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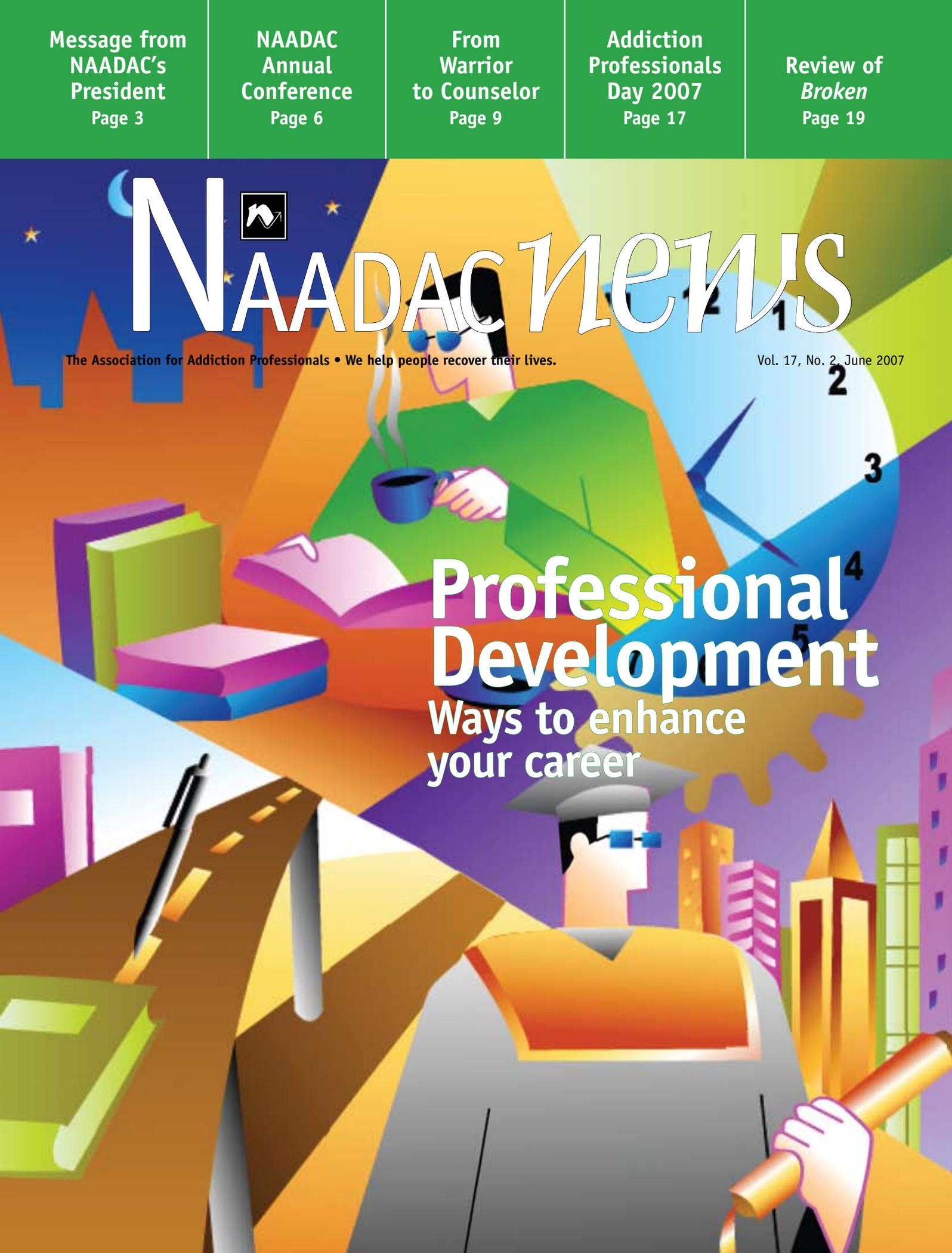
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# NAADAC NEWS

The Association for Addiction Professionals • We help people recover their lives.

Vol. 17, No. 2, June 2007



Professional  
Development  
Ways to enhance  
your career



## Editor's Note

This issue of the *NAADAC News* is focusing on professional development, and what people can do to enhance their education and their careers. Often, addiction services professionals are so focused on the clients they serve that they forget to take the time to assess their personal and professional needs. The Substance Abuse and Mental Health Services Administration (SAMHSA) has some questions that addiction professionals should periodically ask themselves:

- Does your job or career enhance your life and wellness? If it doesn't, what needs to change in order to make it a better fit for you? What can you do to make these things happen?
- Do you have interests, skills and talents that you could use to develop your own job or career? If so, what are they? What steps could you take to make this happen?
- Various resources in your area can assist you with work-related issues. They may be agencies for employment and training, vocational rehabilitation, protection and advocacy, social security, mental health agencies or schools, colleges and universities. You can begin this process by reaching out to one of these places and asking them who else they would suggest. As you reach out to an agency they suggest, ask for other referrals. If you feel you need to reach out for assistance on work-related issues, who are you going to reach out to first?
- You may know or find that you need more education and/or training to get the job of your choice. If you do, one or several of the agencies listed above would help you figure out how to do that. How are you going to find out if you need more education and/or training? If you already know that you need more education or training, how are you going to work toward getting it?

Of course, these questions aren't simple, but by re-assessing who we are and what we need from our personal and professional lives, we can continue to move our lives forward and entertain new challenges.

Enjoy the issue!

Donovan Kuehn, NAADAC News Editor

Source: Substance Abuse and Mental Health Services Administration (SAMHSA), 2007, <http://mentalhealth.samhsa.gov/publications/allpubs/SMA-3718/employment.asp>

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(updated 6/6/07)

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## Good Out of a Tragedy?

### The Events at Virginia Tech Show the Need for Parity

*Sharon Morgillo Freeman, PhD, APRN-CS, MAC*

I, like you, was horrified by the events at Virginia Tech. Our hearts go out to the families of the victims, members of the Virginia Tech Community and members of our Virginia affiliate, the Virginia Association of Alcohol & Drug Abuse Counselors (VAADAC), who helped in whatever way they could.

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*If we had a more comprehensive system of mental health and addiction parity, could these tragic events have been prevented?*

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The young man, Seung-Hui Cho, who perpetrated the killings was obviously disturbed and rejected many overtures from the campus administrators, instructors and fellow students for help. Yet the question remains, if we had a more comprehensive system of mental health and addiction parity, could these tragic events have been prevented?

When looking at the state of our nation now, addiction is the number one public health crisis in the United States, with an economic cost estimated at \$500 billion each year. As an addiction professional, I know that people can and do recover from their addictions when they can access the necessary treatment services. However, we can't expect our clients to achieve long-term recovery if they are denied the same insurance benefits as people with other health issues.

As an association, NAADAC supports mental health and substance abuse parity legislation at both the state and federal levels. Addictions and




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*NAADAC supports mental health and substance abuse parity legislation at both the state and federal levels.*

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mental health parity are important because:

1. Addiction, like schizophrenia, depression, bi-polar disorder and many other maladies, affects the brain and manifest themselves in psychiatric, psychological and behavioral symptoms. All of these diseases can be treated.
2. It is important to achieve the same medical coverage for brain disorders equal to those for other organ systems and medical conditions.
3. An estimated 80 percent of people seeking addiction treatment are employed. Most of these people have private, employment based health insurance. Most private plans offer a restricted mental health/substance abuse benefit usually through a behavioral health carve-out.

4. The current behavioral health formula permits insurance plans to discriminate against brain disorders by offering substantially reduced lifetime benefits. In addition, they can limit the number of services, the level of care and the extent of care.
5. Parity means that if a plan offers a mental health benefit, it must be equal to the medical benefit the plan offers. Parity does not mandate a plan to offer mental health or addiction treatment benefits.
6. Federal employees, who are covered by the Federal Employee Health Benefits Program, have mental health parity for themselves, their dependents, members of Congress and their staffs.
7. Thirty-two states have enacted mental health parity legislation.

Currently there is a piece of legislation before Congress that will deal with these issues. The Paul Wellstone Mental Health and Addiction Equity Act (H.R. 1424) would amend the Mental Health Parity Act of 1996 to eliminate obstacles to care for Americans with mental health and addiction disorders. The 1996 Act created equality between addiction and general medical care only for annual and lifetime limits. This bill requires equality across the terms of health plans.

This is an important time to act. It's too late to stop the tragedy in Blacksburg, Va., but who knows how many tragedies can be prevented, and how many lives saved?

*I look forward to hearing your ideas on how we can strengthen NAADAC and the addiction profession. Please feel free to contact me at morgillofreeman@aol.com.*

**Source:**

NAADAC Position Statement: Substance Abuse and Mental Health Parity

## Criminal Justice and Substance Abuse

### NAADAC Seeks People with Criminal Justice Expertise to Help Develop New Resources

*Misti Storie, MS*

According to the National Institute on Drug Abuse, in 2002, approximately 60 percent of male juvenile detainees and 46 percent of female detainees tested positive for drug use at the time of their arrest. Figures show that 70–85 percent of state inmates have substance abuse problems serious enough to warrant treatment, but ultimately only 13 percent received treatment while incarcerated. With almost 650,000 inmates released back into the community every year, the scope of the problem is enormous.

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*Sixty percent of male juvenile detainees and 46 percent of female detainees tested positive for drug use at the time of their arrest.*

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NAADAC, the Association for Addiction Professionals, is currently developing a course and manual blending the rigors of those working in the criminal justice system who treat addictions. The intersection of substance abuse and the criminal justice system is complex and frequent. Addiction professionals treat the offender, often not having all the resources available to them of the special considerations and approaches to treatment that can produce a more favorable outcome. NAADAC aims to create a manual and course that will provide addiction services professionals with the skills, tools and knowledge to successfully treat this population.

#### Contribute Your Expertise to This Body of Knowledge

NAADAC is asking for literary contributions from professionals who know the criminal justice population best—those addiction services professionals with expertise in the criminal justice arena. NAADAC aims to develop a manual and study guide addressing:

- The relationship between substance use disorders and the criminal justice system
- The purpose and role of the criminal justice system (rehabilitative vs. punitive)
- Criminological theories of crime
- Demographics of criminals
- Theories and approaches to treating offenders with a substance use disorder
- Substance abuse treatment options in prison/jail and their effectiveness
- Treatment strategies based on offense
- Reentry issues and approaches
- Special populations—juveniles, women, minorities, gangs
- Other criminal justice avenues for offenders with a substance use disorder—drug courts, probation, boot camps, therapeutic communities, family therapy, diversion programs, half-way houses
- Ethical considerations for the offender/therapist relationship

The purpose of this project is to tap into the copious expertise of the NAADAC membership, provide you with the opportunity to give back to the addiction community and be recognized for the valuable knowledge

that you possess. Literary contributions can be on one or more of the above topic areas.

NAADAC understands that due to time constraints, your specific area of expertise and other obligations, you may not wish to write an entire chapter, but you may have the desire to focus your energy on one specific component of a topic area. Any level of contribution is much appreciated!

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*With almost 650,000 inmates released back into the community every year, the scope of the problem is enormous.*

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All contributors will receive recognition for their contribution, continuing education (CE) credits based on the level of contribution, a free copy of the finished manual and course and the satisfaction of knowing you have contributed to the addiction community in a substantial and enduring way.

If you are interested in contributing or would like more information, please email Misti Storie at [mstorie@naadac.org](mailto:mstorie@naadac.org) or call 800.548.0497.



*Misti A. Storie, MS, is the Education and Training Consultant for NAADAC, the Association for Addiction Professionals, and holds a master's degree in*

*Justice, Law and Society from American University.*

## Name Changes at National Institutes of Health Emphasize Addiction is a Disease

Daniel Guarnera

A bill introduced by Sen. Joseph R. Biden, Jr. (D-Del.) would change the names of the National Institute on Drug Abuse (NIDA) and the National Institute on Alcohol Abuse and Alcoholism (NIAAA) to reflect the fact that addiction has been demonstrated to be a treatable neurobiological disease. The bill, S. 1011, was introduced on March 29 and is expected to pass Congress later this year. A companion bill was introduced in the House of Rep. by Rep. Patrick Kennedy (D-R.I.), who has also introduced the “parity” bill which would eliminate insurance discrimination against people with addictions.

Biden’s bill would rename NIDA the National Institute on Diseases of Addiction (preserving the acronym). NIAAA would become the National Institute on Alcohol Disorders and Health (NIADH).

“Addiction is a neurobiological

disease—not a lifestyle choice—and it’s about time we start treating it as such,” said Sen. Biden in defense of his proposal. “We must lead by example ... By changing the way we talk about addiction, we change the way people think about addiction, both of which are critical steps in getting past the social stigma too often associated with the disease.” He referred to the term “abuse” as “pejorative” because it feeds the stigma that people “choose” their addiction.

NAADAC has signed letters in support of the name-change legislation.

Both institutes are considered the premier addiction research organizations in the world. NIDA was established in 1974 with the mission to “lead the Nation in bringing the power of science to bear on drug abuse and addiction.” Its budget is just over \$1 billion. NIAAA traces its history back to 1970 and aims “to

support and promote the best science on alcohol and health for the benefit of all.” NIAAA is funded at about \$440 million annually.

Sen. Biden was named the 2007 NAADAC Legislator of the Year at the March’s Advocacy Action conference for his career-long support of addiction professionals. Rep. Kennedy delivered the conference’s keynote address and received the President’s Award.



*Daniel Guarnera is NAADAC’s Government Relations Liaison and has worked for a variety of organizations, including the N.J.*

*Institute for Social Justice, Newark Now (a community development non-profit organization) and the European Parliament in Brussels..*

## Are you a NAADAC e-ADVOCATE?

### WHY?

Whether or not they hear from addiction professionals, politicians make decisions that affect addiction services all the time. Insurance laws, public funding, Medicaid regulations, research grants, loan forgiveness programs ... these are just a handful of ways that politicians influence the way you work. It’s crucial that we **raise our voices together** so Congress and the state legislatures understand the effects of their decisions. That’s the only way they can make properly informed choices about drug policy.

### WHAT?

NAADAC’s **e-Legislative Action Network** (e-LAN) is an easy-to-use online tool to help addiction professionals communicate with their politicians. When you join the e-LAN, you will receive e-mails once per week with updates on important legislation. The e-LAN also lets you send prepared messages to your representatives. It takes about 30 seconds to send an e-LAN message to Congress.

### HOW?

Sign up at [www.capwiz.com/naadac](http://www.capwiz.com/naadac). You can sign up by scrolling to the bottom of the page and

clicking on “Action e-List” under the heading “Stay Informed.” Or, just send an Action Alert and you’ll be signed up too!

### WHO?

Everyone! You do **not** need to be a NAADAC member. Encourage your co-workers to sign up! ... And affiliate presidents, you can use the e-LAN to inform your state’s members about important legislation.

*To find out more contact Daniel Guarnera at [dguarnera@naadac.org](mailto:dguarnera@naadac.org) or 800.548.0497, ext. 129.*

**Start Now! Visit [www.capwiz.com/naadac](http://www.capwiz.com/naadac) to begin!**

# Addiction Services Professionals Gather at Journey Together Conference

## Enjoy the Sights and Sounds of Nashville

*Donovan Kuehn, NAADAC Director of Outreach*

Join NAADAC, the Association for Addiction Professionals, as it partners with the Tennessee Association of Alcoholism & Drug Abuse Counselors (TAADAC) and the National Association of Lesbian and Gay Addiction Professionals (NALGAP) in co-hosting the 2007 Journey Together conference September 5 to 8.

The Journey Together conference will be featuring speakers presenting on many topics, including:

- Prevention/Adolescents
- Specialty Populations
- Corporate/Human Resources/Workplace
- Treatment Skills/Issues
- Criminal Justice
- Workforce Development

We are pleased to welcome nationally recognized keynote speakers as well as great local presenters to the conference. You can anticipate innovative workshop sessions offering over 20 CE credits. You'll be earning those credits at the Renaissance Nashville Hotel and Convention Center in downtown Nashville for an amazing room rate of only \$139 per night.

The conference will also include 12 hours of special training for Substance Abuse Professionals who need to qualify or re-qualify under U.S. Department of Transportation (DOT) regulations (additional costs for this track apply) and will offer special tracks for the National Association of Lesbian and Gay Addiction Professionals.

### Featured Speakers

**Carlo C. DiClemente, PhD**, is Professor and Chair, Department of Psychology, University of Maryland, Baltimore County. DiClemente is internationally recognized as co-creator (with James Prochaska, PhD) of the Transtheoretical Model of Change, a model that identifies stages of change and other factors that predict treatment outcomes and allows many more people to enter treatment programs at earlier stages of readiness. DiClemente is the author of more than 140 publications and currently has a book in press, *Addiction and Change: How Addictions Develop and Addicted People Recover*. DiClemente has been principal or co-investigator on 25 grant-funded research projects including four current projects, which are funded by the National Institute on Drug Abuse (NIDA), the National Cancer Institute, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the National Institute of Child Health Development.

**H. Westley Clark, MD, JD, MPH, CAS, FASAM**, is the Director of the Center for Substance Abuse Treatment (CSAT) under the Substance Abuse and Mental Health Services Administration (SAMHSA), part of the U.S. Department of Health and Human Services. Dr. Clark leads the agency's national effort to provide effective and accessible treatment to all Americans with addictive disorders.

**Nora D. Volkow, MD**, is the Director of the National Institute on Drug Abuse (NIDA), an agency that finances more than 80 percent of the world's research on addiction and its impact. Dr. Volkow has authored or co-authored more than 280 peer-reviewed

publications, three edited books, and more than 50 book chapters and non-peer reviewed manuscripts. She is the recipient of multiple awards for her research, and has been elected to membership in the Institute of Medicine in the National Academy of Sciences. Dr. Volkow was named "Innovator of the Year" in 2000 by *U.S. News and World Report*.

**David J. Powell, PhD, LADC, CCS**, is president of the International Center for Health Concerns, Inc., a health consulting company. He assists worldwide in the education and training of behavioral health professionals. Formerly, he was president of ETP Inc. and in that capacity oversaw clinical supervision training programs for the U.S. Navy and Marine Corps worldwide.

**David Sky, CPS, CCDC, MA**, is a speaker/storyteller. Sky's background in counseling gives him a wonderful perspective to create and tell his own stories. He tells stories that have a balance of humor and information. Sky holds a master's degree from the Methodist Theological School and is the author of *See the Forest, Hear the Trees: The Art of Storylistening* and *Sky Stories: A Storybook for Grownups*. Sky has had a varied career including stints as a counselor, musician, U.S. Air Force Crew Chief and janitor at Ripley's Believe It or Not Museum. His workshops are interactive, with audience members also participating in the storytelling experience.

Don't miss this exciting educational opportunity. Come earn your continuing education credits at the Journey Together conference, and bring the family to enjoy the sights and sounds of Nashville.

For more information, visit [www.naadac.org](http://www.naadac.org), call 800.548.0497 or e-mail [naadac@naadac.org](mailto:naadac@naadac.org) (please put "Annual Conference" in the subject line).

### 2007 Journey Together Conference Agenda Highlights

#### September 5, 2007

9am-5pm	DOT Substance Abuse Professional (SAP) Qualification Training
9am-5pm	GLBT Train the Trainers
9am-10:30am	Opening Plenary - David Sky
11am-Noon	Plenary - National Institute on Alcohol Abuse and Alcoholism
2pm-3:30pm	Workshops
4pm-5:30pm	Workshops
6:30pm-8:30pm	Seminar

#### September 6, 2007

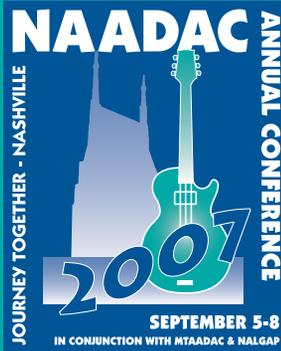
9am-5pm	DOT Substance Abuse Professional (SAP) Qualification Training
9am-Noon	Plenary - Carlo DiClemente
2pm-3:30pm	Workshops
4pm-5:30pm	Workshops

#### September 7, 2007

9am-10:30am	Plenary - John Walters, ONDCP
11am-Noon	Plenary - Nora Volkow, National Institute on Drug Abuse
2pm-3:30pm	Workshops
4pm-5:30pm	Workshops

#### September 8, 2007

8:30am-11:30am	Plenary - David Powell
Noon-2pm	Blending Solutions Plenary - Carlo DiClemente
2pm-3pm	Closing Plenary - H. Westley Clark, CSAT/SAMHSA
6:30pm-9:30pm	Presidents' Dinner and Award Presentation



Help  
celebrate  
NAADAC's  
35th  
Anniversary

# 2007 Journey Together Conference

September 5-8, • Nashville, TN

## FEATURED SPEAKERS



### Carlo C. DiClemente, PhD

Professor and Chair, Department of Psychology, University of Maryland, and co-creator of the Transtheoretical Model of Change.



### H. Westley Clark, MD, JD, MPH, CAS, FASAM

Director, Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA). A leader of the national effort to provide effective and accessible treatment to all Americans with addictive disorders.



### Nora D. Volkow, MD

Director of the National Institute on Drug Abuse (NIDA), an agency that finances more than 80% of the world's research on addiction and how it impacts on people's lives.



### David J. Powell, PhD, LADC, CCS

President of the International Center for Health Concerns and a worldwide leader in the education and training of behavioral health professionals.

*Don't miss this exciting educational opportunity. Come earn your continuing education credits at the Journey Together conference, and bring the family to enjoy the sights and sounds of Nashville.*

## EXPLORE NASHVILLE & TENNESSEE!

The Journey Together conference will be offering special rates with local tours and unique opportunities to enjoy all that Nashville has to offer.

For more information, visit [www.naadac.org](http://www.naadac.org) or [www.taadac.org](http://www.taadac.org) or contact the Visitor's Bureau at [www.musiccityusa.com](http://www.musiccityusa.com) or 800.657.6910.

## EARN OVER 20 CE CREDITS

Continuing Education credits can be earned in several tracks, including:

- Prevention/Adolescents
- Specialty Populations
- Corporate/Human Resources/Workplace
- Treatment Skills/Issues
- Criminal Justice
- Workforce Development

The conference will also include 12 hours of special training for Substance Abuse Professionals who need to qualify or re-qualify under U.S. Department of Transportation (DOT) regulations (additional costs for this track apply) and will offer special tracks for the National Association of Lesbian and Gay Addiction Professionals (NALGAP).

## SCHOLARSHIPS

Scholarships are available. Please visit [www.naadac.org](http://www.naadac.org) to download the scholarship application form. Please click on "upcoming events."

**All scholarship applications must be received no later than July 5, 2007 to be considered.**

## HOTEL & TRAVEL INFORMATION

### Nashville International Airport

Fly into Nashville (Airport Code: BNA) using one of the carriers that serve the airport: American, Continental, Delta, Frontier, Jetblue, Northwest, Midwest, Southwest, United and US Airways.

### Hotel

Renaissance Nashville Hotel & Convention Center  
611 Commerce St., Nashville, TN 37203 USA

For reservations, call 800.327.6618. Please mention *Journey Together* or *NAADAC* to receive the special rate of \$139 per night (plus applicable taxes).

## CONFERENCE AGENDA

For up-to-date agenda details, please visit [www.naadac.org](http://www.naadac.org) and [www.taadac.org](http://www.taadac.org)

For more information, visit [www.naadac.org](http://www.naadac.org), call 800.548.0497 or e-mail [naadac@naadac.org](mailto:naadac@naadac.org) (put "Annual Conference" in the subject line).

Co-hosted by NAADAC, the Association for Addiction Professionals, as it partners with the Tennessee Association of Alcoholism & Drug Abuse Counselors (TAADAC) and the National Association of Lesbian and Gay Addiction Professionals (NALGAP).



## Students: Past, Present and Future

### Lifelong Learning is the Key to Success

*Don P. Osborn, MS, MA, MAC, NCP, ICAC, NCC, LMFT, LMHC, LCSW*

There is a simple truth, whether you are currently in school or if you have been in the working world for some time: learning never stops.

The reality is, that to maintain our skills, knowledge, and competence or, in some cases, our position and our job, we may need to go back to school. You may need a course, or for some, a new or advanced degree altogether. It is not an easy decision, especially with regard to time and finances. I have been asked by colleagues around the country facing these decisions and current students, what my advice would be when looking at a career or going back to school. As a recent “returning student,” professor and practicing professional of over 25 years, I offer my suggestions.

#### **Is your school (online or traditional) institutionally accredited, and by whom?**

Some will inform you that they are an authorized degree granting institution through the state. What you really want to know is “are they regionally accredited.” The most recognized accrediting body is The Higher Learning Commission. This shows that the school has had its programs and practices audited and has met accreditation standards for instruction and fair practices.

#### **Ask if the respective department (e.g. counseling, psychology, marriage and family) is accredited.**

Here the actual profession has approved the program

#### **The Power of Technology**

If you are thinking of going or returning to school, there has never been a better time. Higher education has changed like never before. While there is still the traditional campus, access to education has also been technologically enhanced. You can go to a college or university or use the internet to access your studies from the convenience of your own home and learn in a virtual classroom with others just like yourself.

Technology can also help busy professionals manage their careers and education. If you miss class or need to be away, no problem. You can download a lecture to your computer or iPod and play the lecture back at your convenience. Blackboards have become an antique—you now have white boards, or better yet, PowerPoint. Not all of these formats may be conducive to your style of learning. You still have the choice, if you consider yourself to be “old school,” to learn “old school” or you can get your degree by studying completely online. One advantage of the virtual learning is you won’t have to pay fees for parking, the marching band or the football team.

of study, instruction and content to meet current standards of practice. Such examples for counseling would be the Council for Accreditation of Counseling and Related Educational Programs (CACREP).

#### **Online schools will cost a little more than some traditional schools.**

There are several reputable online schools, but be prepared to pay a little more. Look at their website for information on tuition and financial assistance, and call their admissions specialist.

#### **What kind of learner are you and how much time do you have?**

You may find that online learning is not for you. You may perform better in the traditional classroom setting with a teacher and other students. Visual examples and auditory discussion may enhance your learning or a solitary, accelerated learning environment may work best for you. If you are looking at an online school, you will need to assess their learning formats and faculty support and accessibility.

Keep in mind that if you are taking courses online you will need to set a consistent daily or weekly time block as if you are in class. You’ll have to maintain that commitment, even with the demands for attention from children, your spouse, pets and friends. You might want to try this schedule for one or two weeks before enrolling for a class, just to see how you and others adjust. If you are in a traditional setting the same holds true—as well as thinking about travel time and fuel expenses, in addition to tuition and books.

#### **Can your courses transfer?**

You may not be thinking about transferring your credits right now, but eventually you may want or need to. Be wary of investing time and money for courses that will not be accepted by another college or university. This is where accreditation comes into play; accreditation is essentially looking at standards for standards. Inquire if your campus has any transfer agreements. In some cases, it will be left to you to solve the issue. An inquiry to a state university registrar’s office about transfer credits can save you aggravation in the long term. You may also want to speak to the respective department chair (e.g. counseling, social work) and get their advice.

#### **Go to the school web page and do a review.**

Don’t get caught up in how it looks. Ask yourself “what questions did I have that have been answered?” “What

**Students, continued on page 10**

## Warrior to Substance Abuse Counselor

### Second Career Professionals Come from Many Walks of Life

*CPT (Ret) Michael R. Hurst, MS, CSAC, CEAP*

During my participation at the NAADAC Advocacy Action Day in March 2007, numerous participants were interested and surprised that a retired U.S. Army Special Forces Captain (Green Beret) was a substance abuse counseling professional. Some of the participants who were veterans were glad to see that a new generation (post-Vietnam) veteran was entering the addiction services profession. As a result of the conversation, Donovan Kuehn, editor of the *NAADAC News*, asked me to put my career transition on record. My intent is to inform my non-veteran colleagues and challenge other veterans to enter the dedicated, and desperately needed, profession of substance abuse counseling.



The United States is engaged in the global war on terrorism; our country's warriors and their families need assistance from educated and trained military veteran addiction services professionals. Our colleagues who have not served in the military will gain significant insight into military culture as well. This will enhance their already professional and focused efforts. In my opinion, the transition from warrior to substance abuse counselor was an easy and logical transition.

During my military career, I spent approximately 18 years on parachute status (jumping out of perfectly good airplanes and helicopters). This included experience in the Middle East and East Africa. I served in this status for 11 out of 20 years in Special Forces, including a six-month tour in Somalia in 1993. The Special Forces A-Team I commanded suffered only one wounded in action (WIA) during our tour. These men were by far the most professional and dedicated warriors I had ever served with. We had traveled over much of the country and spent about three months flying helicopter missions (aerial recon/sur-

veillance and sniper) in the sky over Mogadishu, Somalia. To this day, I thank God that we all survived. We returned to the United States approximately two weeks before October 3, 1993 (the "Black Hawk Down" incident where two Black Hawk helicopters were shot down and 18 soldiers were killed). Since September 11, 2001, many of my former A-Team members have served multiple tours in Afghanistan, Iraq and other parts of the world, continuing to protect us and live up to the Special Forces motto, "De Oppresso Liber" (Free from Oppression).

My military career taught me a great many skills and challenged my leadership ability in order for me to perform at my best. Needless to say, my 20-year career challenged me physically, mentally and emotionally and the training I received in the U.S. Army more than prepared me for my military assignments, deployments and my current profession. The major skills I acquired were leadership, leadership counseling, role modeling, mentoring, teaching and training.

These aspects of military service are an exact match for the education and skills required to be a substance abuse counselor. In the past eight years, I have served as a coun-

**Warrior, continued on page 10**



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**Warrior, continued from page 9**

selor in an outdoor adolescent therapeutic program, treatment coordinator of a juvenile and adult drug court, probation and parole substance abuse counselor and an employee assistance professional/employee assistance program coordinator for the Fort Myer Military Community, Fort Myer, Virginia. All of these jobs have allowed me to incorporate my military education and experience.



This journey to a counseling career has led me to start my own company, the Hurst Group, LLC with a focus of consulting on military counseling. Ultimately, my counseling related jobs incorporated all the aspects of counseling education and the Addiction Counseling Competencies.

One of the benefits of becoming an addiction services professional in my second career, is I have been able to utilize a number of the skills I acquired in my military career. The skills I have found most applicable are:

- Leadership training and experience
- Team building skills
- Communication skills, including cross cultural communication
- Problem solving skills
- Time management skills
- Physical fitness
- Nutrition
- Stress management

The counseling profession is challenging, demanding and often stressful. The skill set I listed above ensures that I have the proper tools to accomplish even the most difficult and challenging counseling situation. It is very rewarding and extremely satisfying to know that you are contributing to another person's recovery from addiction.

The counseling profession is truly a calling and not just a profession. Just like in the military, every day brings new and different opportunities to excel. This noble helping profession provides solutions for many people who would

otherwise remain hopeless and forgotten. This is exactly what the military profession is all about. In the military, I took an oath to "support and defend." In counseling, my counselor ethics and professional standards essentially say the same thing.



*Michael R. Hurst, MS, CSAC, CEAP is a retired U.S. Army Special Forces Captain (Green Beret) and a veteran of Southwest Asia and Somalia. He is a member of NAADAC and may be contacted at [mike@thehurstgroup.us](mailto:mike@thehurstgroup.us)*

**Students, continued from page 8**

new questions do I have?" Most importantly "what questions have not been answered?"

**Will your employer help with cost or adjusted schedule? And the tax break.**

Your employer may help you, and it may even lead to an increase in your earnings. Also check with a tax accountant to see if the expense can be a tax deduction.

**Specialize, Specialize, Specialize.**

If you are working on a degree, particularly a graduate degree, think about what you are doing to distinguish yourself from the applicant pool. I have repeatedly told my students to research and discover your interest within the degree or field of practice. What is your passion or skill set that sets you apart from other job applicants. (e.g. children, eating disorders, co-existing disorders)? As an administrator and clinical director, I pulled these individuals out of the pile first.

Learning never stops and in most cases our jobs and the profession see to that. The reality is, to maintain our skills, knowledge and competence, or in some cases our position and our job we may need to go back to school. By keeping these principles in mind, one can focus on the education and not on the details that can distract from learning.



*Donald P. Osborn serves as the NAADAC Mid Central Regional Vice President, and is the Graduate School Director and Assistant Professor of Addictions Counseling, Indiana Wesleyan University in Wesleyan, Indiana.*

## Experience to Professional The Challenge of Educating Addiction Counseling Students

Anne S. Hatcher, EdD, RD (ret), CAC III, NCAC II

Working with individuals who are in recovery, and who are focused on making a difference in their own lives as well as in the lives of others, is one of the more rewarding experiences of those of us who teach in addiction education programs. In the program at Metropolitan State College of Denver, approximately half of the students who are pursuing certification as addiction counselors are in recovery, and the rest have experienced addiction first hand through living or working

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*Individuals with  
these life experiences  
developed survival skills,  
including knowing first  
hand how to listen and  
respond to others.*

---

with persons who abused psychoactive chemicals. A few of the entering students have a history of being incarcerated for drug charges and are looking for a way to turn that experience into a positive one that will serve others. A number of those entering the program have worked in other careers that they did not find as fulfilling as they would like so they are pursuing a second career that involves helping others.

As a result of life experience, their goal in the new career is to make others happy, create love and correct life's problems. Individuals with these life experiences developed survival skills, including knowing first hand how to listen and respond to others. Their "fix it" skills have been honed over many years of experience. In addition, they have developed acting skills that served an essential purpose in keeping them safe emotionally and physically.

Since most people who choose to become addiction counselors want to make a difference in the lives of others, they have a vision of what would have made a difference in their lives and therefore think that what they needed (service, attitude, behavior) will probably be the solution for others. Some of them have been identified as "counselors" by friends and family for many years. For others, someone in a 12 step program has suggested being a counselor. Those who relied on them gave positive feedback so they think that they already know what to do. In their minds, all they need is a document (degree or certificate) that confirms their qualifications, so they enroll in an addiction education program.

When skills are learned through life experience and then that individual enters a field of study in which he/she is asked to learn the theories that support their skills, to identify the reasons the skills work, to analyze the counseling process and to justify their decisions, there is the need to put aside reliance on intuition and feelings and to depend on the intellectual (thinking an analytical) process. Resistance to the challenge of learning to be a professional is too overwhelming for some and they leave the program because it does not fit their needs. Another significant group struggles as they change their patterns of thinking and behavior. What follows is a description of three challenges faced by addiction studies students and their teachers.

### The Challenge to Change Our Behaviors

Over the years of teaching addiction counseling students, it has become obvious to me and to other instructors that without concentrated effort to change our behaviors, we teach others in the same way we were taught. We tend to counsel others as we have been counseled and we supervise employees

in the same manner that we were supervised. If our experience in these areas has been with those who were skilled in their craft, we are indeed fortunate. On the other hand, if the person from whom we learned was not skilled and that person's behavior is the only reference point we have, those with whom we work will receive services that are substandard.

No one enters a training or education program with the intent of becoming a mediocre or poor service

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*Without concentrated  
effort to change  
our behaviors, we teach  
others in the same way  
we were taught.*

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provider. However, learning to be an excellent or an outstanding addiction counselor involves learning skills that can be supported by theoretical knowledge and research and being able to link those two components. It involves unlearning behaviors that are less effective and learning other skills that have been proven more effective. In addition to learning the required knowledge and practicing the skills found effective in addiction counseling, the learner finds it necessary to recognize that perhaps those who helped her/him were not role models to be emulated. This can cause a grieving process as one gives up on pre-conceived ideas, while learning new ones. In other words, one's world-view is forever altered as the persona adapts to that of a professional addiction counselor instead of being just a recovering person wanting to change the world.

Experience, continued on page 12

Experience, continued from page 11

*Learning to be an excellent  
or an outstanding addiction counselor  
involves learning skills that  
can be supported by theoretical knowledge  
and research.*

### The Challenge to Maintain Good Documentation

Yet another essential part of being an addictions counselor is documentation. The student who “just wants to help people” often thinks that client records are not essential. The time spent writing records, maintaining contact with other professionals working with the client and maintaining files is viewed as “busy work” that does not meet either the client’s or the counselor’s needs. At the same time, the agencies that hire addiction counselors must have employees who have good documentation skills and who are willing to put in the time necessary to maintain the required records.

Written records provide justification for continued funding of an agency, document client progress, or lack thereof, and prove that the counselor provided the agreed upon services. Accusations of incompetence or wrong doing by the counselor are best answered to by a complete set of client records that document the client’s condition at intake, progress and condition upon completion of the program. Records of what occurred during treatment indicate the competence of the counselor and decrease the likelihood of a grievance being filed. People entering the addiction counseling profession generally enjoy working with people and typically do not like working with things (client records). Unfortunately both aspects of the work are essential to success.

### Following the Code of Ethics

A common notion for those new to the profession is that the rules (ethical standards and standards of practice) are written for “other people who are less competent than I am.” There is a common belief among those entering the addiction counseling education programs that they do not need to know about the code of ethics, confidentiality laws or the standards expected of them because they have a good heart and are well intentioned. Therefore, they feel that with these good intentions no one will question what they do or file a grievance against them. In our program’s course on legal and ethical issues, students are often appalled by the case studies they are asked to cite for applicable ethical, legal or professional standards. Case studies used are based on situations that really occurred and that

had to be addressed using the code of ethics, the state mental health statute, the laws related to confidentiality and case law arising from court cases. Over the years, it has become obvious that the things that people really do are often more bizarre than any scenario that an instructor might make up.

Using real life situations (in which the identities of the real people involved are not revealed) as learning tools requires students to make decisions that are not clearly right or wrong, to recognize that such decisions are based on current knowledge and that one must be able to cite specific standards to support decisions they make. Most of us would like to have clear guidelines so we know that we are correct. A characteristic of addicts is a desire for predictability; they relied on the psychoactive substance because drugs are more predictable than people and the results of use were known. When working as a counselor, there is a need to become comfortable with uncertainty and to recognize that there is more gray than black and white.

*New professionals need to know about  
the code of ethics, confidentiality laws  
and the standards expected of them.*

In summary, individuals who are in recovery have faced their demons and changed their lives as a result. Overall they are more comfortable with themselves than the average person one would meet on the street. However, when they enter an addiction studies program, they are faced with other “demons” that they did know existed. They are asked to change again, to give up a comfortable world view of recovery and to move into an ever changing profession where what is known is constantly changing and evolving as more is learned. What worked in the recovery program might not be readily adapted to the world of the professional addiction counselor.

The addiction services profession is an exciting, dynamic profession that is not for the faint of heart, but for those who want to make the world a better place by living one day at a time and making a difference on that day.



*Anne Hatcher, EdD, CAC III, NCAC II is Co-Director of the Center for Addiction Studies at Metropolitan State College of Denver. Since joining the full-time faculty in 1988, she has designed courses and developed protocols at the local, state and national level. Dr. Hatcher was a member of the NAADAC Certification Commission for six years.*

# Salaries of Addiction Services Professionals

## Salaries Vary by Region and Educational Background

*Donovan Kuehn, NAADAC Director of Outreach and Marketing*

In October 2006, members of the National Association of Addiction Treatment Providers (NAATP) and addiction treatment providers through NAADAC, the Association for Addiction Professionals were surveyed about salaries in the addiction services profession. Final results were tabulated and made available for distribution in January 2007.

The information below lays out the salary ranges and averages for various positions in the addiction services profession throughout the United States.

### Annual Salary for a Counselor (no degree)

Provides a wide range of counseling and educational services to clients. Often must obtain a state certification or license. (Certification and licensure requirements vary from state to state).

	<i>Minimum</i>	<i>Maximum</i>	<i>Average</i>
Midwest Region	\$20,500	\$38,000	\$27,144
Northeast Region	\$23,000	\$45,000	\$29,632
South Region	\$20,000	\$45,000	\$30,000
West Region	\$18,720	\$36,000	\$27,025

### Annual Salary for a Counselor (bachelor's degree)

Provides a wide range of counseling and educational services to clients and holds a bachelor's degree. Often must obtain a state certification or license. (Certification and licensure requirements vary from state to state).

	<i>Minimum</i>	<i>Maximum</i>	<i>Average</i>
Midwest Region	\$15,184	\$38,243	\$27,179
Northeast Region	\$23,000	\$45,000	\$32,213
South Region	\$22,000	\$45,000	\$31,937
West Region	\$23,920	\$38,251	\$30,680

### Annual Salary for a Counselor (graduate degree)

Provides a wide range of counseling and educational services to clients and holds a graduate degree. Often must obtain a state certification or license. (Certification and licensure requirements vary from state to state).

	<i>Minimum</i>	<i>Maximum</i>	<i>Average</i>
Midwest Region	\$25,200	\$40,000	\$31,628
Northeast Region	\$23,000	\$55,700	\$35,528
South Region	\$28,000	\$43,000	\$35,179
West Region	\$25,417	\$50,000	\$37,182

### Annual Salary for a Clinical Supervisor

Plans, organizes and directs operations of the clinical services area and provides clinical supervision to counseling/clinical staff.

	<i>Minimum</i>	<i>Maximum</i>	<i>Average</i>
Midwest Region	\$25,000	\$46,125	\$36,614
Northeast Region	\$29,532	\$65,000	\$41,516
South Region	\$32,000	\$61,000	\$48,406
West Region	\$30,600	\$53,000	\$37,671

### Annual Salary for a Clinical Director

Non-physician clinician responsible for the development and implementation of the clinical components of a treatment program. Ensures that staff are credentialed appropriately and maintain their credentials. Provides for or ensures that clinical supervision is provided to all clinical staff.

	<i>Minimum</i>	<i>Maximum</i>	<i>Average</i>
Midwest Region	\$36,109	\$70,400	\$50,726
Northeast Region	\$28,000	\$64,300	\$48,297
South Region	\$32,000	\$85,000	\$60,270
West Region	\$31,200	\$75,000	\$54,838

### Annual Salary for a Chief Executive Officer

Provides overall direction and leadership to the organization; establishes strategic plans and guides their implementation; provides leadership and support to the Board of Directors; selects and directs executive staff and represents the organization to major external authorities and constituencies.

	<i>Minimum</i>	<i>Maximum</i>	<i>Average</i>
Midwest Region	\$40,000	\$223,600	\$94,767
Northeast Region	\$40,000	\$146,800	\$92,360
South Region	\$65,000	\$129,266	\$88,752
West Region	\$50,000	\$95,000	\$65,000

To obtain a copy of the full 2006 Salary Survey, contact the National Association of Addiction Treatment Providers (NAATP) at 717.392.8480 or [rhunsicker@naatp.org](mailto:rhunsicker@naatp.org), or visit the NAATP website at [www.naatp.org](http://www.naatp.org).

## Sign-up Now for NAADAC's 2007 Life-Long Learning Series Pharmacotherapy: Integrating New Tools into Practice

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### Upcoming Sessions

**June 28, 2007**  
Orlando, Fla.

**September 23, 2007**  
Houston, Tex.

**July 20, 2007**  
Kansas City, Mo.

**November 3, 2007**  
Oakland, Calif.

**July 27, 2007**  
Seattle, Wash.

**November 16, 2007**  
Albany, NY

**September 6, 2007**  
Hyannis, Mass.

Or take the course online.  
Visit [www.naadac.org](http://www.naadac.org)  
for more information.

# Thinking About Going or Returning to School?

## Things to Consider

*Donovan Kuehn, NAADAC News Editor*

There are more options than ever before when one considers educational programs. Here are some things to consider when looking for the program that best suits you.

### Databases and Information

The U.S. Department of Education maintains a database of accredited postsecondary institutions and programs. With the number of choices and options out there, you want to be certain that you are enrolling in a program that follows professional standards and is recognized to follow best practices in education.

According to the U.S. Department of Education, the goal of accreditation is to ensure that education provided by institutions of higher education meets acceptable levels of quality. Here you will find lists of regional and national accrediting agencies recognized by the U.S. Secretary of Education as reliable authorities concerning the quality of education or training offered by the institutions of higher education or higher education programs they accredit.

To search the U.S. Department of Education's database, or for more information on accreditation in the United States, please visit [www.ed.gov/admins/finaid/accred/index.html](http://www.ed.gov/admins/finaid/accred/index.html).

### Diploma Mills

Diploma mills are institutions more interested in taking your money than providing you with a quality education. The Better Business Bureau ([www.bbb.org](http://www.bbb.org)) suggests you consider the following features as warnings when considering whether or not to enroll in a school:

- Degrees that can be earned in less time than at an ac-

credited postsecondary institution, an example would be earning a bachelor's degree in a few months.

- A list of accrediting agencies that sounds a little too impressive. Often, these schools will list accreditation by organizations that are not recognized by the U.S. Department of Education or the Council for Higher Education Accreditation (the two reputable organizations that recognize accrediting agencies). These schools will also imply official approval by mentioning state registration or licensing.
- Offers that place unrealistic emphasis on offering college credits for lifetime or real world experience.
- Tuition paid on a per-degree basis, or discounts for enrolling in multiple degree programs. Accredited institutions charge by credit hours, course, or semester.
- Little or no interaction with professors.
- Names that are similar to well known reputable universities.
- Addresses that are box numbers or suites. That campus may very well be a mail drop box or someone's attic.

A degree from a diploma mill is unlikely to impress prospective employers. Employers require degrees from legitimately accredited institutions and federal agencies are being directed by the federal government's Office of Personnel Management (OPM) to verify the legitimacy of an applicant's degree(s). According to the OPM, "there is no place in Federal employment for degrees or credentials from diploma mills." Acquiring illegitimate degrees can also put one in conflict with their professional ethical standards.

For more information on educational options, go to your state or territory's higher education agency, listed below.

#### Alabama

Alabama Commission on Higher Education  
[www.ache.state.al.us](http://www.ache.state.al.us)

#### Alaska

Alaska Commission on Postsecondary Education  
<http://alaskadvantage.state.ak.us>

#### Arizona

Arizona Commission for Postsecondary Education  
[www.azhighered.gov](http://www.azhighered.gov)

#### Arkansas

Arkansas Department of Higher Education  
[www.arkansashighered.com](http://www.arkansashighered.com)

#### California

California Student Aid Commission  
[www.csac.ca.gov](http://www.csac.ca.gov)

#### Colorado

Colorado Commission on Higher Education  
[www.state.co.us/cche](http://www.state.co.us/cche)

#### Connecticut

Connecticut Department of Higher Education  
[www.ctdhe.org](http://www.ctdhe.org)

#### Delaware

Delaware Higher Education Commission  
[www.doe.state.de.us/high-ed](http://www.doe.state.de.us/high-ed)

#### District of Columbia

State Education Office (District of Columbia)  
<http://seo.dc.gov/seo/site/default.asp>

#### Florida

State University System of Florida  
[www.flbog.org](http://www.flbog.org)

#### Georgia

Georgia Student Finance Commission  
[www.gsfc.org](http://www.gsfc.org)

#### Hawaii

Hawaii Board of Regents  
[www.hawaii.edu](http://www.hawaii.edu)

#### Idaho

Idaho State Board of Education  
[www.boardofed.idaho.gov](http://www.boardofed.idaho.gov)

**Illinois**

Illinois Student Assistance Commission  
www.collegezone.com

**Indiana**

State Student Assistance Commission  
of Indiana  
www.ssaci.in.gov

**Iowa**

Iowa College Student Aid Commission  
www.iowacollegeaid.gov

**Kansas**

Kansas Board of Regents  
www.kansasregents.org

**Kentucky**

Kentucky Higher Education Assistance  
Authority  
www.kheaa.com

**Louisiana**

Louisiana Office of Student Financial  
Assistance  
www.osfa.state.la.us

**Maine**

Finance Authority of Maine  
www.famemaine.com

**Maryland**

Maryland Higher Education Commission  
www.mhec.state.md.us

**Massachusetts**

Massachusetts Board of Higher Education  
www.mass.edu

**Michigan**

Department of Career Development  
www.michigan.gov/mdcd

**Minnesota**

Minnesota Office of Higher Education  
www.ohe.state.mn.us

**Mississippi**

Mississippi Institutions of Higher  
Learning  
www.ihl.state.ms.us

**Missouri**

Missouri Department of Higher  
Education  
www.dhe.mo.gov

**Montana**

Montana University System  
www.montana.edu/wwwoche

**Nebraska**

Nebraska Coordinating Commission  
for Postsecondary Education  
www.ccpe.state.ne.us/PublicDoc/  
CCPE/Default.asp

**Nevada**

Nevada System of Higher Education  
http://system.nevada.edu

**New Hampshire**

New Hampshire Postsecondary  
Education Commission  
www.state.nh.us/postsecondary

**New Jersey**

Commission on Higher Education  
(New Jersey)  
www.state.nj.us/highereducation/  
index.htm

**New Mexico**

New Mexico Higher Education  
Department  
http://hed.state.nm.us

**New York**

New York State Higher Education  
Services Corporation  
www.hesc.org

**North Carolina**

North Carolina State Education  
Assistance Authority  
www.cfnc.org

**North Dakota**

North Dakota University System  
www.ndus.edu

**Ohio**

Ohio Board of Regents  
http://regents.ohio.gov

**Oklahoma**

Oklahoma State Regents for Higher  
Education  
www.okhighered.org

**Oregon**

Oregon University System  
www.ous.edu

**Pennsylvania**

Office of Postsecondary and Higher  
Education  
www.pdehighered.state.pa.us/higher/  
site/default.asp

**Rhode Island**

Rhode Island Office of Higher Education  
www.ribghe.org

**South Carolina**

South Carolina Commission on Higher  
Education  
www.che.sc.gov

**South Dakota**

South Dakota Board of Regents  
www.sdbor.edu

**Tennessee**

Tennessee Higher Education Commission  
www.state.tn.us/thec

**Texas**

Texas Higher Education Coordinating  
Board  
www.thecb.state.tx.us

**Utah**

Utah State Board of Regents  
www.utahsbr.edu

**Vermont**

Vermont Student Assistance Corporation  
www.vsac.org

**Virginia**

State Council of Higher Education for  
Virginia  
www.schev.edu

**Washington**

Washington State Higher Education  
Coordinating Board  
www.hecb.wa.gov

**West Virginia**

West Virginia Higher Education Policy  
Commission  
www.hepc.wvnet.edu

**Wisconsin**

Wisconsin Higher Educational Aids  
Board  
http://heab.state.wi.us

**Wyoming**

Wyoming Community College  
Commission  
www.commission.wcc.edu

**TERRITORIES****American Samoa**

www.ascc.as

**Commonwealth of the Northern****Mariana Islands**

www.nmcnet.edu

**Puerto Rico**

Puerto Rico Council on Higher  
Education  
www.ces.gobierno.pr

**Republic of the Marshall Islands**

Scholarship Grant and Loan Board  
(Republic of the Marshall Islands)  
www.rmischolarship.net

**Virgin Islands**

Virgin Islands Board of Education  
www.doe.vi/

## South Korea Begins Work on Establishing an Addiction Services Profession

### Professionals Assess Need, Culture and Standards

*Ilkyung Joo, PhD*

“We work to ensure that people with addiction disorder have access and receive the highest quality care.” This paraphrases the NAADAC Vision. Even though this is a challenging vision, South Korea’s addiction professionals are using this sentiment as an inspiration for the development of their profession.

Up to now, Korean society has been more keenly focused how to put those with addictions in jail or to detecting drugs being smuggled into the country. South Korea has implemented drug policy based on controlling drug supplies rather than controlling demand. The provision of human services for people with addictions has been totally neglected.

Korea NAADAC (KNAADAC) was established with the assistance of NAADAC in November 2006. This was the first step in establishing a global organization of addiction focused professionals who can enhance the health and recovery of individuals, families and communities. NAADAC’s Executive Director, Cynthia Moreno Tuohy visited Korea at the invitation of the Department of Substance Dependent Rehabilitation of Wonkang Digital University. This was a dramatic event in Korean addiction field.

#### **An Overview of the Korean Addiction Services Profession**

The number of people addicted to substances such as methamphetamine, marijuana and other psychoactive drugs is expanding day by day in Korea. Each year, more than 8,000 people face legal prosecution for possession or use of drugs in Korea. Since law enforcement services cannot catch everyone, the actual number of this population is estimated by be up to 40 to 50 times to this figure.

South Korean society delivers ambivalent message to those who use drugs; the law is harsh and punitive. Once people are caught, they are

criminalized and are locked up without access to appropriate treatment programs. The corrections system does not provide any treatment or rehabilitation program during their time in custody.

South Koreans often have misperceptions of those who use drugs, generally associating drug use with well-known entertainers and celebrities whose occasional prosecutions for drugs are highlighted by the media. This cultivates the notion that addiction only impacts on a small population, whereas the prevalence of drug addiction impacts the whole population, irrespective of their social status, income or gender.

There are no concrete statistics that indicate the prevalence of drug dependence and abuse in the population. Most services for those with drug addictions are provided by government run mental health hospitals. However, there are very few hospitals that serve this population. There are only a few community based programs for addiction in South Korea.

#### **The Impact of Alcohol**

Another component of the misunderstanding is South Korean society’s tolerance of alcohol use and abuse. Alcohol is perceived as a crucial tool to encourage a social relationship in the workplace and all other social life. An event such as a marriage, a promotion or loss of a job, or bereavement is heavily related to drinking culture. Alcohol accompanies these events without fail. Furthermore, Korean society’s attitude on alcohol is idiosyncratic. Most South Korean adults are preoccupied with the notion that he or she must drink to some extent, or they would face sanctions from their social or work groups. Alcohol is universally accessible and it is very difficult to differentiate between alcohol use (social drinking) and alcohol abuse.

The statistics of Ministry of Health and Welfare (2000) indicate a rapid increase in the number of male adults (20 years or older) who are drinking alcohol. From 1992 to 2000, government figures indicated that drinking increased from 57.9 percent to 68.4 percent of the population.

In breakdown of males and females, the statistics show that 83.3 percent of male adults and 54.8 percent of female adults were using alcohol in 2000. Based on this figure, it is evident that most Korean adults are, willingly or unwillingly, under the influence of alcohol.

This is perpetuated by the perspectives of society and law enforcement. South Korean society endorses the notion that they must be flexible and tolerant about any errors or absenteeism on the job due to alcohol consumption. Even though this situation is serious, the government is not actively intervening on this issue. Accordingly, there are not enough resources for preventing or treating alcoholism.

#### **A Lack of Services**

Currently there are no professional standards for providing services for those with addictions. These services are provided by psychiatrists, mental-health nurses and social workers. The quality of service can be very poor because these people are not trained in addiction issues and lack historic or academic theory. As a result, South Korean professionals need all the resources and information they can obtain from western nations. The information and literature needs to be assessed and reviewed to ensure it is compatible with South Korean culture. After importing the knowledge, experienced addiction services professionals need to be trained.

**South Korea, continued on page 17**

# National Addiction Professionals' Day

September 20, 2007

*Pam R. Frazier, NCAC II, CSADC, MISA II, NCRS*

This year, National Addiction Professionals' Day will be held on September 20, during National Recovery Month. Now is the best time to plan, to ensure the important role of addiction services professionals is recognized. Without the powerful work of addiction counselors there is no addiction profession.

On June 11, 1992, NAADAC held its first Addiction Professionals' Day, originally called National Alcoholism and Drug Abuse Counselors Day. The day was established to commemorate the hard work addiction services professionals do on a daily basis. In 2005, NAADAC's Executive Committee made September 20 the permanent date for celebrating Addiction Professionals' Day.

Please take the time to get as many people in your community involved as possible. Contact your mayor and ask that they declare September 20, 2007, as "Addiction Professionals' Day." Contact your state legislators and ask them to pass a proclamation that recognizes the work that the alcohol and other drug abuse counselors do.

We always hear that there is no money for increases in salaries to keep

up with the cost of living! But I can't think of any good reason that we can't recognize our employees on this special day for all their good work.

It could be as simple as:

- Having the mayor of your city declare September 20th as "Addiction Professionals' Day" and have the proclamation published.
- Writing a letter talking about the important work that the prevention, intervention, treatment and aftercare staffs do at your agency.
- Hosting a lunch for your staff to show appreciation for all the hard work they do and recognize how important they are to the community.
- Posting a banner in the reception area acknowledging this important day.
- Or even something as simple as a thank you card from the director of your agency to all the staff.

It is never too early to work to ensure addiction services professionals get the recognition of how important they are to those seeking help. Remember, without the powerful work



## Join NAADAC for its 2007 Open House

Plan to visit the NAADAC national office in September as a part of the national celebration of Addiction Counselors' Day. NAADAC's office serves 11,000 addiction counselors throughout the United States and the world.

### NAADAC Open House

September 20, 2007, 11am to 2pm  
1001 N. Fairfax St., Ste. 201  
Alexandria, VA 22314

For more information, call 800.548.0497, or send an e-mail to [naadac@naadac.org](mailto:naadac@naadac.org) (Please put "Open House" in the subject line) or visit [www.naadac.org](http://www.naadac.org).

of addiction counselors, there is no addiction profession.

*To receive the **Addiction Professionals' Day Toolkit**, or if you'd like to share ideas for possible events on **Addiction Professionals' Day**, please contact Donovan Kuehn at [dkuehn@naadac.org](mailto:dkuehn@naadac.org). Please put "AP Day" in the subject line of the e-mail.*

## South Korea, continued from page 16

### KNAADAC's View on Addiction

The disease model requires us to view addiction as primary illness that cannot be cured, only arrested. The disease model requires assessing addiction to alcohol and drugs much as one views other chronic illnesses, such as heart disease or diabetes. This means viewing this condition as a physiological illness with an emotional, a behavioral and a conditioned response components as a secondary sign or symptom of some underlying mental disorder (Flores, 1997).

We agree with this sentiment and want to expand this notion to all levels of South Korean society. Addiction professionals and the public must have no doubt on this principle and be ready to help people with addiction disorders recover from their illness.

Right now, our power and resources are minimal. But as pioneers, KNAADAC aims to complete NAADAC's mission in Korea: "to lead, unify and empower addiction focused professional to achieve excellence through education, advocacy, knowledge, standards of practice, ethics, professional development and research."



*Dr. Ilkyung Joo is a professor in the Department of Substance Dependent Rehabilitation at Wonkwang Digital University in Seoul, South Korea.*



**NAADAC**  
 THE ASSOCIATION FOR  
 ADDICTION PROFESSIONALS  
[www.naadac.org](http://www.naadac.org)

“Earning the title of ‘professional’ carries responsibilities as well as privileges. As a member of NAADAC, I have enjoyed both. The responsibilities include keeping current with issues about the profession through my national organization. Membership allows me to have a voice when decisions are made about my career, my profession and my legal and ethical responsibilities. NAADAC is the ONLY organization representing the addiction profession at the table in Washington, DC. Let it be your voice as well as mine. Join today.”

—Sharon Morgillo Freeman, PhD, APRN-CS, NAADAC President

## NAADAC NEW MEMBER APPLICATION

**YES**, I want to join my colleagues as a member of NAADAC. I understand that by joining I will also become a member of the NAADAC affiliate in my state or region.

MS.  MR.  DR. NAME \_\_\_\_\_

HOME OR  WORK ADDRESS (Provide your preferred address for all NAADAC mailings) \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ ZIP/POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

WORK PHONE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

EMAIL (Required to receive NAADAC's bi-monthly newsletter, NAADAC News.) \_\_\_\_\_ FAX \_\_\_\_\_

**YES**, sign me up for the e-LAN (e-mail Legislative Alert Network; an e-mail address is required).

**NOTE:** From whom and where did you hear about NAADAC \_\_\_\_\_

### MAIL YOUR APPLICATION WITH CHECK TO:

NAADAC  
 901 N. Washington Street, Suite 600  
 Alexandria, VA 22314-1535

### FAX YOUR APPLICATION WITH CREDIT CARD INFORMATION TO:

800/377-1136 or 703/741-7698

### FEE COMPUTATION

**Membership** (see below for your state's fee) \_\_\_\_\_

**Donation to the NAADAC Education and Research Foundation** (tax deductible) *The NAADAC Education and Research Foundation (NERF) is a registered 501(c)3, non-profit organization focusing on the promotion of education and research for the addiction services.* \_\_\_\_\_

**Donation to the NAADAC Political Action Committee (PAC)\*\*** *The NAADAC Political Action Committee (PAC) helps educate lawmakers to understand the priorities of addiction services professionals.* \_\_\_\_\_

- \$300 – President's Alliance Member  \$200 – Champion  
 \$100 – Leader  \$50 – NAADAC Advocate  
 \$\_\_\_\_\_ Other

**Donation to the NAADAC Building Campaign** \_\_\_\_\_

(tax deductible)

- \$500 – President's Club  \$200 – Executive Club  
 \$100 – Director's Club  \$75 – Patron  
 \$50 – Sponsor  \$\_\_\_\_\_ Other

**TOTAL AMOUNT ENCLOSED** \_\_\_\_\_

### PAYMENT INFORMATION

Check (payable to NAADAC) in the amount(s) of \$ \_\_\_\_\_ enclosed.

\*\*If you are paying NAADAC dues by company check, you must enclose a SEPARATE PERSONAL check, made payable to NAADAC PAC. Contributions to the NAADAC PAC are optional and are not tax deductible.

Please charge \$ \_\_\_\_\_ to my  Visa  MasterCard  American Express

ACCOUNT NUMBER \_\_\_\_\_

EXP. DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

State	Professional	Full Associate	Partial Associate	*Student	State	Professional	Full Associate	Partial Associate	*Student	State	Professional	Full Associate	Partial Associate	*Student
Alabama	\$110	\$89	\$73	\$57.50	Louisiana	\$85	\$64	\$48	\$42.50	Oklahoma	\$85	\$64	\$48	\$42.50
Alaska	\$120	\$99	\$83	\$67.50	Maine	\$115	\$94	\$78	\$50.00	Oregon	\$120	\$99	\$83	\$67.50
Arizona	\$120	\$99	\$83	\$47.50	Maryland	\$125	\$104	\$88	\$62.50	Pennsylvania	\$110	\$89	\$73	\$57.50
Arkansas	\$85	\$64	\$48	\$42.50	Massachusetts	\$130	\$109	\$93	\$54.50	Rhode Island	\$125	\$104	\$88	\$57.50
California	\$185	N/A	\$148	N/A	Michigan	\$140	\$119	\$103	\$60.50	South Carolina	\$120	\$99	\$83	\$52.50
Colorado	\$135	\$114	\$98	\$57.50	Minnesota	\$85	\$64	\$48	\$42.50	South Dakota	\$110	\$89	\$73	\$52.50
Connecticut	\$135	\$114	\$98	\$57.50	Mississippi	\$130	\$109	\$93	\$65.00	Tennessee	\$105	\$84	\$68	\$42.50
Delaware	\$95	\$74	\$58	\$50.00	Missouri	\$105	\$84	\$68	\$40.00	Texas	\$145	\$124	\$108	\$62.50
Dist. of Columbia	\$135	\$114	\$98	\$57.50	Montana	\$115	\$94	\$78	\$47.50	Utah	\$130	\$109	\$93	\$57.50
Florida	\$135	\$114	\$98	\$57.50	Nebraska	\$117	\$96	\$80	\$54.50	Vermont	\$135	\$114	\$98	\$62.50
Georgia	\$145	\$124	\$108	\$62.50	Nevada	\$115	\$94	\$78	\$55.00	Virginia	\$135	\$114	\$98	\$52.50
Hawaii	\$105	\$84	\$68	\$42.50	New Hampshire	\$115	\$94	\$78	\$47.50	Washington	\$125	\$104	\$88	\$42.50
Idaho	\$110	\$89	\$73	\$42.50	New Jersey	\$135	\$114	\$98	\$52.50	West Virginia	\$120	\$99	\$83	\$50.00
Illinois	\$115	\$94	\$78	\$47.50	New Mexico	\$115	\$94	\$78	\$47.50	Wisconsin	\$125	\$104	\$88	\$42.50
Indiana	\$135	\$114	\$98	\$67.50	New York	\$145	\$124	\$108	\$62.50	Wyoming	\$85	\$64	\$48	\$42.50
Iowa	\$115	\$94	\$78	\$47.50	North Carolina	\$120	\$99	\$83	\$49.50	International	\$100	N/A	N/A	N/A
Kansas	\$180	\$159	\$143	\$90.00	North Dakota	\$115	\$94	\$78	\$52.50					
Kentucky	\$110	\$89	\$73	\$47.50	Ohio	\$120	\$99	\$83	\$57.50					

\*Proof of status MUST accompany application  
 NAADAC dues are subject to change.

6/07

NOTE: \$6 of your membership dues have been allocated to the magazine and this amount is non-deductible. NAADAC estimates that 8% of dues payment is not deductible as a business expense because of NAADAC's lobbying activities on behalf of members. Dual membership required in NAADAC and state affiliate. You will receive services upon receipt of application and payment; please allow 4-6 weeks for initial receipt of publications. Membership in NAADAC is not refundable. From time to time, we share our members' postal addresses with other companies who provide services that we feel are a benefit to the addiction professional. We carefully screen these companies and their offers to ensure that they are appropriate and useful for you. NN06/07

**JOIN ONLINE AT [WWW.NAADAC.ORG](http://WWW.NAADAC.ORG)**



## Addiction and Redemption Finding Insights into Your Clients' Solutions

*Christopher Jackson, NCACV I, CAC I, DOT SAP*

In the '60s, there was an el cheapo paperback which, seeking to be funny, started out thusly: "Bang! Bang! Bang! Three bullets ripped into my gut, and I was off on the ride of my life."

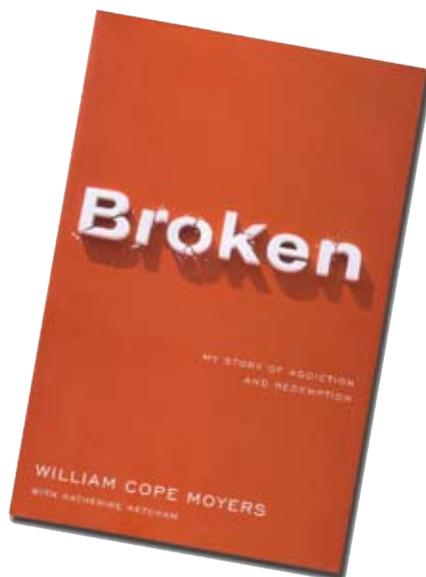
Cope Moyers starts by ripping his first three sentences into your gut: "We want the white guy, just the white guy. We know he's in there. He comes out and there's no trouble." And you're off on the ride of your life. This author seeks not to entertain you, but to sear you, ravage you, elate you. Boy, does he succeed.

This story is not for the clinically squeamish, but it is a "must read" for the NAADAC member who believes a client will profit from the more she or he knows first-hand about addiction and recovery.

And Cope Moyers takes you on a first-hand journey, a riveting horror tale of successive tortures more severe than any Torquemada dished out, with an extensive finishing coda of ongoing epiphany more elysian than anything St. Paul ever experienced. (You'll have to read the book to catch the inside joke, and decide for yourself if the celestial response on p. 300 is a cosmic double-entendre.)

You're with Cope as he starts his boyhood in Wilmer, Tex., where the seeds of his self-doubt are sown; through his teen years, and the start of his being at once corrosively enabled and daunted by a too-caring and too-famous father; through success after success, binge after binge, rehab after rehab, recovery after recovery. And when he comes to truly believe a-drug-is-a-drug-is-a-drug. If you're like me, you won't be able to put this book down, or read it only once.

About now you're thinking: "Yeah. Yeah. Sounds like just one more media-hyped substance-a-logue by some slickster wannabe shrinkoid, cashing in on his dad's fame. So he swilled a tad much, did a surfeit of weed, made the jump from



blow to crack. Big deal. So what. What's in it for me? How will it help me with my clients?"

Like they say in N/AA, "Guard against contempt prior to investigation." "You ain't seen nothin' yet." "Beyond your wildest dreams." "Wait for the miracle."

---

*In Cope Moyers's ultimate solution to his clinical problem, you'll find some insights into your clients' solutions.*

---

What's in it for you as an addiction services professional? You'll see your client's disease more clearly, and come to better understand your own awesome abilities (and limitations) to deliver treatment.

If you're of the persuasion—widely held in our profession—that you can't and shouldn't even try to detox an addict from cocaine, it is important you read p. 235. Or if you're a recovering chemical abuser who never smoked crack,

you'll want to check in with your sponsor and double up on your meetings, before and after you read p. 101.

In Cope Moyers's ultimate solution to his clinical problem, you'll find some insights into your clients' solutions. Broken is also a great read for the spouses of substance abusers too, just as it would have been for Lois after Bill W. got sober.

But don't read this book because it will help you in your job. Read it because it's a crackling good read, and one hell of a ride!

*Christopher Jackson is a member of the South Carolina Association of Alcoholism & Drug Abuse Counselors (SCAADAC) and works for Beaufort County.*

**Broken: My Story of Addiction and Redemption**, By William Cope Moyers, with Katherine Ketcham, 372 pages. Viking Press. \$25.95.

**Save the Date!**

**Advocacy in Action!**



**Advocacy in Action Conference 2008**

March 9-11, 2008  
Washington, DC

For more information, visit  
[www.naadac.org](http://www.naadac.org)



# NAADAC News

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## 2007-2008 UPCOMING EVENTS

- |                      |   |                       |   |
|----------------------|---|-----------------------|---|
| July 15, 2007        | <p><b>NCAC I/NCAC II/MAC Application Deadline for September 8-16, 2007 Examination Period</b><br/>Details at <a href="http://www.ptcny.com">www.ptcny.com</a>.</p>  | September 20, 2007    | <p><b>Addiction Professionals' Day</b><br/>Details at <a href="http://www.naadac.org">www.naadac.org</a> or contact NAADAC at <a href="mailto:naadac@naadac.org">naadac@naadac.org</a> or 800.548.0497.</p>   |
| July 20, 2007        | <p><i>NAADAC Life-Long Learning Series</i><br/><b>Pharmacotherapy: Integrating New Tools into Practice</b><br/>Earn 6 CE Credits for \$20<br/>Kansas City, MO<br/><b>Download the registration form at <a href="http://www.naadac.org">www.naadac.org</a> or call 800.548.0497.</b></p>   | September 20, 2007    | <p><b>NAADAC Open House</b><br/>Alexandria, VA<br/>Details at <a href="http://www.naadac.org">www.naadac.org</a> or contact NAADAC at <a href="mailto:naadac@naadac.org">naadac@naadac.org</a> or 800.548.0497.</p>   |
| July 27, 2007        | <p><i>NAADAC Life-Long Learning Series</i><br/><b>Pharmacotherapy: Integrating New Tools into Practice</b><br/>Earn 6 CE Credits for \$20<br/>Seattle, WA<br/><b>Download the registration form at <a href="http://www.naadac.org">www.naadac.org</a> or call 800.548.0497.</b></p>   | September 23, 2007    | <p><i>NAADAC Life-Long Learning Series</i><br/><b>Pharmacotherapy: Integrating New Tools into Practice</b><br/>Earn 6 CE Credits for \$20<br/>Houston, TX<br/><b>Download the registration form at <a href="http://www.naadac.org">www.naadac.org</a> or call 800.548.0497.</b></p>                               |
| August 9-11, 2007    | <p><b>Arizona Association of Alcoholism &amp; Drug Abuse Counselors (AzAADAC)</b><br/><i>The Evolution of Addiction and Treatment</i><br/>Orange Tree Golf Resort (<a href="http://www.orangetreegolfresort.com">www.orangetreegolfresort.com</a>)<br/>10601 N. 56th St., Scottsdale, AZ<br/>Details at <a href="http://www.azaadac.org">www.azaadac.org</a> or contact <a href="mailto:azaadac@azaadac.org">azaadac@azaadac.org</a>.</p> | September 27-28, 2007 | <p><b>State of Nevada Association for Addiction Professionals (SNAAP) Annual Meeting</b><br/>Las Vegas, NV<br/>Details at <a href="http://www.snaap.net">www.snaap.net</a> or e-mail Julio Landero at <a href="mailto:j_landero@hotmail.com">j_landero@hotmail.com</a>.</p>                                       |
| September 1-30, 2007 | <p><b>Recovery Month</b><br/>Join the celebration around the nation.<br/>Details at <a href="http://www.recoverymonth.gov">www.recoverymonth.gov</a>.</p>   | October 15, 2007      | <p><b>NCAC I/NCAC II/MAC Application Deadline for December 8-15, 2007 Examination Period</b><br/>Details at <a href="http://www.ptcny.com">www.ptcny.com</a>.</p>   |
| September 5-8, 2007  | <p><b>NAADAC Annual Conference held in association with the Tennessee Association of Alcoholism &amp; Drug Abuse Counselors (TAADAC)</b><br/>Nashville, TN<br/>Details at <a href="http://www.naadac.org">www.naadac.org</a> or contact NAADAC at <a href="mailto:naadac@naadac.org">naadac@naadac.org</a> or 800.548.0497.</p>   | November 3, 2007      | <p><i>NAADAC Life-Long Learning Series</i><br/><b>Pharmacotherapy: Integrating New Tools into Practice</b><br/>Earn 6 CE Credits for \$20<br/>Oakland, CA<br/><b>Download the registration form at <a href="http://www.naadac.org">www.naadac.org</a> or call 800.548.0497.</b></p>                               |
| September 6, 2007    | <p><b>Recovery Month Kickoff Luncheon</b><br/><i>Celebrating 18 years of Recovery Month</i><br/>Washington, D.C.<br/>Details at <a href="http://www.naadac.org">www.naadac.org</a> or call 800.548.0497.</p>  | November 16, 2007     | <p><i>NAADAC Lifelong Learning Series</i><br/><b>Pharmacotherapy: Integrating New Tools into Practice</b><br/>Earn Six CE credits for \$20<br/>Albany, NY<br/><b>Download the registration form at <a href="http://www.naadac.org">www.naadac.org</a> or call 800.548.0497.</b></p>                               |
| September 6, 2007    | <p><i>NAADAC Life-Long Learning Series</i><br/><b>Pharmacotherapy: Integrating New Tools into Practice</b><br/>Earn 6 CE Credits for \$20<br/>Cape Cod Symposium on Addictive Disorders<br/>Cape Cod, MA<br/><b>Download the registration form at <a href="http://www.naadac.org">www.naadac.org</a> or call 800.548.0497.</b></p>  | December 8-15, 2007   | <p><b>NCAC I/NCAC II/MAC Exam</b><br/>The Professional Testing Corporation (PTC) provides NAADAC approved certification testing.<br/>Details at <a href="http://www.ptcny.com">www.ptcny.com</a>.</p>   |
| September 8-16, 2007 | <p><b>NCAC I/NCAC II/MAC Exam</b><br/>The Professional Testing Corporation (PTC) provides NAADAC approved certification testing.<br/>Details at <a href="http://www.ptcny.com">www.ptcny.com</a>.</p>   | August 28-31, 2008    | <p><b>NAADAC Annual Conference held in association with the Kansas Association of Addiction Professionals (KAAP)</b><br/>Overland Park, KS<br/>Details at <a href="http://www.naadac.org">www.naadac.org</a> or contact NAADAC at <a href="mailto:naadac@naadac.org">naadac@naadac.org</a> or 1-800-548-0497.</p> |

Have an event we should know about?  
Contact 800.548.0497, ext. 125 or e-mail [dkuehn@naadac.org](mailto:dkuehn@naadac.org).