

VAAP VIEWS

Virginia Association of Addiction Professionals,
an affiliate of NAADAC, The Association for Addiction Professionals

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ADVERTISING:

VAAP VIEWS does accept advertising for publications, treatment centers, clinics, and job postings. Contact us if you are interested in advertising.

The Annual Members Meeting Is Coming!

March 21, 2014



Virginia Beach Resort Hotel &
Conference Center
2800 Shore Drive
Virginia Beach, VA 23451
(800) 468-2722

“The Pain of Addiction”

Dynamic Speakers!

Waterfront View!

Pre-Register online at –
www.planetreg.com/vaap2014

Questions?

**Contact: David Semanco,
Registrar at –**

annualmeeting@vaaddictionpros.org

OR

(571) 264-1527

Pre-Registration Deadline: March 10, 2014.

Your registration includes:

- continental breakfast
- 5 contact hours of training
- lunch
- a vote at the Annual Business Meeting
- a chance to win a working assistantship to the Virginia Summer Institute for Addiction Studies (VSIAS).

Please be sure your membership will be current as of March 21, 2014!

NOT A VAAP MEMBER? BECOME A MEMBER AT A DISCOUNTED RATE!

If you are not a VAAP member, you can still pre-register and attend the VAAP Annual Meeting & Free Training by submitting your VAAP/NAADAC membership application and dues on-site at the discounted rate of \$65 for Professionals (regular \$135), \$64 for Associates (Regular \$114), \$32.50 for Students (regular \$52.50), and \$32.50 for Retired (regular \$52.50). Simply complete the pre-registration process online and an application will be emailed to you. Complete the application and bring it with you on the day of the event along with your dues payment. This discount is available only to first-time new members and only on the day of the event.

2014 VAADAC Awards Nominations

It's that time of year again. It is time for each of us to recognize the exceptional work in our field.

Awards qualifications are:

Counselor of the Year: An active VAADAC member for the past year who is not a Board member, who has made outstanding contributions to the treatment and recovery of clients, has exceptional dedication to the field, and a high level of professionalism.

Distinguished Service Award:

A person or organization distinguished by outstanding contributions in the field of addiction and recovery (award limited to one per year). Current members of the Association Board is not eligible for nomination.

Citizen of the Year Award:

A person who has made significant contribution to the field of addiction and is not employed in addiction counseling.

Walter Kloetzli Award: This award is in honor of Walter Kloetzli, a long time VAAP (formerly VAADAC) member and past President of VAADAC, who has spent the better part of three decades advocating on behalf of addiction professionals and those in their care. His relentless pursuit of appropriate support and recognition for substance abuse professionals has been unmatched and integral to the growth and development of VAAP and the profession. The recipient of this award will be a

VAAP member who has served at the chapter, regional or state board level and who has demonstrated extraordinary dedication in advocating for the addiction profession and VAAP.

Please submit your nominations by March 15, 2014 to: Ron Pritchard, Chair, VAAP Nominations Committee at ronpritchard@verizon.net

--Excerpt from VAAP By-Laws



Current Vacancies on the VAAP Board of Directors:

- *Central Region President*
- *Delegate at Large*
- *Secretary*
- *Treasurer*

You must have maintained your VAAP membership for a minimum of one (1) year for consideration as a member of the BOD.

If interested and/or for more information please contact the BOD at:

(804) 527-6299 Mailbox # 6222

OR

www.vaaddictionpros.org

People in Glass Houses

I saw an item in the Jan 21, 2014 NAADAC e-newsletter *Addiction and eNews* titled "Most U.S.

Doctors Fail to Discuss Alcohol with Patients: Study" that had a link to a Reuters online news story. Basically, this story was about a study showing that doctors aren't asking patients about their alcohol use like they *should* be. The first thought that popped into my head was the old saying, "People in glass houses shouldn't throw stones" because the majority of addiction counselors and case managers are guilty of the same type of gap in the services they provide.

Here are excerpts from the news story itself (accessed via this link: <http://www.reuters.com/article/2014/01/07/us-usa-health-alcohol-idUKBREA0612320140107?irpc=932>) in Italics and quotation marks, with my comments below each point:

"Doctors are failing to find out if their patients drink too much alcohol, despite evidence that at least 38 million American adults consume an excessive amount, a U.S. health agency said on Tuesday."

Likewise, addiction treatment professionals are failing to assess and address tobacco use/dependence in the same way they do alcohol/other drug use.

"An estimated 88,000 people die in the United States each year from drinking too much alcohol, but only

one out of six adults overall and one in four binge drinkers have discussed their drinking habits with their doctors, according to a new study by the Centers for Disease Control and Prevention (CDC)."

An estimated 400,000+ people die in the US each year due to their tobacco use and a disproportionate percent of those are people with SA/MH disorders. National data on how many SA/MH treatment providers assess tobacco use disorder and address it as an Axis I primary substance use disorder (the appropriate service for SA/MH treatment settings) is not available - there is no data collection tool that asks about this. But if one just surveys staff or checks charts at one's own treatment setting, it would be possible to find out if they are doing better or worse than these doctors (i.e., is it more or less than 1 in 6 overall or 1 in 4 for heavy users, clients who smoke 1 pack/day or more are considered heavy users).

"That practice needs to change, CDC Director Thomas Frieden said."

Ditto for addiction treatment providers in relation to client tobacco use and dependence.

"It should be a part of routine patient care," Frieden said. "In the same way we screen patients for high blood pressure, high cholesterol, we should be screening for excess alcohol use."

Ditto for addiction treatment providers - in the same way we screen clients for alcohol and illicit drug use **and** then do something

about it. No other substance use disorder is identified (diagnosed) and then ignored.

"Doctors are often too busy to screen patients for alcohol abuse and may view treatment options as ineffective, the CDC said."

Addiction treatment providers often make the same statements about tobacco use/dependence among their client population, in spite of being specialists in the treatment of substance use disorders.

"But asking patients about their alcohol use and then offering advice on how to reduce it, or referring the most serious cases for specialized treatment, can be effective in many cases, Frieden said."

'Counseling for five, 10, 15 minutes can result in a substantial reduction in problem drinking,' he said."

Ditto for addiction treatment providers - if they screen, assess motivation and provide an appropriate counseling intervention (e.g., MI or CBT) or at a minimum do an SBIRT intervention, this could result in a substantial reduction in tobacco use and increase in tobacco recovery among their client population. Instead, skills addiction providers have are not used and clients are helped to recover from their other addictions only to get sick and die prematurely from the drug use that kills more of them than all the others combined.

Here is some recommended reading on this issue, also from NAADAC: "Tackling One of the Toughest Addictions: Nicotine" by Hoffman

and Landry, published in the Winter 2013 edition of *Advances in Addiction and Recovery*. This article can be accessed online: http://www.naadac.org/assets/1959/aar_winter2013_tobaccoarticle.pdf

I hope this opinion piece will generate interest in discussion about the professional responsibilities of addiction counselors to provide comprehensive treatment services that address all substance use disorders with clients admitted to their programs/treatment settings, including tobacco. The concept of parity applies here, too. While they may not be able to admit people into treatment that **only** have a tobacco use disorder, addiction treatment specialists should not be ignoring 305.1, especially when fully aware of which clients have this SA disorder.

By Janis Dauer, MS, CSAC



VAAP members at lunch during the 2013 Annual Meeting; the food was good!

Reminders

Submitting Articles

Articles submitted may be edited for length and content. The maximum length of submitted articles is three-quarters of a page, single spaced. The editor reserves the right to publish only articles which relate to the VAAP's mission.

Articles will not be printed with a recovering person's name, identifying data, or photograph without the person's written permission submitted to the editor with the related article. The name of treatment facilities or providers will not be printed.

If you wish a by-line, submit your name and credentials as you wish it to be published. If desired, your e-mail address can also be listed.

If you would like to submit a newspaper article or an article that you have written yourself such as articles on current topics of interest, trends in counseling, or book reviews to VAAP VIEWS for publication, contact the editor,

Denise Cooper at:
Cooperd@rbha.org

April 7, 2014

Deadline 5 PM:

Article submission for the Spring Edition, VAAP VIEWS

June 15, 2014

Deadline 5 PM:

Article submission for the Summer Edition, VAAP VIEWS

October 1, 2014

Deadline 5 PM:

Article submission for the Fall Edition, VAAP VIEWS

Update Your Colleagues

Have you received a professional award? Do you know a VAAP member who has received a professional award? Please send VAAP Views this information so that the accomplishments of our members do not go unrecognized.

Change in Your E-Mail Address

E-blasts to VAAP members about VAAP trainings and other events are performed by NAADAC, who maintains the VAAP membership list. If you need to change your e-mail address, please write Autumn Kramer, Director of Membership Services, at: AKramer@naadac.org

Archived Webinars



These webinars are free to view anytime. Earn CE credit by simply passing the online CE Quiz! Get more information at <http://www.naadac.org/>

Upcoming Events:

NAADAC Advocacy Conference



March 2 - 4, 2014

**Holiday Inn & Suites
Alexandria–Historic District
625 First Street, Alexandria,
VA 22314**

Naadac.org/advocacyconference



Virginia Summer Institute for Addiction Studies:

"Breaking News for the Addiction Professional"

July 14 - 15, 2014

Holiday Inn Patriot
3032 Richmond Road
Williamsburg, VA 23185

<http://www.vsias.org>

VAAP 2014
Sustaining Membership

Alliance for the Prevention and Treatment of Nicotine Addiction (APTNA)

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