Rehabilitating Addiction Treatment
An Anti-Racist Recovery Approach Workshop

Sarah Buino, LCSW, RDDP, CADC, CDWF, NMT
(she/her/hers)
Sarah Suzuki, LCSW, CRADC
(she/her/hers)

Objectives

- To define and differentiate racism, prejudice, discrimination, and bias.
- To demonstrate an understanding of unearned advantages and disadvantages.
- To apply harm reduction anti-racism approaches to current organizational values.
- To identify and demonstrate how the Twelve Steps can be utilized to support individual, organizational, and structural change towards liberation.

Presented by: Sarah Buino, LCSW, RDDP, CADC, CDWF and Sarah Suzuki, LCSW, CADC
Overview

Part I: Awareness
Part II: Acceptance
Part III: Action
I'm thinking if we do, just some key pages. And in black in white since it gets SUPER expensive. Do we know the max # of participants who might attend?
Sarah Suzuki, 9/8/2022

@sarah@chicagocompasscounseling.com are we going to print copies of the handout so we can have people utilize them during the talk?
PS I'm driving to Indy, so I can bring as much shit as we need.
_Reassigned to Sarah Suzuki_
Sarah Buino, 9/8/2022

That'll be a question for Jessie. I since folks have to register and pay for the training separate from the actual conference, I'm sure they'll have a rough idea.
Sarah Buino, 9/8/2022
Starting point
Rehabilitating Addiction Treatment: An Anti-Racist Recovery Approach Workshop

Presented by: Sarah Buino, LCSW, RDDP, CADC, CDWF and Sarah Suzuki, LCSW, CADC

Sarah Buino,
LCSW, RDDP, CADC, CDWF, NMT

I am a white, queer, able-bodied, female, middle class business owner. Racism is an unfortunate part of my family history. I am the member of two 12-step programs.

Anti-racism is part of my ongoing journey.

Sarah Suzuki,
LCSW, CRADC

I am a queer AAPI POC therapist who believes the field of addiction contains crucial wisdom to change systemic racism.

Anti-racism is part of my spiritual recovery.
When sharing, avoid Cross Talk. Create space for all to share.

Part I - Awareness

Foundational knowledge. Why we do what we do, key concepts, terms, and why this work matters.
Your why

What’s your why?

Small group discussion

- Why did you choose to attend this seminar today?
- What sparked your interest in anti-racism – particularly in our field?
- Why do you do the work you do? And how does anti-racism fit in with your “why”?

When sharing with your peers, please remember and adhere to the Courageous Space Agreement!
Addiction medicine professionals should examine their own motivations, biases, and practices related to BIPOC to deliver equitable, compassionate, and anti-racism-informed medical care to all patients. Research is needed to identify best practices for motivating and facilitating such an examination.

ASAM - Public Policy Statement on Advancing Racial Justice in Addiction Medicine
Invitation to White Racial Consciousness

Questions to ponder during today’s presentation:

- How am I feeling internally as I listen to this presentation?
- If I notice discomfort, what do I believe is the source of the discomfort?
- How do I feel when I’m asked to notice my whiteness?
- How do I see myself in the material?
- How do I not see myself in the material?
- What am I willing to consider that I haven’t considered before today?

What does it mean to be white?
(And why is this question important?)

- Moving towards anti-racism
  - Recognizing privilege
- Moving away from racism
  - Distancing
  - Avoidance

Nnawulezi, Case & Settles (2020)
Key concepts

**Different Kinds of Racism**

- **Individual racism**
  Prejudgment, bias, or discrimination by an individual based on race

- **Institutional racism**
  Policies, practices, and procedures that work better for white people than for people of color, often unintentionally or inadvertently

- **Structural racism**
  A history and current reality of institutional racism across all institutions. This combines to create a system that negatively impacts communities of color (and white folks as well)
@sarah@headheartbiztherapy.com Should I remove the page number here since we cover this later in the slides with what's in the handbook? Going from page 10 on this slide to page 8 on the next might be distracting. Or let me know if we should remove the 2 slides we do later on racism.

_Reassigned to Sarah Buino_
Sarah Suzuki, 9/8/2022

3 sure!
Sarah Buino, 9/8/2022
What is bias?

Highly dependent on variables like a person’s socioeconomic status, race, ethnicity, educational background, etc.

Bias refers to attitudes and beliefs (positive or negative) about other people, ideas, issues, institutions, or groups

- Affects how we view others
- Influences decision-making
- Human - all of us have them

Explicit v. Implicit Bias

Can conflict with each other

Explicit Bias includes attitudes and beliefs we deliberately hold and express.

Implicit Bias occurs outside of our conscious awareness and influences our opinions and behavior.
What is a stereotype?

A stereotype is a widely held but oversimplified belief about a particular type of person or group. It happens when someone groups individuals together based on some factor and makes a judgment about them without knowing them.
Alcohol Use Disorder is a, treatable medical condition.

Why doesn’t society see it that way?

Cultural stereotypes about alcohol

- Alcoholics are “skid row drunks”
- Artists are more vulnerable to problem drinking, which can end up being part of their creative process.
- It’s normal for white, middle-class women to drink wine most days.
- Alcohol Use Disorder is the result of a moral failing
“These guys usually didn’t care what they drank, as long as it was in a bottle.” – Frank Pulaski
"Normally we have pure wine on the show, and a cocktail — usually we have two things. It’s to keep the mood festive and to keep it light and happy and uplifting!" - Hoda

Billy Bob Thornton in “Bad Santa”
What is prejudice?
How we feel

Prejudice is an affective feeling or attitude towards a person based on their perceived group membership, the identifiable and measurable outcome of which is the practice of discrimination.

What is discrimination?
How we act

Discrimination is the unfair or prejudicial treatment of people and groups based on characteristics such as race, gender, age or sexual orientation.
“This data demonstrates a troubling pattern of explicit discrimination aimed at patients with substance use disorders who need post-acute medical care, despite the guidance from the Massachusetts Department of Public Health and being in violation of federal law.”

-Simeon Kimmel, MD, MA, addiction specialist and assistant professor of medicine at Boston University School of Medicine

What is racism?

Racism =

Racial prejudice +

misuse of power by structures, systems, and individuals
Rehabilitating Addiction Treatment: An Anti-Racist Recovery Approach Workshop

Types of racism and oppression. Credit: National Equity Project “Lens of Systemic Oppression”

33

90%

Of Black patients diagnosed with a SUD did not receive addiction treatment.

92%

Of Latinx patients diagnosed with a SUD did not receive addiction treatment.

SAMHSA, 2019
What are microaggressions?

"Microaggressions are the everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership."

These hidden messages may:

- Invalidate the group identity or experiential reality of target persons,
- Demean them on a personal or group level,
- Communicate they are lesser human beings
- Suggest they do not belong with the majority group,
- Threaten and intimidate, or
- Relegate them to inferior status and treatment."

There is nothing “micro” about microaggressions.

“Micro” refers to engagements that are (covert, subtle or underhanded).

“Macro” refers to more overt forms of racism.

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Calling out is bringing public attention to an individual, group, or organization's harmful words or behavior.

Calling in is an invitation to a one-on-one or small group conversation to bring attention to an individual or group's harmful words or behavior, including bias, prejudice, microaggressions, and discrimination.
thinking we might skip this slide? It's a lot of data. Or we can keep and I can just briefly mention it.
Sarah Suzuki, 9/8/2022
Activity – Rice Breaker

Credit for this activity: Dr. Amber Spry, Assistant Professor of African American Studies and Politics at Brandeis University

Systems of Oppression
Credit: GSA Network
“You already know enough. So do I. It is not knowledge we lack. What is missing is the courage to understand what we know and to draw conclusions.”

–Sven Lindqvist
Wisdom of our field

Today we will illustrate how addiction counselors are uniquely qualified to address racism.

You have important tools to impact this systemic issue!

We hold reverence for the original 12-steps of Alcoholics Anonymous and the ways they have helped alcoholics for decades.

We do not claim the rights to The Twelve Steps of Recovery from White Supremacy. We have adapted them with homage just as other 12-step programs have done over the last 80 years.

Our mindful and intentional use of these steps is meant to uplift the grassroots recovery movements that have occurred in countless communities over the last 400 years and communicate the pivotal role addiction counselors play in this invitation to systemic change.
Twelve Steps of Recovery from White Supremacy

1) We admitted we were powerless over white supremacy - that our culture had become unmanageable.

2) Came to believe that a collective conscience greater than ourselves could restore us to sanity.

3) Made a decision to turn our will and our lives over to the care of the collective conscience as we understood it.

4) Made a searching and fearless moral inventory of ourselves and our collusion with oppressive processes.

5) Admitted to our collective conscience, to ourselves and to another human being the exact nature of our participation in white supremacy.

6) Were entirely ready to transform our behaviors that support white supremacy.

7) Humbly sought out education, support, and diverse voices to unlearn our misshapen beliefs and thinking.

8) Made a list of all persons we had harmed, intentionally or not, and became willing to restore our relationships (to others, ourselves, the world).

9) Made direct amends and reparations to such people wherever possible, except when to do so would injure them or others.

10) Continued to take personal inventory and when we were wrong promptly admitted it.

11) Sought through prayer and meditation to improve our conscious understanding of white supremacy culture, praying only for increased awareness of our agency to create change.

12) Having had a spiritual awakening as the result of these steps, we tried to carry this message to our communities and to practice these antiracist principles in all our affairs.

Step 1:
We admitted we were powerless over white supremacy – that our culture had become unmanageable.
Systemic Racism

A combination of systems and institutions designed to advantage white people, resulting in direct harm to and disadvantages for People of Color. These ways of being and ways of doing are:

1. grounded in the history of our laws and institutions, which were created on a foundation of white supremacy;
2. upheld through institutions and policies that advantage white people and disadvantage people of color; and
3. maintained through interpersonal communication, behavior, and inaction that supports systemic inequities.

Systemic Racism is NOT

White People “Being Bad”
We can be good people who directly benefit from a harmful racial hierarchy.

People of Color “Hating Whites”
We are trying to survive a system designed to oppress, exploit, and kill POC. Struggling to survive is not hatred.
### Examples from ASAM Advancing Racial Justice in Addiction Medicine

| Anti-Drug Abuse Act of 1986 (powdered cocaine v. water-insoluble cocaine, “crack”) | Selective recognition and discriminatory treatment of addiction as medical condition | Inequitable expansion of treatment |

Addiction and white supremacy co-evolved in the United States to form our current realities.
A look at tobacco.

History – Colonial Era

“The Peace Pipe” (painting, 1901)  
“Raleigh's First Pipe in England” (illustration, 1859)
Land takeover and dissolution of native confederacy

Approximate boundaries and tribes of the Powhatan in the early 1600s

Virginia Colony (red line) after Treaty of 1646

1640 - 3 Indentured Servants

Upon the petition of Hugh Gwyn gerr whome he complained to this board of three of his servants that are run away to Maryland to his much loss and & damage and wherethin he hath hourly requested the board that he may have liberty to make [39] the said or benefit of the said servants in the said Maryland which the Court taking into Consideration and weighing the dangerous consequences of such Writings diddes do order that a letter he writhe into the said Governor in the intent the said servants may be returned hither to receive such exemplary and condign punishment as the nature of their offence shall [sic] deserve and then he to be restored to his said master.

June 28, 1646.

The Court hath granted that a commission be drawn for John Marrow and Edward Giles authorizing them to levy a party or men or such if need require out of the several bands for Cherookee country with arms and ammunition to go to [sic] of certain Native Negroes and to bring them to the Governor. And it is further ordered that upon the return of the said Negroes they be dispersed and that if according to their said orders they are make a sufficient return of the said Negroes they be discharged and if not they are to be returned to the said Negroes.

June 28, 1646.

Whereas Hugh Gwyn hath by order from this Board Brought back from Maryland three servants formerly run away from the said Gwyn, the court doth hereby order that the said three servants shall receive the punishment of whipping and to have thirty lashes apiece one called Finley, a shalwes, the other a Shalowes called James Grayly, shall forthfrom serve out their terms with their master according to their Indentures, and one whilst term appency after the time of their service is expired. By their said Indentures is expressed that his said master in case of his death or his absence for the time of his natural life brief or otherwise.
Sentencing

- “One...a Dutchman, the other a Scotchman...shall first serve out their times with their master according to their Indentures” plus 1 year, then 3 years serving the colony

- “And that the third being a negro named John Punch shall serve his said master or his assigns for the time of his natural life here or elsewhere.”

Chattel Slavery

“Tobacco cultivation in Virginia” (painting, c. 1670)

“Negroes just landed from a Slave Ship” (illustration, 1810)
“There is nothing like tobacco. It's the passion of the virtuous man and whoever lives without tobacco isn't worthy of living.”
- *Dom Juan*, Molière (1665)

Cultural consequences:
Exploit, expand, divide, and control

- Appropriation and commodification of sacred indigenous practices = normalized
- Low-status European workers = indentured servants
- Enslaved Africans = chattel

Belief: “Profitable businesses must exploit, expand, divide, and control.”
Current example:
Exploit, expand, divide, control

A screenshot of the deposition of Dr. Richard Sackler, conducted by the state of Kentucky in 2015, published by ProPublica via YouTube

Activity

How do I feel powerless in relation to racism in the United States?
Step 2:
Came to believe that a collective conscience greater than ourselves could restore us to sanity.

“Changing you is changing the world.”
~Rusia Mohiuddin
What does interconnectedness mean to you?

What do you do to practice being in symbiotic relationships with other living beings (including the Earth)?

How is the idea of collective consciousness impacted by your definition of interconnectedness?

How do these ideas impact the way you practice as an addiction counselor?

Adapted from Rusia Mohiuddin
https://universalpartnership.org/
Takeaways from MIC

- How do our addiction treatment facilities/programs function when profit is at the center versus people and their recovery?
  - How does the collective consciousness shift when our mission centers around recovery?
- Addiction work has been intentionally separated from mental health AND medical treatment - this disconnection leaves us needing to fight for resources, recognition and legitimacy.
  - Collective consciousness can tune into scarcity or abundance
- Healing happens through connection, not in isolation

Centering recovery and healing in addiction industry can create the collective consciousness which changes the system
Step 3:
Made a decision to turn our will and our lives over to the care of the collective conscience as we understood it.

<table>
<thead>
<tr>
<th>Abstinence Approach</th>
<th>Harm Reduction Approach</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Racism Spiritual Bypass</td>
<td>The Racism Spiritual Recovery</td>
</tr>
</tbody>
</table>

I am not racist. I don't hurt people because of my race. My clients aren't impacted by my lack of attention to racism. The future will just get better and better. I am a good person who does good work to help, fix, and save. I already know everything I need to know about race.

I help my clients regardless of race. If they don't bring up race, I don't talk about it. I don't talk about racism if my clients are white.

I commit to seeing the reality of how systemic racism has affected me and the collective. I don't need to wait for "society to change" before I start taking steps. I know this is a process, one day at a time. I embrace the process of learning, as I know this is a lifelong journey.

I talk with all clients about racism, because I understand that addiction and racism are intertwined.
Harm Reduction Skills

1. Listen without judgment
2. Ask questions without seeking a desired answer
3. See each POC’s world with respect and honor
4. Recognize that every person has a journey
5. Don’t require gratitude or sadness from POC
6. Encourage people to see their power
7. Defer to each person’s power and choice in making decisions
8. Be vulnerable about your own biases
9. Harm Reduction is an ever-evolving process and no one has arrived

Step 4:
Made a searching and fearless moral inventory of ourselves and our collusion with toxic processes.

Presented by: Sarah Buino, LCSW, RDDP, CADC, CDWF and Sarah Suzuki, LCSW, CADC
White Dominant Culture in Addiction/Recovery

1. Isolation
2. Grasping for identity
3. Savior identity
4. Making everything about yourself
5. Superiority mentality
6. Critical patterns
7. Better than/not good enough
8. Acting and leading in dominant ways
9. Ambition is everything
10. Belief in meritocracy
11. Belief that I must be exceptional to be acceptable
12. Valuing reason over relationship and emotion
13. Entitlement and greed

Inventory on Page 24
Activity – Rice Breaker

Credit for this activity: Dr. Amber Spry, Assistant Professor of African American Studies and Politics at Brandeis University

Step 5:
Admitted to our collective conscience, to ourselves and to another human being the exact nature of our participation in white supremacy.
We have 2 rice breakers decide on location
Sarah Suzuki, 9/8/2022
### Shared Characteristics

#### Characteristics of addictive functioning:
- Defensiveness
- Perfectionism
- Dualistic thinking
- Illusion of control
- Objectivity
- Scarcity mindset
- Blame
- Crisis orientation
- Denial

#### Characteristics of White Supremacy:
- Defensiveness
- Perfectionism
- Either/or thinking
- Paternalism, power-hoarding
- Objectivity
- Progress is bigger, more
- Individualism
- Sense of urgency

### Individual denial

How do we see individual denial play out with racism?

- Alcohol + drug abuse
- Workaholism
- Codependence
- Affairs
Organizational denial

How do we see organizational denial play out with racism?

- Overwork/workaholism
- Covering for boss
- Mission grandiosity
- Secondary addictions (to support workaholism)
- Ignoring what is happening internally
- Dishonest assessment of community impacts
- Focus on contents and control, not processes

Activity

Amongst your peers, discuss the ways you relate to white dominant culture in the addiction industry -- using a past job experience can be a place to start.
Part II – Acceptance

Transformation through Empathy

Step 6: Were entirely ready to transform our behaviors that support white supremacy.
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Racial identity development

**STAGES OF CHANGE & R/CID MODEL**
Adapted from Prochaska & DiClimente; Sue & Sue

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01 - PRECONTEMPLATION</td>
<td>Conformity with the dominant culture and values. Lack of awareness of internalized beliefs.</td>
</tr>
<tr>
<td>02 - CONTEMPLATION</td>
<td>Dissonance as one questions attitudes and beliefs once held in the conformity stage.</td>
</tr>
<tr>
<td>03 - PREPARATION</td>
<td>Resistance as one rejects the dominant culture as oppressive. Anger, distrust and grief = common.</td>
</tr>
<tr>
<td>04 - ACTION</td>
<td>Introspection as one does self-work to heal from racial trauma or internalized superiority.</td>
</tr>
<tr>
<td>05 - MAINTENANCE</td>
<td>Integration of understanding self as a racial and cultural being who is committed to eliminating all forms of oppression.</td>
</tr>
</tbody>
</table>

**Relapse**
Falling back into old patterns, actions, and behaviors. Each relapse is met with new insights for recovery.

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Empathy in healthcare settings
Moudatsou et al, 2020

- Supports creation of individualized client goals
- Increases client satisfaction
- Enhanced quality of care
- Decreased errors
- Increases positive client outcomes

Evidence-Based Empathy
Impediments to Empathy

- 70% of healthcare professionals find it difficult to develop empathy with their patients
- Low levels of empathy are associated with:
  - Lack of time with patients
  - Singular focus on treatment rather than the person
  - Lack of empathy training in med school
  - Prejudiced assumptions
  - Sense of superiority
  - Lack of self-awareness
  - Anxiety
  - Differences in socioeconomic status between patient and physician

Moudatsou et al, 2020

Empathy versus Sympathy in the Literature

- Sympathy – emotional reaction of pity towards the misfortune of another, especially those who are perceived as suffering unfairly
- Empathy – complex interpersonal construct that involves awareness and intuition

Moudatsou et al, 2020
Empathy versus Sympathy

-Brené Brown

What is Empathy?

Components of Empathy

- Staying out of judgment
- Perspective-taking
- Recognizing emotion
- Communicating understanding of that emotion
- Mindfulness – awareness, not denying or getting stuck in others’ emotion

Adapted from Wiseman, 1996 and Brown, 2015
Empathetic Curiosity

- Empathetic curiosity - trying to understand another person’s world from the inside out
- Empathetic curiosity can protect healthcare workers from burnout and improve work satisfaction
- Practicing empathetic curiosity
  - Ask open-ended questions
  - Practice self-awareness
  - Find peer support
  - Immerse yourself in stories
  - Practice generous listening

Halpern & Fraga, 2022 - The Washington Post

Experiential 1
Privilege and disadvantage
Privilege and Disadvantage Experience

- Find a partner
- Choose who will be speaker 1 and speaker 2
- Speaker 1 will speak for 1 minute
  - I will cut off speakers at 60 seconds - no exceptions
  - Speaker 2 will listen without using any verbal or visual empathy cues
- Speaker 2 will speak for 1 minute on their own experience without responding to anything speaker 1 said
  - Speaker 1 will listen without using any verbal or visual empathy cues
- Do NOT debrief on the experience - we will get the chance to do so later

Experiential 2
Taking on a new identity
Increasing Awareness and Empathy – 1

- Prepare to take on a new identity - mindfully review your cards in order
- After viewing the cards, reflect on these questions:
  - Which aspects of your new identity do you connect with personally?
  - Which aspects are foreign to you?
  - What assumptions did you make about your identity?
  - Why did you make these assumptions?

Increasing Awareness and Empathy – 2

- Find others who are similar to you in terms of racial/ethnic identity and sit with those people
- As a group, discuss the following questions:
  - What are the similarities and differences within your racial/ethnic identities?
  - What social privileges does your new identity give you?
  - What aspects of your new identity have you been oppressed for?
  - How do you feel about the contrast between your new identity and your actual identity?
Increasing Awareness and Empathy - 3

- What was your initial reaction to your new identity?
- What assumptions did you make about each aspect of your new identity?
- How did your experience with a new identity impact your view of your real identity?
- In what ways are you privileged in your real identity?
- How do assumptions perpetuate oppression?
- How can you use your privilege to combat oppression?
Step 7:
Humbly sought out education, support, and diverse voices to unlearn our misshapen beliefs and thinking.

Intentional (Re)orientation

- Read/listen/converse
- Connect to a racial justice community
- Connect to an affinity group
- Observe and be curious about feelings of discomfort that arise; connect to a professional resource to explore
- Learn the (real, complete) history of our country through books + media
- Listen to voices of color
- Speak up when microaggressions are occurring
- Always pay for guidance and consultation from BIPOC

Presented by: Sarah Buino, LCSW, RDDP, CADC, CDWF and Sarah Suzuki, LCSW, CADC
### Anti-racism Resources – Podcasts

- 1619
- Code Switch
- All of My Relations
- Scene On Radio – Season 2 (Seeing White)
- Good Ancestor Podcast
- About Race
- Yo, Is This Racist?
- In the Dark – Season 2 (Curtis Flowers)
- White Lies
- Diversity Gap
- Strange Fruit
- How to Survive the End of the World
- Black History for White People

### Anti-racism Resources – Activists

- Shawna Murray-Browne
- rev angel Kyodo williams
- Nicole Cardoza
- Rachel Cargle
- Kim Saira
- Ericka Hart
- Rachel Ricketts
- Jennifer Mullen
- Blair Imani
- Brittany Packnett Cunningham
- Austin Channing Brown
- DeRay Mckesson
Rehabilitating Addiction Treatment: An Anti-Racist Recovery Approach Workshop

**Anti-racism Resources - Authors**

- Ibrim X. Kendi
- Ijeoma Oluo
- Michelle Alexander
- Layla Saad
- Anneliese A. Singh
- Resmaa Menakem
- Cathy Park Hong
- Maxine Hong Kingston
- Mikki Kendall
- Deepa Iyer
- Audre Lorde
- James Baldwin

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**Anti-racism Resources - Social Media**

- Instagram Accounts:
  - Recovery for the Revolution (@recoveryfortherevolution)
  - Diversify Our Narrative (@diversifyournarrative)
  - No White Saviors (@nowhitesaviors)
  - Check Your Privilege (@ckyourprivilege)
  - Privilege to Progress (@privtoprog)
  - Decolonizing Therapy (@decolonizing therapy)
  - Asian Mental Health Collective (@asianmentalhealthcollective)
  - Asians for Mental Health (@asiansformentalhealth)
  - Dr. Mona Masood (@Shrink.Rapping)
  - That Jewish Activist (@that.jewish.activist)
  - Progressive Jews (@progressivejews)

Presented by: Sarah Buino, LCSW, RDDP, CADC, CDWF and Sarah Suzuki, LCSW, CADC
Professional Development Resources

- **A Guide to Responding to Microaggressions** - This article discusses how different types of microaggressions affect people's lives and provides a hands-on guide to strategies, approaches, and interventions to address microaggressions.
- **VitalTalk** - This website offers free lessons and training videos on topics including establishing rapport, tracking and responding to emotions, and diffusing conflict.
- **Empathetics: Neuroscience of Emotions** - This course is a three-module series that teaches physicians how to detect and manage the emotional states of patients and how to respond with empathy and compassion.
- **Yes, Empathy Can Be Taught!** - This is a free hour-long webinar by Helen Riess, MD, the co-founder, chief scientific officer and chairman of Empathetics.
- **Narrative Medicine Workshops (Columbia University)** – Sign up for monthly workshops to designed to support physicians with empathic interviewing and reflective practice.

Activity

Share the resources you have found helpful!
Part III – Action

Step 8:
Made a list of all persons we had harmed, intentionally or not, and became willing to restore our relationships (to others, ourselves, the world).
Effective Interventions for Individuals + Systems

★ Recognize that default mode organizations are hurting organizations
★ Willingness - what do we say to our clients when this is a struggle?
★ Recovery is a process; it is not a quick fix
★ Draw wisdom from recovery circles - recovery is spiritual
★ “Education about addiction, the addictive system, and addictive organizations is absolutely essential to the process of recovery”
  ○ And education about systemic racism

Ineffective Interventions for Individuals + Systems

➔ Quick “fixes”
➔ Blaming “bad apples”
➔ External referencing
➔ Attempting to control others
Audit Your Practice

Step 9:
Made direct amends and reparations to such people wherever possible, except when to do so would injure them or others.
What does it look like to carry this training into your day to day work?

Making Amends and Redress

What does it look like to make amends?

- To marginalized colleagues
- To marginalized clients
- To others in our lives
- To organizations we interact with
- To ourselves
Step 10: Continued to take personal inventory and when we were wrong promptly admitted it.

Continued Personal Inventory

Anti-racism is a regular practice we must engage with daily

- What are some ways you can engage with transformational values on a daily basis within your work?
  - Racial consciousness development
  - How does racism intersect with systems that impact SUD tx for BIPOC?
  - Customize assessment strategies to highlight intersections of race and SUD issues
  - Employ interventions to match cultural preferences, values and needs

Matsuzaka & Knapp, 2019
Racial Healing Wheel (Singh, 2019)

1. Know your racial identity
2. Explore your internalized racism
3. (Re)learn the history of racism
4. Grieve and name racism
5. Raise your race consciousness
6. Catch yourself in the flow of racism
7. Understand racism in relationships
8. Reclaim your whole radical self
9. Be a racial ally
10. Engage in collective racial healing

Step 11:
Sought through prayer and meditation to improve our conscious understanding of white supremacy culture, praying only for increased awareness of our agency to create change.
Sought Through Prayer and Meditation

- What spiritual practices are being utilized at your facility? Do you give homage to where those practices originated?
  - Yoga
  - Meditation
  - Sweat lodge
  - Healing circle

- Seek to understand the spiritual practices of your own culture before colonization

Step 12:
Having had a spiritual awakening as the result of these steps, we tried to carry this message to our communities and to practice these antiracist principles in all our affairs.
Wisdom from our field

“One day at a time.”

- Focus on the present
- How can you let yourself see what is right in front of you and not get ahead of yourself?
“Easy does it.”

- Start with small steps (“small is all”)
- Take it slowly. Systemic racism developed over hundreds of years. It won’t change overnight

“Let go and let God.”

- Systemic racism gets us confused about our responsibility (confusing blame with responsibility)
- Recognize what is genuinely in your control and take action
- Let go of what is outside of your control

Presented by: Sarah Buino, LCSW, RDDP, CADC, CDWF and Sarah Suzuki, LCSW, CADC
“Progress, not perfection.”

- Perfection keeps us in our addiction and stinking thinking
- Celebrate your progress and continue the lifelong journey

“Nothing changes if nothing changes.”

- Waiting for “the system” to change, or for generations to change = no change
- Resist the urge to make excuses for failing to take action
“Principles before personalities.”

- Defensiveness and ego get in the way of systemic change
- All of us want to live in a healthy, connected society where our needs are met. Stay focused on the principles

“Humility is not thinking less of yourself, but thinking of yourself less.”

- Cultural humility doesn’t require you to feel ashamed of who you are. You don’t have to invalidate your experience, strength, and hope
- Let go of scarcity mindset

Humility is not thinking less of yourself, but thinking of yourself less.
Be Accountable Versus Performative

Carrying the Message

How do we carry the message to others without being performative?

Modeling anti-racism:
- Resist colorblindness
- Continue to educate yourself
- Embrace discomfort as part of the change process
- Call in versus call out
Our field is uniquely qualified to address white supremacy in our culture. How will you use your privilege for the greater good?

Thank you!

Sarah Suzuki,
LCSW, CRADC
sarah@chicagocompasscounseling.com
@chicagocompass

Sarah Buino,
LCSW, RDDP, CADC, CDWF, NMT
sarah@headhearttherapy.com
Instagram: @headhearttherapy
Facebook: @headhearttherapy