

The Pacific Behavioral Health Initiative: NAADAC Trains and Certifies Trainers for U.S. Affiliated Pacific Jurisdictions

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The Pacific Behavioral Health Collaborating Council (PBHCC) is a community-based non-profit organization comprised of Single State Agency Directors responsible for the quality of substance use disorder prevention and treatment services for a target population of over 544,000 children and adults in the six U.S. Affiliated Pacific Jurisdictions, including American Samoa, Guam, Commonwealth of Northern Marianas Islands, Republics of Palau and Marshall Islands and the Federated States of Micronesia. Access to local training and technical assistance experts is essential for the Pacific Jurisdictions. The total land mass of these island nations is smaller than the five states of New England spread across 669 islands and atolls spanning 5 million square miles of ocean, an area larger than the continental United States.

This month, the PBHCC and major collaborating partners including NAADAC, the Association for Addiction Professionals, the University of Nevada Reno Center for the Application of Substance Abuse Technologies, Pacific Southwest Addiction Technology Transfer Center (ATTC), and the Pacific-based community colleges from the south to northern Pacific regions, launched the Pacific Behavioral Health Initiative (PBHI), a regional workforce development initiative that will significantly

impact the behavioral health workforce across the islands by building the local capacity of indigenous Pacific Islanders serving the entire Pacific Region. As of June 2014, only six percent (6%) of the total behavioral health workforce was certified and credentialed as substance use disorder counselors or prevention specialists.

The U.S. Department of Health and Human Services' Health Resources and Services Administration (HRSA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) made a historic investment of \$900,000, \$300,000 per year for a 36-month project, to improve behavioral health services in the Pacific. Specifically, the Pacific Behavioral Health Initiative will increase the number of skilled, trained, and certified substance use disorder treatment counselors and prevention specialists by adding three hundred and sixty certified personnel to the behavioral health workforce by 2017.

Major project objectives include:

- 1) Providing 810 hours of substance use disorder specific education and training to 360 Pacific Islander behavioral health paraprofessionals from six U.S. Pacific Jurisdictions;
- 2) Reviewing, adapting and approving six behavioral health college courses in at least four Pacific-based community colleges; and

- 3) Training 18 behavioral health clinicians or college faculty to serve as Course Instructors (including Adjunct Faculty) in behavioral health courses specific to substance use disorder, prevention and the fundamentals of behavioral health.

In July 2014, NAADAC's Executive Director, Cynthia Moreno Tuohy traveled to Hawaii and in February 2015 she traveled for almost two days to Pohnpei in the Federated States of Micronesia (FSM) to work directly with prospective trainers for the PBHI for two weeks to prepare them to teach the 80-hour Foundations for Addictions Treatment course at the college level. The cadre of 18–22 college instructors, representing each island's core training team along with clinicians who have been selected to serve as Adjunct Faculty, completed this rigorous two-week Training of the Trainer (TOT) intensive session. This was the first time that a cadre of clinicians has worked together as a core team representing the islands in the Pacific Jurisdiction. The fact that they were altogether, working as a team to learn, adapt materials to be culturally relevant to their specific islands, and learn skills that heretofore had not been taught in this manner was historic.

Training of the Trainer uses teach-backs complete with culturally adapted materials, handouts, modified scenarios, revised clinical forms, peer review and role play demonstrations to ensure trainers are proficient in the content matter and demonstrate knowledge and skill in transferring content to the participating audience. Participants learned how to teach about initial interviews, intake, assessment and evaluation, treatment planning, interdisciplinary team case management, referral, discharge planning and ethics. They also learned the needs of each island and their

systems, professional relationship building and adaptation of client forms to match their needs.

The two-week training closed with a celebration of each island's culture of dance and customs hosted by the Pohnpei Division of Health and Human Services. All of the instructors were initiated into the dance of each island with much glee and laughter. Each participant in the training was "pinned" with a NAADAC pin in the closing graduation exercise to evidence their completion of the Foundations Training Course. Moreno Tuohy recalls the two-week experience was filled with team-building, passion and commitment for the work these professionals are about to undertake as they return to their islands.

"It was an honor to be accepted in this process of learning, growth, and change with such amazing professionals. Each person taught me about their culture and themselves. It was reciprocal learning and growth. This was a life changing event and created memories that will last a life time! I thank the PBHCC for allowing NAADAC to be such a large part of this process!" stated Moreno Tuohy.

All NAADAC certified trainers are expected to begin teaching the Foundations of Addictions Treatment course in all six Pacific Jurisdictions by June, 2015 as part of the Certificate Program in addictions treatment and substance use disorder prevention. Each instructor is required to become a certified substance use disorder counselor with NAADAC or ICRC. Many of the certified trainers will also be eligible to become the Adjunct Faculty to teach the six college courses once the courses have been reviewed and adapted.

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- + To help others manage and control their responses to anger
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