as a leader in academic research on substance use and, more importantly, a driving force behind the translation of this work to address the needs of communities most heavily impacted by addiction and HIV.

Ward Cates Spirit Award

Dr. Shoptaw was also honored with the prestigious Ward Cates Spirit Award. The award is named in honor of the late Dr. Willard (Ward) Cates Jr. It symbolizes the highest recognition within the HIV Prevention Trials Network (HPTN). It is a testament to Dr. Shoptaw's exceptional commitment and leadership of the HPTN 094 mobile clinic study and to his overall contributions to HIV research, particularly among person who use drugs.

Celebrating Milestones



CBAMer Ron Brook, as well as unofficial CBAMer and long time Family Medicine faculty Tom Donohoe filed for retirement this year! We celebrated their decades of service to UCLA and the greater community. Tom served as Director of the Los Angeles region of the Pacific AIDS Education and Training Center and has conducted countless training and capacity building sessions with providers and others working to stop the spread of HIV here in the U.S. and along the U.S./Mexico Border. Ron led HIV-related research in minority populations and provided training and technical assistance to providers involved in HIV medical care and prevention services. Ron is also a long-time member of the Center for HIV Identification,

Prevention and Treatment Services (CHIPTS). Luckily for us, they both plan to come back part time to continue the work we are all so passionate about.



In May, Dr. Steven Shoptaw was quoted in the [LA Times](#) highlighting the critical need for investment in reducing methamphetamine-related deaths. Dr. Shoptaw expressed that “the massive investment in reducing overdose deaths has been almost exclusively targeted to opioids. There’s been no systematic investment to reduce methamphetamine deaths”.

Photo by Irfan Khan, Los Angeles Times



Dr. Shoptaw was quoted once again in the [LA Times](#), criticizing California's regulatory hurdles for addiction research stating that it is “an unequal burden on addiction research” compared to other scientific studies.

Photo by Genaro Molina, Los Angeles Times



In May, Dr. Goodman-Meza was featured in the [LA Times](#) discussing the complexities and risks associated with ketamine use. He provided critical insights into the recreational and therapeutic aspects of ketamine, shedding light on its potential health implications in various contexts.

Photo by Anita Chabria, Los Angeles Times



Dr. Shoptaw highlighted the underutilization of evidence-based addiction treatments in a [New York Times](#) article. He emphasized the wealth of research supporting positive reinforcement strategies and contingency management, citing their effectiveness in helping individuals reduce substance use. Dr. Shoptaw criticized the reluctance of addiction treatment programs to adopt proven methodologies, stating, “There’s all these studies showing that it works, but instead of trying something that’s got actual evidence behind it, they’re pouring all this money into things that have no mark of efficacy. Zero.” Overall, Dr. Shoptaw advocated for a shift toward evidence-based practices in addiction treatment to better serve those in need.

Dr. Shoptaw was also interviewed on Spectrum News 1 for “Inside the Issues: The Fentanyl Crisis in LA County” with Amrit Singh. The story aired on January 18, 2024.



Our Impact

Community

In February, CBAM launched the UCLA Vine Street Clinic (UVSC) Community Advisory Board (CAB). While CBAM has always accessed community advisory boards to obtain feedback on its work, this is the first CAB dedicated solely to the work conducted at our site. At the first meeting, we welcomed community members who include those with lived experience with substance use and HIV and those working with/advocating for these populations. The CAB works to ensure that the research, dissemination, and other activities conducted by UVSC researchers are relevant and meaningful to the lives of the diverse communities we serve.



Gratitude



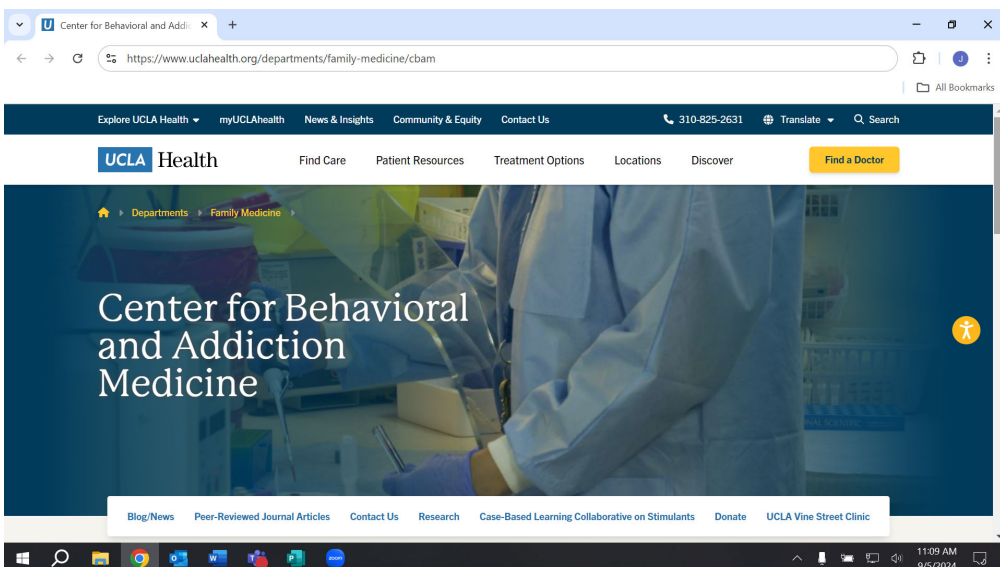
Our team at CBAM includes the most incredible people. Every day they exemplify our core values of integrity, scientific rigor, service to the community, and teamwork. We know how great they are, but it is even more powerful when we hear it from our research participants. The quotes below come from participants in two of our clinical trials:

- Can you believe that this study is ACTUALLY over? I don't think I thought about what my life would be like once this was over. I am so used to coming to the clinic every week. It's definitely going to feel strange for a while after... Jasmin, over the last 8 weeks, you have made such a difference in my life. You always made me feel safe, not judged, and the mornings after my visit to the clinic, I'm smiling in a good mood for the rest of the day :) You and your entire team didn't make me feel like "test subject #029" but like family. The friendship we all built over the course of the study will not be forgotten!*
- I want to thank Usiel and the UCLA Mobile clinic staff for going above and beyond for me! It was a great year being able to participate in the study and I can't thank the staff enough for everything they have done, such amazing caring people!*

New Website

Our website has recently moved!

You can now find us under the Department of Family Medicine on the UCLA Health site. If you are looking for information on current or completed studies, if you are looking for journal articles written by our faculty on topics related to addiction and HIV, or if you'd like to make a donation to support our work, please visit us at <https://www.uclahealth.org/departments/family-medicine/cbam> or continue to use the shortcut cbam.ucla.edu.



Scientific Publications



As scientists, our biggest impact comes from the knowledge we generate and share. It's that knowledge of what works, what doesn't and why that leads to better policy, better medicine and better lives for those we serve. We published more than 40 peer-reviewed papers this past year. Highlights include:

- Li MJ, Hassan A, Javanbakht M, Gorbach PM, Shoptaw SJ. [Decision-making task performance and patterns of methamphetamine use in people assigned male at birth who have sex with men](#). *Exp Clin Psychopharmacol*. 2023 Nov 2. PMID: 37917508.
- Blair KJ, Torres TS, Hoagland B, Bezerra DRB, Veloso VG, Grinsztejn B, Clark J, Luz PM. [Moderating Effect of Pre-Exposure Prophylaxis Use on the Association Between Sexual Risk Behavior and Perceived Risk of HIV Among Brazilian Gay, Bisexual, and Other Men Who Have Sex With Men: Cross-Sectional Study](#). *JMIR Public Health Surveill*. 2023 Oct 5;9:e45134. PMID: 37796573; PMCID: PMC10587815.
- Goodman-Meza D, Shoptaw S, Hanscom B, Smith LR, Andrew P, Kuo I, Lake JE, Metzger D, Morrison EAB, Cummings M, Fogel JM, Richardson P, Harris J, Heitner J, Stansfield S, El-Bassel N; HPTN 094 Study Team. [Delivering integrated strategies from a mobile unit to address the intertwining epidemics of HIV and addiction in people who inject drugs: the HPTN 094 randomized controlled trial protocol \(the INTEGRA Study\)](#). *Trials*. 2024 Feb 15;25(1):124. PMID: 38360750; PMCID: PMC10870682.
- Harris CL, Blair CS, Segura ER, Gutiérrez J, Lake JE, Cabello R, Clark JL. [Sexual network characteristics, condomless anal intercourse, and the HIV care cascade among MSM living with controlled versus uncontrolled HIV infection in Lima, Peru: a population-based cross-sectional analysis](#). *Lancet Reg Health Am*. 2024 Mar 27;32:100722. PMID: 38629029; PMCID: PMC11019357.
- Smith LR, Perez-Brumer A, Nicholls M, Harris J, Allen Q, Padilla A, Yates A, Samore E, Kennedy R, Kuo I, Lake JE, Denis C, Goodman-Meza D, Davidson P, Shoptaw S, El-Bassel N; HPTN 094 study protocol team. [A data-driven approach to implementing the HPTN 094 complex intervention INTEGRA in local communities](#). *Implement Sci*. 2024 Jun 3;19(1):39. PMID: 38831415; PMCID: PMC11149235.
- Moran A, Javanbakht M, Mimiaga M, Shoptaw S, Gorbach PM. [Association of Partnership-Level Methamphetamine Use on Inconsistent PrEP Care Engagement Among GBMSM in Los Angeles County](#). *AIDS Behav*. 2023 Oct 4. PMID: 37792232
- Dubov A, Basenko A, Dymaretskyi O, Shoptaw S. [Impact of the Russian invasion on opioid agonist therapy programs in Ukraine: A qualitative study](#). *Drug Alcohol Depend*. 2024 Feb 1;255:111069. PMID: 38159338; PMCID: PMC10872541.
- Li MJ, Chau B, Belin T, Carmody T, Jha MK, Marino EN, Trivedi M, Shoptaw SJ. [Extended observation of reduced methamphetamine use with combined naltrexone plus bupropion in the ADAPT-2 trial](#). *Addiction*. 2024 Jun 10. PMID: 38856086

Visit our [website](#) to learn more and to read additional articles published by our faculty.

CENTER FOR BEHAVIORAL & ADDICTION MEDICINE
Financial Statement for Fiscal Year 2023/2024
(July 1, 2023 through June 30, 2024)

	<u>Permanently</u>	<u>Temporarily</u>			
	<u>Restricted</u>	<u>Restricted</u>	<u>Unrestricted</u>	<u>Total</u>	<u>FY 2022/2023</u>
INCOME					
Federal Contracts & Grants	\$ 6,800,788	\$ 25,000	\$ -	\$ 6,825,788	\$ 9,583,618
State/Local Contracts & Grants	\$ -	\$ -	\$ -	\$ -	\$ 297,535
Subcontracts	\$ 168,368	\$ -	\$ -	\$ 168,368	\$ 167,516
Corporations/Industry	\$ -	\$ 556,876	\$ -	\$ 556,876	\$ 557,082
Foundations	\$ 110,287	\$ -	\$ -	\$ 110,287	\$ -
Individuals	\$ -	\$ -	\$ -	\$ -	\$ -
UC Funds	\$ -	\$ 110,591	\$ 234,716	\$ 345,307	\$ 207,362
Clinical Services Income	\$ -	\$ -	\$ 97,905	\$ 97,905	\$ 118,212
Carryforward from Prior Years	\$ 567,239	\$ 425,834	\$ -	\$ 993,073	\$ -
TOTAL INCOME	\$ 7,646,682	\$ 1,118,301	\$ 332,621	\$ 9,097,604	\$ 10,931,326
EXPENSES					
Academic Salaries				\$ 722,119	\$ 659,623
Staff Salaries				\$ 2,639,561	\$ 2,776,645
Fringe Benefits				\$ 1,384,366	\$ 1,345,977
Stipends - Postdoctoral Fellows				\$ -	\$ -
Stipends - Interns				\$ -	\$ -
Consultants/Guest Lecturers				\$ 95,903	\$ 153,611
Employee Training/Certifications/Licenses/Memberships				\$ 4,999	\$ 2,881
Subawards				\$ 406,821	\$ 698,535
Funds Transferred to Other Departments (Direct)				\$ 1,489,884	\$ 1,517,421
Space Rental				\$ 221,441	\$ 188,916
Alterations/Renovations				\$ 908	\$ 7,994
Communications				\$ 58,502	\$ 60,291
Clinic Operations				\$ 108,866	\$ 79,268
Vehicle Operating Costs				\$ 35,951	\$ 60,209
General Supplies & Equipment				\$ 2,227	\$ 1,335
Computers, Software & Computer Supplies				\$ 18,277	\$ 24,370
Medical Supplies				\$ 64,770	\$ 32,421
Project-Related Supplies				\$ 42,079	\$ 97,715
Travel and Events				\$ 273,056	\$ 73,027
Postage/Courier				\$ 15,642	\$ 52,283
Print, Copy & Media Services				\$ 2,978	\$ 4,880
Publication Fees				\$ 6,016	\$ 1,637
Transcription Services				\$ -	\$ 16,918
Recruitment Ads				\$ 72,959	\$ 58,641
Lab Services				\$ 110,641	\$ 81,657
Pharmacy				\$ 6,456	\$ 25,416
Inpatient Care				\$ -	\$ 147,766
Participant Incentives				\$ 166,586	\$ 172,786
Website Services				\$ 4,642	\$ 5,785
Miscellaneous				\$ 26,651	\$ 25,191
Indirect Charges				\$ 1,817,428	\$ 2,001,156
TOTAL EXPENSES				\$ 9,799,728	\$ 10,374,355
NET INCOME (LOSS) YTD*				\$ (702,124)	\$ 556,971

This document was generated internally. It is not an audited financial statement.

**Net Loss reflects expenses that were incurred in FY23/24 for which funds were not received until FY24/25.*



About CBAM

CBAM is a multidisciplinary center that seeks to advance the prevention and treatment of chronic illness, especially in communities with health disparities.

CBAM works at the intersection of academia and community with a focus on treating addiction and preventing the spread of HIV. We are housed in the UCLA Department of Family Medicine. Our faculty include:



Steven Shoptaw, PhD

Executive Director, UCLA Center for Behavioral & Addiction Medicine
PI/Director, UCLA Center for HIV Identification, Prevention & Treatment Services
Professor and Vice Chair of Research, UCLA Department of Family Medicine
Professor, Department of Psychiatry and Biobehavioral Sciences
Honorary Professor, University of Cape Town Department of Psychiatry and Mental Health



Jesse Clark, MD, MSc

Associate Professor in Residence, UCLA Department of Medicine, Division of Infectious Disease
Associate Professor in Residence, UCLA Department of Family Medicine
Medical Director, UCLA Vine Street Clinic
Director, South American Program in HIV Prevention Research (SAPHIR)



Cherie Blair, MD

Assistant Clinical Professor, UCLA Department of Medicine, Division of Infectious Disease



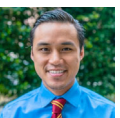
Ron Brooks, PhD

Assistant Professor, UCLA Department of Family Medicine



Timothy Hall, MD, PhD, FAPA FASAM

Assistant Clinical Professor, UCLA Department of Family Medicine



Michael Li, PhD

Assistant Professor, UCLA Department of Family Medicine



Show your support!

To help support this life-changing work, visit us at <https://www.uclahealth.org/departments/family-medicine/cbam> and click the Donate button or call (310) 794-0645 to speak with our Administrative Director. More than 90% of every donation goes directly to serve our mission and all donations are tax deductible. Naming opportunities are available!



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