THE ADDICTION EDUCATOR

An E-Magazine for Addiction Educators

June, 2016
Volume 2, Issue 1

INCASE

International Coalition for Addiction Studies Education

Inside this issue

Special points of interest

- CHECK OUT OUR WEBSITE

Welcome to the Addiction Educator!
The publication for Addiction Professionals who teach in academia.

Submission Guidelines

Write An Article for the AE

We are welcoming submissions for the Addiction Educator. This online e-magazine will be accepting articles throughout the year.

Submissions may include the following:

1. Feature articles
2. Teaching tips
3. Updates in the field
4. Conferences of interest
5. Faculty awards, promotions, etc. for the member section
6. Letters to the editor

Email your submissions to: mgtasmith@gmail.com, raven8moon@yahoo.com and acavaiol@monmouth.edu

Author Guidelines For *Addiction Educator**
Articles submitted to *Addiction Educator* should focus on teaching in the addiction studies. Therefore, articles can address teaching methods, techniques, strategies, approaches, systems, etc.

Articles selected for publication will be posted on the *Addiction Educator* website. The article then becomes property of INCASE (International Coalition of Addiction Studies Education). Authors will be asked to sign a release verifying that their article is now property of INCASE.

Manuscript Preparation
Feature article submissions generally range from about 1,200 to about 2,000 words in length, with column submissions, teaching tips and updates generally ranging from 700 to 1,200 words. Letters to the editor should be no longer than 300 words. Please do NOT imbed tables, figures, or other illustrations within the text of your article (see "Graphic Elements" guidelines below).

News and faculty updates will be edited and published as space allows.

Manuscript Submission
Submit articles electronically to mgtasmith@gmail.com, raven8moon@yahoo.com and acavaiol@monmouth.edu. Please send files as attachments saved in Microsoft Word. Include at the bottom of the article file a "bio" of two to three sentences for each author, along with the e-mail address of the lead author. We publish the e-mail addresses of our authors so that readers may have the opportunity to offer authors direct feedback on the article.

In your e-mail message with the article attachment, be sure to include your mailing address, phone and fax numbers, and e-mail address so that we may contact you during the editing process.

Graphic Elements
If photos, tables, or other graphics are sent electronically, each should be sent as a separate file from the article file. Figures and photos MUST be saved in a high-resolution (minimum 300 DPI) TIFF or EPS format to ensure publication-quality images.

If you cannot send your graphics electronically, you may send hard copies suitable for scanning, such as original photographs, photograph-quality prints (especially for color illustrations) and high-resolution computer printouts (for black and white figures and graphs only).

All photographs should be identified with a suggested caption. The captions should include the names of people shown and the location of the shot, if pertinent. If a photograph is copyrighted, the photographer or photography firm's name also must be included so that we can give proper credit. It is the author's responsibility to secure appropriate consents from people shown in photographs, and permission to reprint copyrighted photos. If you wish to have photographs returned, request this in your cover letter and include the proper return address.

Tables should be double-spaced and numbered consecutively in the order in which they are mentioned in the text of the article. Provide a brief title for each. Figures or graphs also should be numbered consecutively in the order in which they are mentioned in the article.

References
A list of references or a bibliography may be included, using standard APA.

Where to Submit
Electronic submissions should be e-mailed mgtasmith@gmail.com, raven8moon@yahoo.com and acavaiol@monmouth.edu

*Article guidelines are borrowed and revised from the ADDICTION PROFESSIONAL.

Letter from the President

June 2016

Dear INCASE members,

Once again, a very busy and productive year with INCASE! INCASE did celebrate its 25th anniversary at the NAADAC conference in Washington, D.C., on October 9-13, 2015. INCASE received a special award from NAADAC in honor of its 25th anniversary, and we had several successful presentations at the conference.

We are in the planning stages for an international conference in August of 2017, more information will be forthcoming as plans are firmed up. Please contact Joan Standora for more information. The NAADAC/INCASE 2016 conference will be held in downtown Minneapolis, Minnesota at the Hyatt Regency Minneapolis. The dates are October 7-11, 2016, with the INCASE board meeting on Thursday October 6th prior to the conference.

My priority during this final year as president of INCASE will be the connection of the SAMHSA career ladder to NASAC accreditation and nationwide licensure. One might ask how this is part of what we do as education professionals within INCASE as a whole. The connection is that our students are released to a crazy patchwork quilt of licensure (and certification) standards when they leave our educational programs. Should we move forward with this process, my ultimate goal is that students, upon graduating from our programs will have no trouble becoming licensed in any state in the U.S. (perhaps someday even internationally).

The NAADAC magazine published an article from me concerning this vital topic, a topic that if it is not addressed soon, could lead to the dismantling of our profession in the 23 states which do not have an addiction specific licensure. The lack of a unified national standard (here I am submitting a proposal that the TAP 21 competencies become the guiding force, layered within the SAMHSA career ladder) that retains regional flexibility, but ease of reciprocity, is holding us back as a profession. INCASE educators are uniquely positioned to assist states in setting appropriate educational standards within this type of highly flexible framework.

I am convinced that we will indeed move forward in lockstep with our counselors, accrediting bodies, educational institutions and licensure boards into a highly professionalized future for the Addiction Profession. Thanks and have a great Summer!

Sincerely,

John Korkow, LAC, SAP, Ph.D.
President of INCASE
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The Dual Role of Addiction Studies Educators: Gatekeeper vs Student Assistant Roles: Part 1

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On December 21, 1970 there was a historic, although not well publicized meeting that took place between Elvis Presley and President Richard M. Nixon in Washington, D.C. Apparently, Elvis had written a six page letter to President Nixon requesting a meeting because of concerns about drug use among young people (Presley felt that Beatles music was corrupting American youth and encouraging them to turn to drugs). In this meeting, Presley requested that Nixon officially appoint him "a Federal Agent at Large" within the Bureau of Narcotics and Dangerous Drugs, so that Elvis could reach out to young people and dissuade them from drug abuse. Allegedly, Presley's own prescription drug abuse may have been in full swing at that time and on August 16, 1977 Presley died of what was alleged to be cardiac arrhythmia resulting from taking a combination of codeine, Valium, morphine and Demerol. Presley's official autopsy results are sealed until 2025.

Presley's request of Richard Nixon points to something that most addiction educators have known for quite some time, i.e. people sometimes get involved in the addictions profession for the wrong reasons. A case in point occurs when students with active addiction issues and/or concurrent mental health issues seek to become addiction counselors or when students have family members experiencing Substance Use Disorders [SUD], whom they hope to save by becoming counselors. Although there are many benefits of having recovering persons who aspire to work in this profession, there are a multitude of problems that arise when untreated individuals with addiction, codependency or mental health issues enter the profession for inappropriate reasons much like Elvis Presley wanting to become an official federal drug enforcement agent.

As addiction studies educators we can relate to the pride we feel when our students grow and mature as they move through our collegiate training programs and then go on to excel as addictions counselors. However, most of us are aware of instances where students do not progress well or may encounter difficulties that lead faculty to question whether the student is appropriate to be working the addictions counseling profession. These difficulties may include academic problems, interpersonal problems, maladaptive personality traits (e.g. egocentricity, lacks of empathy) or emotional/psychological difficulties (Barnett, 2008). Henderson and Dufrene (2012) researched various types of problematic student behaviors and found eight categories: 1) ethical transgressions 2) symptoms of a mental health diagnosis, 3) intrinsic characteristics 4) counseling skill deficits 5) issues with receiving and responding to feedback 6) self-reflective deficits and 8) procedural compliance. We cannot emphasize too strongly, that our role as addiction educators is not one of diagnosing or treating these issues, however, as addiction educators we have a professional, moral and ethical responsibility to address student difficulties appropriately. Another factor to take into account is whether student deficiencies that were not properly addressed during their training, could put future clients at risk or whether colleges or universities may be liable to lawsuits from clients or employers (Custer, 1994). This is why the responsibilities of counselor educators to address these issues during the student's training are delineated in the accreditation standards of NASAC and CACREP. As educators it is imperative that we are training addictions counselors who are both academically competent as well as emotionally stable.

In Part 1 of this two-part series, we will describe some of the types of difficulties that students may encounter and in Part 2, we will discuss examples of how we as faculty might address some of these issues in accordance with accreditation standards. Both articles will highlight our dual role as addiction educators in terms of our responsibility to our students (student assistance) and our responsibility to the addictions counseling profession (gatekeepers).

Foster and McAdams (2009) define the gatekeeping role as one in which it is responsibility of all counselors (including counseling students in training) to intervene with professional colleagues and supervisors who engage in behavior that could threaten the welfare those receiving their services (Foster & McAdams, 2009, p. 271). The student assistance model (which was derived from employee assistance programs adopted by many corporations) takes the approach that distressed or troubled students should receive remediation rather than being subject to harsh disciplinary or punitive sanctions. The role of faculty involved in student assistance or remediation is not to diagnose or treat but rather to connect troubled students with helpful resources. In the role of gatekeepers, counselor educators who determine that students are inappropriate to work in the counseling profession may be counseled out of the training program, or face suspension or expulsion. Research by Russell, DuPree, Beggs, Peterson & Anderson (2007) examines how counselor supervisors respond to various student difficulties with remediation or gatekeeping types of approaches given the types of difficulties students present with.

Examples of Gatekeeping and Student Assistance Roles

Academic Deficits

Not all students are well-prepared to undertake the requirements of an addiction studies curriculum. Often students may find particular undergraduate or graduate coursework difficult. This may be the result of a lack of study skills, a learning disorder or because of outside stressors that make it difficult for students to devote adequate time to their studies. In situations like these, students run into potential problems when they refrain from asking for help from faculty and supervisors/advisors. In many instances, academic skill deficits can be ameliorated by referring students for tutoring or to the college/university's disability services. The issues that are often more problematic are when students engage in cheating or plagiarism. (e.g. a student admitted to having purchased a term paper online because he was unable to devote time to the project because of having to work overtime at his job) or when students do not shoulder their responsibility when working on group projects with other students. While cheating or plagiarism may reflect a momentary lapse of judgment as in the case cited above, an incident of this type could reflect a pattern poor decision-making that would be of concern for a future counselor who must adhere to strict ethical standards. In these instances, remediation may take the form of providing the student with opportunities to determine the reasons for the indiscretion and to determine what steps they need to take to avoid situations like this in the future. Although colleges and universities often have specific sanctions for cheating and plagiarism, role of counselor educator faculty would be to go beyond those sanctions to assist the student in finding ethical alternatives. It is important to emphasize that whatever remedial recommendations are offered to students, they are not punitive and do not violate Americans with Disabilities Act (ADA) mandates.

Substance Use Disorder and Mental Health Difficulties

It is not unusual to discover instances where students present with untreated SUD or mental health disorders. These types of difficulties are problematic because they may not become evident until the student has been accepted into the program. As a result, situations may arise that are of concern for addiction educators. Here are two examples:

Bob is currently attending a community college where he is majoring in Human Services and is an Addictions Counseling specialization track. He became interested in becoming an addictions counselor after he completed an eight week residential alcohol and drug program when he was a high school senior. Bob indicates that in his senior year he was prescribed Percocet for a sports injury and had become addicted to these pain medications. He also admits to smoking pot and drinking with his teammates prior to his injury. Once he completed the rehab Bob was no longer using Percocet. However, he claims that since he was "never addicted" to pot or alcohol, he continued to smoke pot regularly to deal with social anxiety. He declined to participate in outpatient counseling and did not feel that he needed to attend Narcotics Anonymous. Bob had made it known to his professors that he was clean from Percocet but never brought up his other drug or alcohol use until he was charged with a DUI which made it into the local newspapers. His faculty advisor happened to see the article in the newspaper.

Tara is currently applying to a graduate addictions counseling program. On her admissions essay, she disclosed that she interest in becoming an addictions counselor as a result of her own struggles with substance addiction and mental health issues.
Tara explained that she had been addicted to alcohol and Xanax and while she was in residential treatment, she had been diagnosed with Bipolar Disorder and was started on a mood stabilizer. In her admissions interview, Tara explained to the graduate admissions committee that she was now two years sober, was actively attending AA and NA, was receiving personal counseling and was also being successfully maintained on a mood stabilizer. Tara explained that she felt all of these measures were vital to her recovery.

In the situations described above, both students had made disclosures about a substance use disorder(s) and mental health issues. Needless to say, a student would never be excluded from admission to a program based on a mental health disorder or SUD as that would be in violation of ADA laws. However, this brings into question the addiction counseling program's obligations once a disorder is disclosed. In the case of Tara, she has taken appropriate steps to obtain treatment and maintains her recovery from both disorders. However, what if Tara were experience a relapse or decides to stop taking her medication against medical advice? What is the responsibility of the program to assist Tara get back on track with her recovery and when would it be appropriate for her to continue her studies? Also would the stress of resuming her studies be contraindicated to her recovery? Again, the role of a addiction educator faculty is to assist Tara in making the best decisions, given her goals of successfully completing the academic program. In order to accomplish this, it is helpful to have those treating Tara (and Tara herself) weigh in on these issues. In the case of Bob, addiction educators would be more likely to step into the gatekeeper role (e.g. Ziomek-Daigle & Christensen, 2010), by exploring with Bob whether it's appropriate for him to pursue an addictions counseling career. For example in the NAADAC Ethical Standards under IV. Professional Responsibilities the following is addressed in Standard 1 Counselor Attributes :

> ***Addiction professionals, whether they profess to be in recovery or not, must be cognizant of ways in which their use of psychoactive chemicals in public or in private might adversely affect the opinion of the public at large, the recovery community, other members of the addiction professional community or, most particularly, vulnerable individuals seeking treatment for their own problematic use of psychoactive chemicals. Addiction professionals who profess to be in recovery will avoid impairment in their professional or personal lives due to psychoactive chemicals. If impairment occurs, they are expected to immediately report their impairment, to take immediate action to discontinue professional practice and to take immediate steps to address their impairment through professional assistance.***

Most state licensure boards require that counselors and counselor applicants are not currently engaged in active substance use.

In our experience, it is somewhat easier to provide remedial recommendations when students present with mental health and substance use disorders and are receptive to working on these issues. However, there are instances where students appear to resent feedback they receive from faculty and profession supervisors or seem impervious to such feedback (Burgess, 1994). These types of difficulties are found when students present with interpersonal skill deficits, immaturity, an inability to manage conflict, lack of flexibility or self-reflection deficits (Henderson & Dufrene, 2012). Some of these characteristics are suggestive of personality disorder traits . By their very nature, most personality disorders share commonalities (e.g. a lack of insight, lack of empathy, blaming others for shortcomings and interpersonal difficulties) which do not lend to making good counselors. It is common for these student to lack insight into why profession supervisors, peers or faculty are expressing concerns regarding his or her behavior and will tend to view any corrective recommendations as punitive rather than helpful. McAdams and Foster (2007) present an example where a student had brought a lawsuit against the counselor education program and university she was attending. We are also aware of an instance where a field supervisor raised concerns regarding a student's dressing provocatively at her internship placement. The student became outraged when her field supervisor suggested that she dress more appropriately.

Profession Placement & Clinical Skill Deficits

Profession experience is an integral part of addiction education and training, as it allows students to practice various counseling skills under the supervision of a credentialed addiction professional in a licensed treatment setting. Internships provide students with an opportunity to develop a professional identity as an addiction counselor by modeling their behavior based upon observing addiction counselors in action. Profession placements also provide students with the opportunity to witness and enact ethical decision-making based upon the NAADAC Ethical Standards. Generally when students encounter difficulties in their profession placements they usually revolve around clinical skill deficits or problems with ethical behavior. Even with training in the ethical standards, some students encounter difficulty in translating the written ethical code into daily practice in their profession sites, especially when it comes to boundary violations, confidentiality, multicultural competence, integrity and seeking consultation from supervisors (Henderson & Dufrene, 2012). The following is an example where a student ran into difficulties while doing his internship:

> *John is a 2nd year graduate student in a Masters degree program which has an addictions counseling specialization. He is currently an internship at an inpatient alcohol and drug program which serves both men and women with various types of substance use disorders. John primarily co-leads groups and also has a few individuals clients. In a recent individual session, a client disclosed that she had been a sexually victimized as a teenager. John knew of another client in the program who disclosed similar issues in another group so John suggested that his individual client speak with this other client since they shared similar issues and could possibly help one another. When John's group client found out that he had broken her confidentiality she was outraged and reported the incident to the clinical director who then made John's faculty advisor aware of the transgression.*

Continued from page 14

In this case, John had committed a serious ethical breach, yet was also defensive and resentful of remediation recommendations. He defended himself by stating he was acting in the best interests of his clients. In the most egregious of ethical violations faculty needs determine the need to impose their role as gatekeepers via suspension or expulsion or whether remediation will allow a student like John to make connections between ethical standards and ethical professional behavior in the profession.

These are just a few of the types of difficulties that faculty may encounter pertaining to student behavior. In Part II of this article we will talk more about the remediation and gatekeeping process and procedures.

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MEMBER SPOTLIGHT

Bowden Receives National Award

Kirk Bowden received the **2015 Outstanding Addiction/Offender Professional Award** from the International Association of Addiction and Offender Counselors (IAAOC). Each year, the IAAOC provides awards recognize outstanding contributions to the field of addiction and offender counseling, and individuals who have added to the field of addictions/offender issues through excellent professional service. Congratulations Kirk!