Journal of Addiction Science

https://doi.org/10.17756/jas.2024-suppl1

Meeting Abstracts

Open Access

# Proceedings of the 5th Annual Addictions Professional Conference (USA 2023)

## Keynote Session

### Diondre also has Bad Days: Using Narrative Therapy with Black Youth with SUDs

**Rommel Johnson**

*University of Texas-Rio Grande Valley*

#### Abstract

Black youth are more vulnerable to socioeconomic and psychosocial factors, which can lead to problematic substance use and substance use disorders (SUDs). Despite their need for treatment, it is well known that treatment for SUDs is oftentimes not readily available in Black communities. Furthermore, even when treatment is available, due to their mistrust of medical systems and lack of culturally appropriate services or providers that look like them, many Black Americans either do not utilize treatment, or do not complete treatment services. Therefore, counselors working with Black Americans and particularly Black youth need to ensure that they are being culturally relevant in their approaches to help them.

Narrative approaches to counseling have been well established in the profession, but very little research has demonstrated its suitability with the Black experience in America. Specifically, storytelling has historical significance for Black culture, having been used historically as a form of shared and individual emotional healing. From the use of Negro Spirituals, folklores, and myths to cope with and challenge the forced narrative of slavery to the liberating orations of Dr. Martin Luther King, and the demands of the Black Lives Matter and "Me too" movements, storytelling in the Black community has served the purposes of healing and taking control of the narrative. This presentation discussed how counselors working with Black youth with problematic substance use or SUDs, can effectively use Narrative therapy to address their problematic substance use or SUDs.

### No More Lies: Disrupting the Narrative of Black Addiction Professionals

**Bakahia Reed Madison**

*Oakton Community College*

#### Abstract

Despite alcohol use disorder being clinically defined in the present day as being rare within the African American population, prior to and following the Civil War, there are isolated accounts of African Americans being treated [1]. One of the earliest reported attempts to address African American inebriation is through the writings of Dr. Benjamin Rush's 1874 treatise on alcoholism. Accounts of recovery activism within African Americans increased through the nineteenth century. Fredrick Douglass is the most notable of early African Americans in recovery. This presentation provided the numerous influences on the addiction field by Black leaders and addiction professionals; described the intersectional challenges facing Black addiction professionals; and identified interventions that help sustain Black addiction professionals in the field [2].

## References

1. White W, Sanders M. 2002. Addiction and recovery among African Americans before 1900. *Counselor* 3(6): 64-66.

2. Zapolski TC, Pedersen SL, McCarthy DM, Smith GT. 2014. Less drinking, yet more problems: understanding African American drinking and related problems. *Psychol Bull* 140(1): 188. https://doi.org/10.1037/a0032113


# Speaker Session

## Progressing Forward in Relapse: Dealing with Stigma


**Samson Teklemariam**

*Behavioral Health Group, LLC*



## Abstract

According to the National Institute of Drug Abuse, approximately 40 - 60% of those involved in treatment for a substance use disorder (SUD) experience at least one return to use during or after treatment [1]. SUD is most often defined as a chronic disease involving a common repeating cycle of abstinence and relapse. 'Relapse' refers to a return to a previous level of substance use after a period of considerable reduction or abstinence from substance use. It is common practice to communicate with patients that even when a person with SUD is in remission and no longer using substances, a relapse is always a possibility. Just as it is with every patient struggling with a chronic medical condition, the goal during an exacerbation is to restore the patient to stability and keep them motivated and connected to treatment. However, when helping professionals who are both providing care and in recovery themselves experience relapse, reactions vary. These reactions are often driven by negative stigma and impact treatment decisions for both professionals and patients in recovery. This presentation allowed participants to develop a progressive paradigm in relapse prevention for a chronic medical condition (SUD), summarized four reactive responses, commonly found in MATR settings, that contribute to the negative stigma of relapse in recovery; replaced them with four affirming responses; and allowed participants to utilize a guided discussion tool to address the stigma of treating a condition that is both chronic and relapsing.



## References

1. Drugs, Brains, and Behavior: The Science of Addiction - Treatment and Recovery. [https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/treatment-recovery] [Accessed February 28, 2024]


## Pornography Addiction: A Mirage of Intimacy


**Rommel Johnson**

*University of Texas-Rio Grande Valley*



## Abstract

Although not an established diagnosis in the DSM-V-TR, compulsive sexual disorder, specifically pornography addiction, has increasingly become widespread in the United States and countries around the world. While some researchers and scientists doubt the existence of pornography addiction, a growing body of evidence has documented an unprecedented increase in consumption of online pornography worsened by the COVID-19 pandemic. Furthermore, research has found several symptoms of pornography addiction including the neglect of personal care, a loss of interest in other activities, spending too much time watching pornography, difficulty concentrating, loss of interest in having sex with a partner, irritability, and erectile dysfunction.

Specifically, pornography addiction has been shown to have a negative impact on individuals and their romantic relationships. For the individual, researchers have found a bidirectional connection between pornography consumption and loneliness. Namely, pornography use increases loneliness, while loneliness encourages pornography consumption due to its potential use as a coping mechanism. Furthermore, pornography addiction causes individuals to be distant from their partners, creates feelings of mistrust and lessened intimacy. When pornography use is discovered, partners often feel betrayed and cheated on, often leading to an end of the relationship.

The presentation assisted addiction professionals in understanding the etiology and impact of problematic pornography use and pornography addiction on individuals, couples, and families. Assessments and interventions to help clients recover and restore healthy relationships with self and others will also be discussed.

## Addiction Services for Individuals Diagnosed with Autism Spectrum Disorder

**Sekeria Bossie**

*Alabama State University*

### Abstract

While it is often perceived that addiction can impact the lives of anyone, there are groups of individuals who addiction professionals have overlooked. Specifically, individuals on the Autism Spectrum are often not included in the discussions regarding addiction treatment. Previously, it was presumed that the characteristics of Autism Spectrum Disorder were protective factors against addictive disorders [1]. It was asserted these characteristics could decrease the likelihood that individuals with the diagnosis would have access to substances and would therefore decrease the possibility of developing a substance use disorder. However, research has found that individuals on the Autism Spectrum are at higher. Compounding these issues is the notion that it is not uncommon for mental health clinicians to be hesitant to work with individuals diagnosed with Autism Spectrum Disorder. Mental health clinicians who provide addiction services are equipped to provide those services to individuals on the Autism Spectrum. Individuals with Autism Spectrum Disorder often engage in addiction related behaviors for the same or similar reasons as those who are not diagnosed with Autism Spectrum Disorder. This presentation emphasized the importance of addiction professionals being willing to make appropriate modifications that address addiction symptoms exhibited by individuals diagnosed with Autism Spectrum Disorder. Evidence-based strategies for working with this population were provided.

### References

1. Ressel M, Thompson B, Poulin MH, Normand CL, Fisher MH, et al. 2020. Systematic review of risk and protective factors associated with substance use and abuse in individuals with autism spectrum disorders. *Autism* 24(4): 899-918. https://doi.org/10.1177/1362361320910963

## Self-care for Addiction Professionals

**Sekeria Bossie and Angela Hall**

*Alabama State University*

### Abstract

According to most human services codes of ethics, the primary responsibility of a clinician is to respect the dignity of clients and to do no harm. Clinicians experiencing burnout may violate this basic ethical principle, especially those working as addiction counselors. According to Elman and Dowd [1] clinicians who develop burnout 0may be less effective, more likely to make harsh punitive decisions and may violate the professional code of ethics that states,

"do no harm". Burnout is defined in academic literature as a work-related syndrome, characterized by emotional exhaustion, cynicism and reduced professional efficacy and can be cumulative in nature [2]. Burnout can also be characterized by an onset of energy depletion and may lead to physical symptoms such as sleeplessness, depression, and high blood pressure among therapeutic professionals who work with clients in highly charged emotional environments [3]. Substance abuse counselors are particularly vulnerable to burnout due to the emotionally taxing nature of the work [4]. In this presentation, the prevalence of burnout and the ethical ramifications burnout can cause among this population were explored. In addition to prevalence and the ethical ramifications of burnout, self-care interventions to prevent ethical malpractice as a result of burnout among addiction professionals are introduced. This topic is important because of the significant professional demands of mental health clinicians who provide addiction services resulting in the high prevalence of burnout among this population [4].

## References


1. Elman BD, Dowd ET. 1997. Correlates of burnout in inpatient substance abuse treatment therapists. *J Addict Offender Couns* 17(2): 56-65. https://doi.org/10.1002/j.2161-1874.1997.tb00114.x
2. Maslach C, Schaufeli WB, Leiter MP. 2001. Job burnout. *Annu Rev Psychol* 52(1): 397-422. https://doi.org/10.1146/annurev.psych.52.1.397
3. Malach-Pines A. 2005. The burnout measure, short version. *Int J Stress Manage* 12(1): 78. https://doi.org/10.1037/1072-5245.12.1.78
4. Farmer R, Clancy C, Oyefeso A, Rassool GH. 2002. Stress and work with substance misusers: the development and cross-validation of a new instrument to measure staff stress. *Drugs Educ Prev Policy* 9(4): 377-388. https://doi.org/10.1080/09687630210131445


# Sustainable Integrated Care Through Community Partnerships


**Boni-Lou Roberts and Sharie Millsap**

*Behavioral Health Group, LLC*


## Abstract


With the focus of substance use disorder treatment shifting to integrated care solutions, it is crucial for addiction professionals to explore valuable community partnerships to complement services already offered. Additionally, addiction professionals need to be aware and implement recovery-oriented systems of care, conduct community needs assessments, and develop relationships with others that promote holistic client care. This presentation discussed the ways to develop sustainable integrated care through strong community partnerships; with reiteration on the importance of a continuum of care for individuals with substance use disorders. Review of relevant definitions and implementation of integrated care that includes the use of multidisciplinary teams were also explored. Focusing on credentialing criteria such as standards from the Joint Commission and CARF surveys, the presenters introduced a framework for the developing strong methods for monitoring consistent community engagement as part of integrated care solutions. Using analyzed reviews of various reported connection methods, the participants were able to identify four types of integrated care models for fostering and sustaining community partnerships. Participants were also afforded the opportunity to explore barriers to implementation by identifying solution-focused goals.


# Respecting My Privacy, Ethically: Minor's Rights to Confidentiality


**Carmela Y. Drake**

*Alabama State University*


## Abstract


Anyone who has worked with adolescents is familiar with the many challenges of balancing respect for the rights and confidentiality of the adolescent client, while also trying to support and inform concerned parents or guardians. Laws vary state-to-state, and

at times can pose a conflict with one's professional code of ethics. Fortunately, ethical guidelines as well as federal and state statutes provide guidance on what are considered "required" breaches of confidentiality; however, it is the addiction professional's responsibility to be aware of those guidelines and statues. This presentation discussed the common challenges encountered when addressing the privacy rights of adolescents; explored the ethical guidelines associated with maintaining confidentiality with adolescent clients; as well as reviewed the various state and federal statues that support confidentiality of minors that seek mental health and substance use disorder treatment. The federal and state statues vary according to the treatment settings (i.e., outpatient vs residential) as it relates to informed consent and confidentiality. In addition to the addiction professional being responsible for staying up to date on ethical and legal changes that relate to minors' confidentiality, the professional also has an ethical obligation to make use of an ethical decision-making model. The presentation introduced Corey, Corey, and Callanan's eight step ethical decision-making model and allowed the participants to apply it to case scenario offered through an interactive component of the session.

**Citation:** Proceedings of the 5th Annual Addictions Professional Conference (USA 2023). *J Addict Sci* 10(Suppl 1): S1-S5.

**Copyright:** © 2024. This is an Open Access article distributed under the terms of the Creative Commons Attribution 4.0 International License (CC-BY) (http://creativecommons.org/licenses/by/4.0/) which permits commercial use, including reproduction, adaptation, and distribution of the article provided the original author and source are credited.

Published by United Scientific Group.

**Received:** February 14, 2024 **Accepted:** February 16, 2024 **Published:** February 27, 2024