Attracting Young Professionals
page 6
Powerful Partnerships

I was fortunate enough to be a part of the NAADAC staff who worked at the recent conference in Salt Lake City. It was a pleasure to have the opportunity to meet so many committed professionals. It also highlighted for me that the key to success in this profession is...

On that note, NAADAC and Hazelden have partnered to develop a new co-occurring disorders skilled-based training program that will launch in February at SECAD 2010 in Nashville, Tenn. The program, entitled Integrating Treatment for Co-Ocurring Disorders: An Introduction to What Every Addiction Counselor Needs to Know, will help addiction professionals improve their ability to assist clients who have co-occurring disorders.

This program will help professionals work within their scope of practice while discussing the challenges related to mental illness treatment; commonly encountered mental disorders; and applicable screening and assessment instruments. Integrating Treatment for Co-Occurring Disorders will also introduce the integrated model of mental health and addiction treatment services, outlining how to utilize current substance abuse treatment best practices when working with this population. As budgets are squeezed, addiction and mental health professionals will continue to gather in closer and closer teams, and this resource will help professionals navigate those challenges.

To register for this continuing education opportunity, please visit www.naadt.org/secad.

If you’d like to read more about the NAADAC Sowing the Seeds of Recovery conference, please turn to pages 8 to 11. Thanks for reading!

Donovan Kuehn
NAADAC News Editor

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Contributors to this issue: Patricia M. Green, Donna Croy, Gina Sulsick, Leah Widmer, NAPPA Press Office and Donovan Kuehn

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October/November 2009, Volume 19, Number 4

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Great News for NAADAC!
NAADAC Sows the Seeds of Success

Patricia M. Greer, BA, LCDC, AAC, NAADAC President

Due to the commitment of a core of dedicated volunteers, NAADAC’s staff and the good will of allies in our profession, we experienced the best annual conference EVER in Salt Lake City’s beautiful Grand America Hotel. With the support of many diverse groups, the exhibitors and sponsors, members in Utah and the state government officials, a terrific example of synergy developed. The opportunity for future professional education events for addiction focused professionals has never seemed brighter.

The 2009 NAADAC Convention, “Sowing the Seeds of Recovery” took place in August, and held the distinction of “most successful” regarding number of registrants in our history. Thank you to our Utah affiliate not only for the invitation, but also for the wonderful hospitality, inspirational scenery and the thoughtful and considerate attention to all the attendees who joined us there. Over 900 people took the time to travel to Utah’s meeting, and it was by far the most diverse and challenging meeting in our history. We were honored to be joined by the staff of the ADAPT program, which is operated by the United States Air Force, for addressing the needs of their personnel and families. The Center for Substance Abuse Treatment (CSAT), the Center for Substance Abuse Prevention (CSAP) and the Substance Abuse Mental Health Services Administration (SAMHSA) staffs were present. NALGAP also joined the event, and the Addiction Technology Transfer Centers (ATTCs) were also onsite. Additionally, the state of Utah dedicated funds for scholarships for 300 attendees, a creative and efficient use of training dollars. The theme was a great reminder that sowing seeds is what we do best.

We plant the seeds of hope for individuals and families who desperately seek help. We all acknowledge that it is the rare client who “gets” recovery on the first pass, that it is the rare family that integrates healthy boundaries immediately, and the rare community offering a continuum of services to address the need that exists. Since “rare” is the current status of first time successful outcomes, the need for knowledge of available support services and interventions defines our work, as well as our own perception of success. We train our professionals on therapeutic intervention techniques, case management, neurological transport information, behavioral management approaches, self help programs and the role of spirituality. What we need to add to the repertoire is the means to measure and proclaim the meaning of recovery. As this September celebrated Recovery for the 20th year, funding for continued Recovery for the 20th year, funding for continuing to do so was in jeopardy.

We must celebrate recovery, recovering individuals, the families who have survived an addiction process, and the professionals who guide their way. We need to harvest some of the seeds that have been planted along the way and turn them into sustenance for the next generation of professionals and clients. Emerging from anonymity into public recovery is a choice that only the dependent person can make. But, armed with support, and a network of peers and friends and professionals, the banner of Recovery could take its place alongside breast cancer, MS, Lou Gehrig’s (ALS) disease, diabetes and all the other disease “causes.” Armed with information about recovery, our clients and their families and friends would have recovery fun runs, golf tournaments, parade floats and unique holiday ornaments. We just have to step up and claim our place in America’s consciousness: Recovery is an option, Recovery is a choice, Recovery is measurable, Recovery = Happy, Joyous and Free.

Addiction and abuse are what frustrate our nation’s people, not Recovery. So I challenge each person reading this to keep planting seeds, but remember to harvest. Store the good memories for future use, and sustain the hope that will eventually be the standard for all of us, instead of the despair that plagues the process of getting funding and the stigma that behavior under the influence brings to those in need of treatment. As we celebrate Addiction Professionals Day, I ask that you focus on our future. It is positively empowering if we join with all of our allies and friends. Have a happy day!

Patricia M. Greer serves as the President of NAADAC, the Association for Addiction Professionals. To contact her directly, please e-mail pmgreer@sbcglobal.net.

www.naadac.org
The National Conference on Addiction Disorders will be the first conference of its kind, to provide an opportunity for addiction professionals from around the country to collaborate, exchange ideas, and network with their peers.

With over 60 sessions ranging from addiction and counselor specific topics to administrative, technology, and infrastructure programs, this conference will tackle the most critical issues in treatment programs and facilities.

Join the most influential organizations in the addiction field, and learn about cutting-edge treatment facilities, programs, and best-practices. So, mark your calendar and don’t miss this industry-changing event!

This meeting replaces the NAADAC Annual Conference.

www.NCAD10.com will be coming soon!
NAADAC organizational memberships are available to organizations, corporations and agencies that support or specialize in addiction treatment or prevention. Have you considered joining, but wanted to find out more?

Joining NAADAC as an organizational member helps demonstrate your commitment to quality standards and leadership in the field of addiction treatment. NAADAC is the largest national organization dedicated to the professional growth, legislative priorities and community visibility of individuals and organizations specializing in the treatment and prevention of addiction.

For more information on the NAADAC Organizational Membership program, please visit www.naadac.org or email NAADAC at naadac@naadac.org or call 800.548.0497.

### Joining NAADAC benefits your organization in other ways:

**• Membership Increases the Visibility of Your Organization**

NAADAC membership increases your organization’s exposure to NAADAC individual members and the thousands of additional addiction and related professionals who turn to NAADAC for news, information, education, training and conferences.

Organizational members are listed in NAADAC’s official magazine, *Addiction Professional*, which is published bimonthly.

Organizational members receive a free listing on the NAADAC website, including a link to their website where available, so that everyone visiting naadac.org has immediate and convenient access to the organization. NAADAC’s website received over 400,000 distinct visitors in 2008.

**• NAADAC Recognizes Your Contribution and Value**

Organizational members receive a plaque, which can be prominently displayed to publicize membership in NAADAC.

Organizational members have representation on the NAADAC Board of Directors through a delegate elected by you and your peers.

**• NAADAC Provides Organizational Members With Reduced Rates on Products and Services**

Organizational members receive one complimentary conference registration every two years (NAADAC Annual or Advocacy in Action conference).

Organizational members receive a 30 percent discount on the NAADAC Approved Education Provider Program.

Organizational members receive a free career ad on the NAADAC website.

**• NAADAC Helps Organizational Members Keep up-to-date on Today’s Crucial Topics**

NAADAC organizational members receive NAADAC’s official magazine and newsletter. *Addiction Professional*, the official magazine of NAADAC, is published bimonthly and covers a wide variety of clinical and programmatic issues affecting the addiction treatment profession. NAADAC member copies of *Addiction Professional* include an exclusive eight-page section devoted to NAADAC. A year subscription is valued at $67.

*NAADAC News*, the association’s bimonthly publication, features articles and information on NAADAC and affiliate events; updates on certification and public policy; and contributions by federal agencies and organizations of interest to addiction professionals.

Organizational members receive select NAADAC mailings and announcements.
A popular—and ever worrisome—topic of debate for addiction professionals and their agencies is the “graying” of the workforce. The average age of addiction professionals is approaching 50 and rising, and it appears that there aren’t enough young people entering the profession to take their places as they retire. Fortunately, there are concrete steps that agencies and administrators can take to draw young professionals into their programs.

As a young professional who recently finished my coursework in addictions counseling and am now beginning a master’s program in social work, I can speak for some of the young professionals in the addictions field, and give my views of what could work for recruitment purposes. A few of these I take from the social work field. I do this for two reasons. One reason is that social work has a strong record of recruiting young professionals despite its relatively low average salary (even after obtaining a Master’s degree) and often stressful working conditions (a situation not unlike addictions counseling). The other reason is that social work is so connected to addiction treatment (and in fact, at some schools, you can concentrate on substance abuse and addiction as an area of expertise).

A good first step towards recruiting young professionals is to partner with local colleges or universities as an internship site for students in different human service fields. Internships are a valuable part of the scholastic experience and provide the kind of information that textbooks and lectures cannot. It is often beneficial for programs to become internship sites for students with focuses other than addiction treatment. This may seem counter-intuitive, but the reality is that addiction treatment is closely related to many social service fields. For example, a psychology intern or social work intern could easily do an internship at a treatment agency or facility and not only gain an interest in addictions, but also provide new insight to the hosting agency.

It is critical for a person debating what kind of career path they want to follow to gain an “inside look” at the profession. Without this, how will the student know what is “hype” and what is not? Internships will also give the student a taste of what kind of stressors they would have to deal with and the kind of work they have to do. It takes an investment of time and energy on the part of the program site to ensure that the interns have a substantive, positive experience (strong supervision is particularly important), but it will pay off many times over if you have a constant stream of energetic, enthusiastic interns (and potential future employees) rotating through your program.

Another approach to internships is recruiting and hiring people to work in your agency who have completed classroom hours but have not yet become certified or licensed. These opportunities provide a means to allow participants to finish their licensure or certification practicum while working for the agency. This allows young staff members who have the knowledge base to work in the profession, and they get to finish their certification without worrying about finances (a barrier to finishing school for many students). In order to increase retention, a condition of allowing this could be working for a set

“Many students do not know about opportunities at substance use treatment agencies”
A key to recruitment is participating in career fairs. Many students do not know about the existence of hiring opportunities at substance use treatment agencies in their area. Many universities and colleges have career fairs which are an opportunity for both employers and potential employees to meet each other, share information and ask questions. These career fairs are usually coordinated through a career services office but can also be department specific (for example, a social work-specific career fair). A quick call to your local college career center can inform you of what’s required to participate in an upcoming fair. It’s also often helpful to contact the career center because the career advisors there may not be informed about the professional (or internship) opportunities for their students in addictions.

A fourth suggestion for getting young people into the profession is by updating the way positions are advertised. Many students and recent graduates don’t look in the newspaper for jobs anymore. We are an online generation who would prefer to look at craigslist.org, monster.com, naadac.org or the local newspaper website to hear about job openings. Don’t write off these options as recruiting tools! In some cases, online job postings are free, which can save an agency money compared to running a print ad. Internships can also generally be posted online for free on colleges’ career center websites.

I am not going to discuss the issue of low pay in this article. Nobody in human services fields goes into it for the money. While I agree that addictions counselors are paid a low salary compared to other jobs, their pay is not significantly lower than those in other human service fields in comparable positions. The pay rate should not be a deterrent for a recent college graduate, as any of these students who are interested in any human service work have to accept a relatively low salary as part of the field. Professionals holding entry-level masters degrees in Social Work in the Washington, D.C., area can expect to earn around $50,000 annually on average, which is not much when you compare how much graduate school can cost.

The next problem in recruiting young professionals stems from the “in recovery or not” issue that arises for all addiction professionals. That is, many college students who are interested in helping those with substance use disorders are not necessarily recovering themselves. This issue raises the question of how well a non-recovering professional can relate to the client. This is a logical issue but not necessarily one that should prevent someone from entering the profession. While it can be helpful to have the same experiences as your clients, you have to (again) compare it to other fields. A psychiatrist can treat those with schizophrenia, even though he or she has not had schizophrenia. A social worker can help abused women find needed resources, even though he or she has never been abused. It is the same with addiction. In some ways, the counselor not in recovery can avoid a common problem with the clients, which is allowing them to get caught up in the counselor’s history and recovery rather than their own.

People are naturally always curious with others, which leads the recovering professional to run the risk of getting entangled in their own experience and not the client’s. That is not to say that one should merely be a textbook of resources and have no connection with the clients, but through working with clients one can learn about their experiences, recovering or not. Many students and even the hiring agency cannot see the positive side of not being in recovery, and this in turn limits the recruitment of young professionals.

Ultimately, the recruitment of young professionals is an attainable goal for the addiction profession. It requires a bit of legwork and creativity in its implementation but with some effort it can become a natural part of the hiring process. It can also lead to a group of well-educated, resourceful professionals who are up to date on current trends in the field and who can help update aspects of the organization. Addiction treatment agencies deserve—and can successfully recruit—a young, competent workforce.

Gina Suslick served as the NAADAC Government Relations intern in the summer of 2009. She is now enrolled in a master’s program in social work at Virginia Commonwealth University.
NAADAC Announces Award Winners
2009 Recipients Share Commitment in Giving to the Addiction Profession

Leah Withers, NAADAC Intern and Donovan Kuehn, NAADAC News Editor

Passion, vision and commitment links the winners of the 2009 awards selected by NAADAC, the Association for Addiction Professionals. The recipients of these awards have all excelled in their fields and exemplify the qualities held in highest regard by the addiction profession and the community. Award winners were recognized at the NAADAC Annual Conference this summer in Salt Lake City.

NAADAC bestowed the Mel Schulstad Professional of the Year; the Lora Roe Memorial Alcoholism and Drug Abuse Counselor of the Year and the NAADAC Organizational Achievement Award.

The award winners and highlights of their accomplishments are laid out below.

Mel Schulstad Professional of the Year
The Mel Schulstad Professional of the Year award was created in November 1979 and is named after the first President of NAADAC. The award recognizes an individual who has made outstanding and sustained contributions to the advancement of the addiction counseling profession.

Elizabeth Ann Coccia, EdD, LCDC, NCC and Advanced Addiction Counselor, has proven herself a diligent proponent of addiction counseling. Coccia, from Austin, Tex., is currently a professor in the Human Services Department of the Austin Community College, as well as a PRN Counselor at Seton Shool Creek Hospital’s outpatient chemical dependency program. She is also active in the Texas Association of Addiction Professionals and served as Austin TAAP Chapter President from 2001 to 2004, in which she “consistently demonstrated marvelous mediation, negotiation and organizational skills.”

“Her hard work in the trenches educating and training the new counselors coming into this field has been a sustained and invaluable contribution to the field of Chemical Dependency counseling, treatment, prevention and intervention,” said Richard A. Greene, Vice-President of the Austin Chapter of TAAP and who has worked with Mrs. Coccia for over eight years.

Lora Roe Memorial Alcoholism and Drug Abuse Counselor of the Year
This award is presented to a counselor who has made an outstanding contribution to the profession of addiction counseling.

Award winner, Neville Pottinger, LCDC, serves as a member of the Texas Certification Board of Addiction Professionals and currently works as the Clinical Services Director, responsible for coordination, implementation and supervision of the Harbor Light Center’s Veteran Affairs Program in Houston, Tex.

Described as dependable, understanding, deeply spiritual and kind, Mr. Pottinger was often praised for his ability to work long hours without complaint while maintaining his sense of humor.

NAADAC Organizational Achievement Award
Presented to organizations that have demonstrated a strong commitment to the addiction profession and particu-
larly strong support for the individual addiction professional.

The NAADAC Organizational Achievement Award was awarded to Allies in Recovery led by Dr. Dominique Simone-Levine. Allies in Recovery (AIR) is a group of researchers, psychologists and social workers with a combined experience of 75 years in the field of substance abuse. Dr. Simon-Levine started AIR to provide families of those struggling with substance abuse the means to end addiction in their family. AIR does this through phone coaching, group trainings and consultation.

In its five years, AIR has served over 150 Massachusetts families in person and by phone. AIR works to change the conversation about addiction by creating an informed family that can interact strategically and make educated choices to end substance abuse. Their goal with clients is threefold: 1) to reduce the harm that addiction is causing in the household; 2) to un-block the situation and get a loved one into appropriate treatment; and 3) to reduce the stress and worry that accompanies addiction.

Dr. David G. Scherer, Professor of Psychology at the University of Massachusetts Amherst, spoke glowingly of the award winner: “Under the competent and dynamic leadership of Dr. Simon-Levine, Allies in Recovery has matured into a premier training and service provider and is an organization that deserves recognition.”

NAADAC President’s Awards

NAADAC also awarded three President’s Awards, recognizing Debbie Field, the administrator of the Idaho’s Office of Drug Policy; Dr. David Powell, world renowned researcher and trainer; and posthumously honored Father Joseph C. Martin, S.S.

Debbie Field, administrator of the Governor’s Office of Drug Policy in Idaho, was recognized for her work in substance abuse treatment and prevention. As the first administrator of the Office of Drug Policy, created by Governor C.L. “Butch” Otter in

2007, Field has led a broad-based groups of public and private organizations as chair of the Interagency Committee on Substance Abuse. Its five-year strategic plan is available online at http://bit.ly/ICSAPlan.

“It was an honor to accept the award on behalf of Idaho’s collaborative multi-jurisdictional partners,” Field said. “It is unique in the nation for state agencies, courts and public/private partners to work collectively to achieve better outcomes. The 2009 NAADAC President’s Award acknowledged that effort.”

David Powell, PhD, LADAC, is a licensed alcohol and drug abuse counselor, certified clinical supervisor (in two disciplines) and licensed marriage and family therapist. He was a finalist as Entrepreneur of the Year for Ernst and Young and Inc. Magazine in 1992. He holds four masters degrees and a doctoral degree in psychology, counseling, medical ethics and Islamic studies. He has post-graduate education at Harvard University as a resident graduate, New York University in the School of Public Health, the Masters and Johnson Institute in sex therapy and the Shalem Institute for Spiritual Formation.

NAADAC also celebrated the contribution of Father Joseph C. Martin’s, S.S., in addiction treatment and education. In 1984, Father Martin co-founded a treatment center, Father Martin’s Ashley, that has provided treatment to more than 32,000 clients and continues to offer dignified inpatient treatment. After he passed away in March 2009, letters and messages came from hundreds of Father Martin’s former patients, professional colleagues and many people who only knew him from his videos.

NAADAC President Patricia Greer, BA, LCDC, AAC, said, “There are few in this profession that had the gifts that he had to teach, the humility not to confuse his abilities with entitled demands, and the grace to make time for all who sought his advice. He was one in a million, and my effusiveness comes from gratitude. As a young counselor, he made me feel welcome in a profession that was dominated by ‘recovering’ people.”

How Can I Recognize Someone for Their Contributions?

A full listing of the NAADAC awards is available at www.naadac.org > About NAADAC > Recognition & Awards

2010 Award Deadline: April 30
Partnerships Create Salt Lake City Success
Almost 1,000 Come to Sowing the Seeds of Recovery Conference

Donovan Kuehn, NAADAC News Editor

Participants from all over the nation gathered in Salt Lake City for NAADAC’s 2009 Sowing the Seeds of Recovery conference. The gathering, one of the largest in NAADAC’s history, was a collaborative effort of the Utah State Division of Substance Abuse and Mental Health, the Association of Utah Substance Abuse Professionals (AUSAP), the Mountain West Addiction Technology Transfer Center and NALGAP, The Association for Lesbian, Gay, Bisexual, Transgender Addiction Professionals and Their Allies. Members of the U.S. Air Force Alcohol and Drug Abuse Prevention and Treatment (ADAPT) program also participated in the conference.

The conference started off with a bang as members of Kids Against Drugs and Alcohol (KADA) took the stage. The group, comprised of youth ranging in ages from eight to 15, performed musical and dance numbers, while incorporating moving stories about how drugs and alcohol had impacted on their lives.

Following KADA were presentations by H. Westley Clark, MD, JD, MPH, Director of the Center for Substance Abuse Treatment and Timothy P. Condon, PhD, Deputy Director of the National Institute on Drug Abuse (NIDA). After morning workshops, conference participants were invited to a NAADAC membership celebration and carnival that featured festive food, entertainers and NAADAC leaders taking turns in a dunk tank. The session was led by Membership Chair and former NAADAC President, Roger Curtiss, LAC, NCAC II, dressed in a ringmaster’s outfit.

The afternoon session featured Author Benoit Denizet-Lewis, author of America Anonymous: Eight Addicts in Search of a Life. The day ended with the screening of Finding Hope in Recovery: Families Living with Addiction — a documentary of challenging and heartbreaking stories of families facing addictions and traveling the stages of recovery — and setback. After the screening, filmmakers Burton and Mary Buller were available for an exclusive question and answer session on the film.

Thursday featured a morning plenary with Stephanie Covington, PhD, LCSW, who spoke on Women and Addiction. The day also featured a session on Motivational Interviewing: Clinical Practice with Pharmacotherapy, facilitated by Mary R. Woods, LADC, RNC, MSHS, and Gerard (Gerry) J. Schmidt, MA, LPC, MAC, and a plenary called Rediscovering Alcoholism, Addiction & Dependence: Re-energizing Treatment and Prevention led by Carlo DiClemente, PhD. Participants then had two alternative ways to spend the evening: joining members of the NAADAC Political Action Committee (PAC) for a fundraiser featuring SLC-based singer Matt Calder or watching the Mormon Tabernacle Choir Rehearsal at Temple Square. At the PAC event, Leroy Kelly won the high profile auction for a guitar autographed by Nikki Sixx, netting $1,500 for the committee.

On Friday, Jerry Moe, Vice President and National Director of Children’s Programs at the Betty Ford Center, addressed the issue of addiction and its impact on children, after a moving introduction by Wendy Guffey describing how a parent’s addiction cost a young child her life.

At lunch, NAADAC President Patricia Greer, AAC, LCDC, presided over the President’s Award Luncheon — a time to celebrate the accomplishments of outstanding addiction professionals. (See page 8 for more details.)
Friday afternoon ended with a presentation from a local doctor, Kevin McCauley, MD, who spoke about the critical first year of recovery. Staying with the local theme, the award-winning documentary film, Happy Valley, was be screened. Written by Ron Williams, the movie was filmed on location in Utah and the screening was followed by a Q&A session with the filmmaker.

Saturday ended with a number of sessions, including ethics, trauma, Promoting Awareness of Motivational Incentives (PAMI), therapeutic court treatment programs and equine therapy. While conference attendees were earning their education credits, the NAADAC Board of Directors met and discussed the future of the association.

See additional conference photographs on page 17.

### The 2009 NAADAC Conference, by the numbers
- Location: Salt Lake City
- Total Registered Participants: 913
- Films Screened: 3
- Plenary Sessions: 6
- Seminar Sessions: 41
- Gallons of coffee drunk: hundreds

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**Don’t Miss Next Year’s Conference**

The National Conference on Addiction Disorders will be held in the Washington, D.C. area.

- September 8–11, 2010
- Hyatt Regency Crystal City • Arlington, VA

The conference has been founded and produced by Vendome Group, LLC, NAADAC, the Association for Addiction Professionals and the National Association for Addiction Treatment Providers.

This conference will include presenters from around the nation and from the Substance Abuse and Mental Health Services Administration (SAMHSA)/ Center for Substance Abuse Treatment (CSAT); the National Institute on Drug Abuse (NIDA); the White House Office of National Drug Control Policy (ONDCP) and the National Institute on Alcohol Abuse and Alcoholism (NIAAA).

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Mid-South Regional Vice President Greg Lovelidge after being dunked in the dunk tank.

Matt Calder performed at the NAADAC Political Action Committee event.
One of the major parts of President Obama’s agenda has been health care reform, an issue that has taken center stage in recent months. NAADAC has worked with the Substance Abuse and Mental Health Services Administration (SAMHSA) and other allied organizations to ensure that addiction professionals are represented in these discussions.

The following is excerpted from the report Ensuring U.S. Health Reform Includes Prevention and Treatment of Mental and Substance Use Disorders — A Framework for Discussion. For more information on health care reform, please contact Daniel Guarnera at dguarnera@naadac.org or 800.548.0497 ext. 129.

The United States is currently facing a rare and exciting opportunity: the chance to ensure that large-scale health reforms include an appropriate emphasis on addressing mental and substance use disorders through prevention, early intervention, treatment, and recovery-oriented systems of care. The burden of mental and substance use disorders, in terms of economic and social costs, has been well documented. Also well documented is the fact that treatment is effective and recovery is possible. As lawmakers seek to revamp America’s health care system, the prevention and treatment of mental and substance use disorders must play a foundational role in reforms and be given equal weight to medical care provisions.

Our Nation is in the midst of one of the greatest financial crises it has ever seen, and rising health care costs are a serious concern. Simultaneously, huge numbers of our citizens are losing their employment as the economy continues to founder, and with it their health insurance. Earlier this year, President Obama stated, “Health care reform is no longer just a moral imperative; it is a fiscal imperative. If we want to create jobs, rebuild our economy, and get our Federal budget under control, then we must address the crushing cost of health care this year.” During his campaign and since taking office, President Obama promised universal health care for all Americans during his first term.

We must reform health, not simply health care, by recognizing the importance of prevention; normalizing assessment, treatment, and services for mental and substance use disorders; and making these a key element of all health interactions. This requires full integration of prevention and treatment for health, including mental and substance use disorders together with physical health, in order to reduce fragmentation and the high costs and low outcomes that come with an uncoordinated system. It also requires an investment in training and development for a competent workforce. By making prevention, early intervention, and treatment of mental and substance use disorders a health priority, we will not only reduce costs and strain on our systems, but will also create stronger families, stronger communities and a stronger nation.

In the pages that follow, we outline the current health environment in the United States, the challenges facing the mental and substance use disorders field, and the recommendations we have compiled from stakeholders and other experts. There is no health without addressing mental and substance use disorders and it is time to give Americans the comprehensive care and support they need and deserve.

Core Consensus Principles

The Substance Abuse and Mental Health Services Administration (SAMHSA) reached out to hundreds of stakeholder and consumer groups and dozens of Nationally and internationally recognized experts in the fields of mental health and addictions to solicit insight and recommendations on the most critical issues related to mental and substance use disorders facing the American population today, with an emphasis on identifying opportunities to ensure that imminent health reform efforts include prevention and treatment for these disorders. Their thoughtful input was used as the basis to develop the set of nine Core Consensus Principles that underpin this document.
Ensuring U.S. Health Reform Includes Prevention and Treatment of Mental and Substance Use Disorders—A Framework for Discussion


Principle 2. Legislate universal coverage of health insurance with full parity.

Principle 3. Achieve improved health and long-term fiscal sustainability.

Principle 4. Eradicate fragmentation by requiring coordination and integration of care for physical, mental, and substance use conditions.

Principle 5. Provide for a full range of prevention, early intervention, treatment, and recovery services that embodies a whole-health approach.


Principle 8. Invest in the prevention, treatment, and recovery support workforce.

Principle 9. Ensure a safety net for people with the most serious and disabling mental and substance use disorders.

Source:
www.samhsa.gov/healthreform/docs/HealthReformCoreConsensusPrinciples.pdf
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, if applicable.

☐ 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.) ☐ 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

1001 N. Fairfax Street, Suite 201
Alexandria, VA 22314

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
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-focused profession. Donations to the NERF are tax deductible.

Donation to the NAADAC Political Action Committee (PAC)**
The NAADAC PAC is the only national Political Action Committee dedicated exclusively to advancing addiction treatment, prevention and research. Choose your level of commitment and receive a pin and mention in the NAADAC News.

☐ President’s Club $300 ☐ NAADAC Advocate $200
☐ Champion $200 ☐ $ ________ Other
☐ Leadership Circle $100

Donation to the NAADAC Endowment
The NAADAC Endowment is focused on special initiatives supporting addiction professionals including education, scholarships and supporting the NAADAC Building Fund. Donations to the NAADAC Endowment are tax-deductible through the NAADAC Education and Research Foundation (NERF), a registered 501(c)3 non-profit organization.

☐ $200 ☐ $100 ☐ $50 ☐ $25 ☐ $ ________ 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 ____________________________

MAIL YOUR APPLICATION WITH CREDIT CARD INFORMATION TO:

State Professional Associate *Student State Professional Associate *Student State Professional Associate *Student

Alabama $110 $89 $57.50 Maine $115 $94 $50.00 New Hampshire $115 $94 $47.50
Alabama $120 $99 $67.50 Maryland $125 $104 $62.50 Nevada $115 $94 $50.00
American Samoa $120 $99 $42.50 Massachusetts $130 $109 $55.00 New Jersey $115 $94 $52.50
Arizona $120 $99 $42.50 Michigan $140 $119 $38.50 New Mexico $115 $94 $47.50
Arkansas $85 $64 $42.50 Minnesota $115 $94 $62.50 New York $145 $124 $62.50
California $85 $64 $42.50 Mississippi $135 $114 $54.00 North Carolina $120 $99 $47.50
Colorado $135 $114 $57.50 Missouri $85 $64 $42.50 North Dakota $115 $94 $52.50
Connecticut $135 $114 $57.50 Montana $115 $94 $47.50 Ohio $120 $99 $50.00
Delaware $95 $74 $50.00 Nebraska $117 $96 $54.50 Oklahoma $120 $99 $52.50
District of Columbia $135 $114 $57.50 Nevada $115 $94 $65.00 Oregon $120 $99 $56.50
Florida $135 $114 $57.50 New Hampshire $115 $94 $47.50 Pennsylvania $135 $114 $57.50
Georgia $145 $124 $62.50 New Jersey $85 $64 $42.50 Puerto Rico $85 $64 $42.50
Hawaii $105 $84 $42.50 New Mexico $115 $94 $47.50 Rhode Island $135 $114 $57.50
Idaho $110 $99 $42.50 New York $145 $124 $62.50 Virginia $135 $114 $57.50
Illinois $115 $94 $47.50 North Carolina $120 $99 $50.00 Washington $125 $104 $42.50
Indiana $135 $114 $67.50 North Dakota $115 $94 $52.50 West Virginia $120 $99 $50.00
Iowa $85 $64 $42.50 Ohio $120 $99 $35.00 Wisconsin $125 $104 $42.50
Kansas $180 $159 $90.00 Oklahoma $85 $64 $42.50 Wyoming $110 $89 $57.50
Kentucky $110 $89 $47.50 Oregon $120 $99 $67.50 International $100 N/A N/A
Louisiana $85 $64 $42.50 Pennsylvania $85 $64 $42.50 *Proof of status MUST accompany application

NOTE: 56 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.

JOIN ONLINE AT WWW.NAADAC.ORG
Malpractice insurance for Addiction Counselors

You need it, we have it!

PREMIUM RATES FOR $1,000,000/$3,000,000 OF COVERAGE START AS LOW AS $90

If you are paying more, Then you are paying too much!

HAVE QUESTIONS? NEED ADDITIONAL INFORMATION?

Email our Mental Health Department Supervisor at mentalhealth@americanprofessional.com or visit our website at www.americanprofessional.com
Of course if you prefer to speak with someone you can always call us toll free at 1-800-421-6694

American Professional Agency, Inc.
95 Broadway, Amityville, NY 11701
www.americanprofessional.com
## West Virginia

### Have an Eye for Design? This Logo Needs HELP!

The West Virginia Association of Alcoholism & Drug Abuse Counselors need your help!

We are having a contest to add some zip to our logo!

To enter the logo design contest, please visit www.wvfallconference.com/logo.html

We will make the selection and announcement at the Fall Conference—there will be a very nice prize for the winner!

## Virginia

### Pritchard Wins Ginger Acey Award

VAADAC President Ron Pritchard won the 2009 Ginger Acey Award from VADAP, the Virginia Association of Drug Abuse Programs.

The Ginger Acey Award is presented annually to an individual for their distinguished service to the field of substance abuse as demonstrated in one or more of the following areas:

1. serving as a catalyst for positive system change and development;
2. advocacy on behalf of substance abuse services and the consumers of those services;
3. involvement in leadership positions with organizations concerned with the provision of substance abuse services;
4. scientific contributions with practical application toward the improvement of substance abuse services; and,
5. enhancing public awareness of substance abuse and the effectiveness of appropriate treatment.

## New York

### Video Library Supports Addiction Professionals

The Gene Hester film and video library is an excellent practice resource available free to OASAS providers. New videos arrive often. These are budget-conscious days. What we don’t use, we may lose.

The Gene Hester Video Library has over 1500 videos and DVDs on topics such as: addiction, treatment, prevention, recovery, re-entry, gambling, tobacco, FASD, and co-occurring disorders. The following videos are suggested to help fulfill the staff training requirements as defined by Part 822 regulations.

- You may contact the Gene Hester Video Library at (www.oasas.state.ny.us/video/index.cfm) via email to ghествivideo@oasas.state.ny.us or phone at 518.485.2074.

## National Interest

### Implementing Change in Substance Abuse Treatment Programs

Technical Assistance Publication (TAP) 31: Implementing Change in Substance Abuse Treatment Programs provides guidance on integrating evidence-based practices (EBPs) into substance abuse treatment programs. Written for substance abuse treatment administrators, managers, and supervisors, TAP 31 suggests practical and efficient approaches for introducing and implementing EBPs. It includes steps for assessing an organization’s readiness to adopt new practices, identifying priorities in adopting EBPs, evaluating progress, and sustaining change overtime. TAP 31 complements the best practices described in the CSAT’s Treatment Improvement Protocols (TIPs).

The TAP 31 is available for download at www.kap.samhsa.gov or to order your free copy of TAP 31: Implementing Change in Substance Abuse Treatment Programs, contact SAMHSA’s Health Information Network (SHIN) at www.samhsa.gov/shin or call 1.877.SAMHSA.7 (1.877.726.4727) (English and Español). Ask for publication order number (SMA) 09-4377.

### NAADAC Becomes Partner

NAADAC has also signed on as a partner for the NIATx Adopting Changes to Improve Outcomes Now (ACTION) Campaign II: Financial Strength in a Changing World.

Please alert your members to this great opportunity to join free Web presentations by behavioral health care leaders from across the country, focusing on improving services, reducing costs, and increasing revenue: https://www.niatx.net/AC2/Index.aspx.

### Affiliate and Board Resources

For recovery community organizations that wish to improve the performance of their boards of directors, Grace Concepts has developed three brief, free web seminars that focus on board development. They are available for viewing at: http://graceconcepts.com/web_seminars.html

This three-session video seminar provides an overview for those who want to be effective nonprofit board members. This is an orientation for all nonprofit board members, a good refresher for current members and a great introduction for potential members. You’ll learn questions to ask before agreeing to serve, appropriate expectations, legal duties, nonprofit and board cycles and more. The outlines of the three seminars are listed on the following page.
Get on Board: The DOs, DON’Ts and HAVE TOs of Nonprofit Board Service

Session #1 (10 minutes)
- General information about nonprofits
- Questions to ask before you say ‘yes’
- Expectations of you and the organization
- Legal duties—what you MUST do as a board member
- Homework

Session #2 (10 minutes)
- Review of Session #1
- Board responsibilities
- Organization and board cycles/stages
- Officer responsibilities

Session #3 (6 minutes)
- Review of first two sessions
- Role of the board and its members
- Things to consider

Dr. Tom Freese addresses the conference on Meth Inside Out, an educational video series that incorporates the latest research to help individuals, families and multidisciplinary treatment professionals dealing with methamphetamine-related problems.

Daniel Guarnera, NAADAC Director of Government Relations, explains the auction process at the NAADAC PAC event. Also in the photo, l, auctioneer Randy Flanigan and Ayanna Beckett Santana.

Other Special Moments from the NAADAC Annual Conference
Alcohol-related deaths among U.S. college students rose from 1,440 deaths in 1998 to 1,825 in 2005, along with increases in heavy drinking and drunk driving, according to the Journal of Studies on Alcohol and Drugs.

The special issue describes the results of a broad array of research-based programs to reduce and prevent alcohol-related problems at campuses across the country. These studies resulted from the Rapid Response to College Drinking Problems Initiative, a grant program supported by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), part of the National Institutes of Health.

“This supplement is a valuable resource that underscores the growing number of research-driven strategies that college administrators and health officials can put in place to address serious student drinking problems,” said Acting NIAAA Director Kenneth Warren, PhD.

Reviewing the magnitude of the college alcohol problem, Ralph W. Hingson, ScD, MPH, director of NIAAA’s Division of Epidemiology and Prevention Research, and colleagues analyzed data from the Centers for Disease Control and Prevention and other government sources. They found that serious problems persist, as indicated by the increase in drinking-related accidental deaths among 18- to 24-year-old students. In this population, most unintentional alcohol-related injury deaths result from traffic-related incidents. In addition, the researchers found the proportion of students who reported recent heavy episodic drinking—sometimes called binge drinking, defined as five or more alcoholic drinks on any occasion in the past 30 days—rose from roughly 42 percent to 45 percent, and the proportion who admitted to drinking and driving in the past year increased from 26.5 percent to 29 percent.

“These are tragically and unacceptably high figures that indicate an urgent need for colleges and surrounding communities to implement evidence-based prevention and counseling programs,” said Dr. Hingson. The results of NIAAA’s rapid response grants, he added, demonstrate the wide range of individual, group and community-level approaches that can influence student behavior and challenge the culture of college drinking.

Through the initiative, NIAAA scientists worked with 15 colleges facing alcohol-related crises, pairing them with five multidisciplinary teams of prevention and intervention experts. The collaboration yielded a mix of programs that showed different benefits. Examples from their findings include the following:

- James F. Schaus, MD, and colleagues at the University of Central Florida found that brief motivational interviews proved effective for high risk drinkers seen in a busy college health clinic. Compared to a control group, students who participated in two sessions reported consuming less alcohol six months later and had fewer drinking-related problems nine months later.
- Hortensia Amaro, PhD, and colleagues at Northeastern University in Boston developed a one-on-one counseling program for students with alcohol and drug policy violations. Six months later, students who received the intervention were drinking less than counterparts who had not been through the program.
- Joseph A. LaBrie and colleagues at Loyola Marymount University in Los Angeles evaluated the long-term effectiveness of a motivational-enhancement group intervention for first-year college women. Participants consumed significantly less alcohol across ten weeks of follow-up, but not at six-month follow-up, suggesting the need for booster sessions during the first year of college.
- Two separate studies developed programs in which colleges worked closely with their surrounding communities, using measures such as increased police patrols in problem neighborhoods and raising student awareness of their responsibilities as community residents. The studies found reductions in heavy drinking and a decrease in the number of off-campus incidents involving students. One study was led by Mark D. Wood, PhD, of the University of Rhode Island, and the other by Robert F. Saltz, PhD, of the Pacific Institute for Research and Evaluation, working with two universities in Washington state.
- Another study found that colleges have made online alcohol-policy information more available and accessible to students, parents, and other interested parties. This shift may reflect a greater engagement of colleges and universities in the issue of drinking on campus in general, according to lead author Vivian B. Faden, PhD, acting director of NIAAA’s Office of Science Policy and Communications. Dr. Warren noted that the rapid response grants grew out of the recommendations from the 2002 report of the NIAAA-sponsored Task Force on College Drinking. He added that NIAAA remains committed to working with academic leaders and researchers to bridge the gap from research to practice in developing evidence-based college alcohol prevention and treatment programs.

The National Institute on Alcohol Abuse and Alcoholism, part of the National Institutes of Health, is the primary U.S. agency for conducting and supporting research on the causes, consequences, prevention and treatment of alcohol abuse, alcoholism, and alcohol problems. Additional alcohol research information and publications are available at www.niaaa.nih.gov.
Help Wanted!
Selection from the NAADAC Online Career Center

For Full Listing, Please Visit www.naadac.org > Resources > Career Center

Regional Vice President – Dallas, Tex.
(posted September 15, 2009)

CARON TREATMENT CENTERS, internationally recognized for excellence in addiction treatment, is seeking the following:

Regional Vice President – Caron Texas

Caron Treatment Centers is excited to announce that we will open a new residential treatment facility just north of Dallas. The facility, known as Caron Texas, is expected to open in July 2010 and will provide primary addiction treatment to adults who may also suffer from a co-occurring disorder(s). Our Regional Vice President will lead the initiative in the Texas marketplace and be responsible for the overall direction of the strategic plan and expansion of the region. This includes marketing, public relations, fund raising and operation efforts in the region. In addition, you will oversee the clinical treatment services programs including staff and program development, evaluation, scheduling and other administrative duties that is consistent with Caron’s treatment philosophy.

This position require at least 10 years of experience in the field of chemical dependency, with combined supervisory and clinical knowledge and skills. A Master’s degree in Human Services is preferred. Bachelor’s degree in human services required, as well as a thorough understanding of 12 step philosophies and strong leadership skills.

Interested parties may email their resume and cover letter to recruiter@caron.org or fax to 610.678.8583.

Licensed Mental Health Clinician – Van Alstyne, Tex.
(posted September 9, 2009)

Enterhealth Life Recovery Center
Employee Type: Full-Time Employee
Experience: LMFT licensed therapist, Licensed LCSW or LPC
Description: Licensed Mental Health Clinician

Enterhealth is an innovative organization that treats alcohol and drug addiction as a chronic illness. As a leading alcohol and drug addiction program, Enterhealth’s Life Recovery Center is a dual diagnosis residential treatment facility dedicated to supporting the healing process of adults addicted to alcohol and drugs. Enterhealth integrates the latest medications and best-in-class, evidence-based therapies.

Currently, Enterhealth’s Life Recovery Center is looking to expand its team to include a licensed psychotherapist. A person with an LMFT license would be preferred, and individuals with an LCSW or LPC license would be considered.

Responsibilities: • Individual, family and group therapy • Treatment plan preparation with appropriate follow through • Lifecare (aftercare) and discharge planning • Preadmission assessments • Psychosocial histories and related documentation

Requirements: • Addiction and residential treatment experience preferred • LMFT license • LCSW or LPC license • Able to work flexible hours, including some weekends

Benefits and Incentives: • Salary dependent upon experience • Competitive benefits

Please apply online at careers@enterhealth.com or fax 214.378.7582.

Executive Director – Naples, Fla.
(posted September 2, 2009)

Hazelden Foundation: Since its 1949 founding in a Minnesota lakeside farmhouse, Hazelden has grown into one of the world’s largest and most respected private not-for-profit alcohol and drug addiction treatment centers. Thousands from every state and more than 40 countries have turned to Hazelden for quality care and expertise on addiction and recovery issues. Our dream is the same as our founders — helping alcoholics and addicts in their recovery.

Employees are the cornerstone of Hazelden’s success; they are dedicated to the mission and committed to helping others. With locations in Minnesota, Oregon, New York, Illinois, and now Florida, employees will continue to play a critical role in Hazelden’s efforts to lead the way as a symbol of recovery.

This exciting Florida start-up is committed to partnering with the Naples community and building a viable continuum of services for people in recovery. Hazelden will enhance the public’s understanding of addiction and the experience of a person in recovery.

Description: Hazelden Foundation seeks a dynamic and skilled executive who is an entrepreneurial leader, manager, and spokesperson. This person will partner with community members, staff, Board and other key stakeholders to effectively achieve Hazelden’s important work and mission to help more people sustain lifelong recovery from addiction to alcohol and other drugs. Building, expanding and maintaining the quality and effectiveness of Hazelden services provided in Florida and carefully managing the budget and finances of the organization are clear priorities for this new executive. However, the performance and effectiveness will also be evaluated based on his or her success in:

• Building new affiliations and partnerships with programs and services
• Building a collaborative approach to the delivery of services
• Inspiring the confidence of the Board, in broadening, diversifying and deepening Hazelden’s universe of partners and donors
• Integration of cutting edge technology
• Serving as an articulate and powerful spokesperson for Hazelden

Qualifications: Requires a minimum of 10 years of progressive healthcare management experience; Master’s degree in Business Administration or Health Management or related field required; must have experience working directly with clinical professionals in a variety of settings; must have demonstrated skills in leading new start up initiatives; solid experiences with fundraising and/or donors preferred as is experience partnering with government agencies.

The Executive Director will also possess the following competencies:

• Vision/Entrepreneurial Skills
• Exceptional leadership and organization management skills
• Results orientation and communication skills
• Interpersonal skills necessary to facilitate and build relationships
• Financial acumen

To apply e-mail: jobs@hazelden.org, visit www.hazelden.org/jobs, fax 651.213.4394 or mail your application to 15251 Pleasant Valley Rd., PO Box 11 Human Resources Center City, MN 55012

Hazelden is an Affirmative Action/Equal Opportunity Employer.

Clinical Supervisor – Pa.
(posted August 14, 2009)

The Clinical Supervisor will facilitate experiential group therapy in Caron’s five-day residential Breakthrough program. Requirements include a Bachelor’s degree in Psychology or a related discipline required; Master’s degree preferred. A minimum of one year experience facilitating experiential therapy preferred. Certified Experiential Therapist (CET) Certification through the American Society of Experiential Therapists (ASET) preferred.

CARON TREATMENT CENTERS, internationally recognized for excellence in chemical dependency treatment, is seeking the following: Therapist. Preferred method of resume submission is electronically via www.caron.org under the career/training link or reply to recruiter@caron.org. Or send to: Caron Treatment Centers, Attn: Recruiter, Galen Hall Road, PO Box 150, Wernersville, PA 19565. Fax: 610.678.8583.
October 15, 2009
Application Deadline for NAADAC National Certification Commission NCAC I, NCAC II and MAC Winter Examination Period
The Professional Testing Company administers testing for the NAADAC National Certification Commission. For details on fees or to download an application form, please visit www.ptcny.com/clients/NCC

October 15, 2009
Adolescent Specialist Endorsement Examination
The Adolescent Specialist Endorsement (ASE) is intended to standardize competencies and to recognize nationally a high level of effective clinical practice in treating adolescent Substance Use Disorders (SUDs). For details on fees or to download an application form, please visit www.ptcny.com/clients/NCC

December 5 – 12, 2009
NAADAC National Certification Commission NCAC I, NCAC II and MAC Examination Period
The Professional Testing Company administers testing for the NAADAC National Certification Commission. For details on fees or to download an application form, please visit www.ptcny.com/clients/NCC

January 8, 2010
Deadline for Presentation Proposals National Conference on Addiction Disorders (Sept. 8–11, 2010).
To download an application, please visit www.ncad10.com

February 15, 2010
Deadline for Nominations for NAADAC National Elections
Alexandria, Virginia
For more information please contact Donovan Kuehn at dkuehn@naadac.org or visit www.naadac.org

February 21 – 24, 2010
SECAD 2010
Nashville, TN
Earn 20 CEs!
More details at www.secad10.com

March 25 – 26, 2010
U.S. Department of Transportation Substance Abuse Professional Qualification and Re-Qualification Seminars
Alexandria, VA – NAADAC National Office
This session will explain new regulations, address common questions faced by professionals and lead participants through the assessment and screening process.
More details at www.naadac.org

April 1 – 30, 2009
NAADAC Election Period
Nationwide
For full details on NAADAC elections, please visit www.naadac.org

April 30, 2009
Deadline for Submissions for NAADAC Awards
Alexandria, Virginia
For more information, please visit www.naadac.org

May 13–15, 2010
Conflict Resolution in Recovery Seminars
Alexandria, VA – NAADAC National Office
Developed in partnership by NAADAC and Danya International, this is a therapeutic resource that is skilled-based and focused on the brain; how it works in conflict and how to affect the quality of recovery in relationships.
More details at www.naadac.org

September 8 – 10, 2010
National Conference on Addictive Disorders
Washington, D.C.
Sponsored by NAADAC.
Visit the nation’s capital, earn over 30 education credits and network with addiction professionals from around the nation. Optional advocacy track provides training and outreach with the nation’s legislators.
For more information on the conference, please visit www.naadac.org

October 21 – 22, 2010
U.S. Department of Transportation Substance Abuse Professional Qualification and Re-Qualification Seminars
Alexandria, VA – NAADAC National Office
This session will explain new regulations, address common questions faced by professionals and lead participants through the assessment and screening process.
More details at www.naadac.org