

# CONNECTIONS

The Newsletter for Addiction Professionals



## President's Message

By Albert Alvarez

### Happy Holidays!

This is the most wonderful time of the year to give thanks and to do good to someone else. In fact, do you know that the word "benefactor" comes from two Latin words "bene" and "facere" meaning "to do good to?" I'm a happy benefactor who enjoys giving a very charitable donation to the neediest in our IAAP organization, that is, the student.

And so I come to all of my fellow benefactors of IAAP to first THANK YOU, because without your "bene" "facere", IAAP could not do good by bestowing needed services to our students interested in becoming addiction recovery counselors. Happy Holidays to each of our wonderful benefactors and to all our IAAP students. And finally I remind those, who have not yet become a benefactor, it is an important value of IAAP "it is in giving that we receive" and we grow our profession. So I ask you, as past, present and new benefactors, to give most generously as a happy benefactor. I know, as a benefactor myself, I receive much inner peace knowing a student was helped.

Happy Holidays and Peace be with you!  
Only Our Best,

*C. Albert Alvarez, LMHC, LCAC, MAC, CGP.*

Albert, your President  
Albert Alvarez, LMHC, LCAC, MAC, CGP.



### ARE YOU UPDATED?

Please contact us to update your address & email to avoid missing important information!

WE  
MOVED!

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### IAAP NEEDS YOU!

*Look Inside this issue for Exciting Leadership  
and Advocacy Opportunities to Gain Skills  
and Support Addiction Professionals*



### A MESSAGE FROM YOUR EDITOR IN CHIEF

Our Board of Directors has initiated some restructuring for the quarterly IAAP Newsletter. Stephanie Waddell at Central Office will continue to be the Managing Editor and Publisher, but she now has me, Kay Bontrager, helping her with the newsletter. My role as Editor in Chief means that all articles will be sent to my attention before they get to Stephanie. My email and fax info will show up on our web site to further remind anyone interested in submitting an article, to send them to me.

*Continued on the next page.*

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I want to announce some opportunities available that will provide new angles for content that can connect and enrich our membership while keeping you informed. The first change will be the addition of three new features. They all need your involvement to be successful.

The first will be **KUDOS TO:** We want to recognize our members who achieve a professional goal, as in qualifying for a new level of certification or licensure, or an academic degree or a new place to put your skills to work. It is amazing to me to find out someone I meet at conferences is working less than 30 miles from me. So, participate by sending me **YOUR** news and don't be shy about your accomplishments. Also this will give us a venue to share when one of our members presents in the community. We will publish news of any event that has happened since the last newsletter (a past event) or one coming up. Be sure to give your contact information at the end as someone may want you to speak at their staff meeting.

Second new feature will be **WORDS OF WISDOM**, quotes that cause us to think not only about our professional field, but more personally, to keep us mindful that our inner man/woman is constantly being developed by our interaction with the world. The words of wisdom are intended to nourish our inner person, our spirit and soul. I know many of you identify because I've read some of the best thoughts at the end of your email signatures. Again, don't be shy...send in some that **YOU** find meaningful, and see them published to enrich others.

The third new feature will be **A SOBER CHUCKLE... Rx: LAUGHTER** Life and work get tedious. Part of caring for ourselves is to be able to see the lighter side in life, to pause for a chuckle, to crack up laughing at the absurdities, the difficult conundrums. Humor is healing, for us, for our clients. You can contribute by sending me that which makes you smile awhile, and I'll do my best to find good clean humor for you.

One final thought. These new features are short nuggets that can succeed or fail to meet their intended

purpose. For example, I anticipate that the Humor feature will never hit 100% of your funny-bones. We are all unique and different. So I am open to your feedback, what you like, what you wish we'd deal with, and what fell flat at your feet. I've committed to listen, to adjust, and to keep our print up to the highest standards its content is known for. I've put on my garments of preparedness and look forward to all your contributions in the future.



## 2014 IAAP Events Calendar

### REGISTER TODAY!

·IAAP Clinical Supervisor Training  
January 17-18, 2014  
*Register online today!*  
[www.iaapin.org](http://www.iaapin.org)



### SAVE THE DATES!

·IAAP Annual Spring Conference  
April 4-5, 2014  
·IAAP Ethics Course  
July 11, 2014  
·IAAP Annual Fall Conference  
October 10-11, 2014

**Next Certification Committee Meeting:**  
January 11<sup>th</sup>, 2014

**Kudos To:**

IAAP wants to recognize our members who achieve a professional goal, as in qualifying for a new level of certification or licensure, or an academic degree or a new place to put your skills to work.

At this time, IAAP would like to recognize our member, **Diane Apostoloff**, who has received her APIT Certification this fall. This is a great accomplishment, so be sure to congratulate Diane when you come into contact with her!

**A SOBER CHUCKLE  
... Rx: LAUGHTER****Hearing Problem****Pray for Leroy!**

Leroy, a drug addict, goes to a revival and listens to the preacher.

After awhile the preacher asks anyone with needs to be prayed over to come forward to the front at the altar.

Leroy gets in line, and when it's his turn, the preacher asks: 'Leroy, what do you want me to pray about for you.' Leroy replies: 'Preacher, I need you to pray for my hearing.' The preacher puts one finger in Leroy's ear, and he places the other hand on top of Leroy's head and prays and prays and prays, he prays a blue streak for Leroy.

After a few minutes, the preacher removes his hands, stands back and asks, 'Leroy, how is your hearing now?' Leroy says, 'I don't know, Reverend, it ain't til next Wednesday!'

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**Licensure Renewal  
Reminder - LAC & LCAC**

Renewal information will be sent to the email address you have on file with the Professional Licensing Agency on approximately February 1, 2014. Make sure your email address is current and up to date. You can also renew online at [www.in.gov/pla](http://www.in.gov/pla)

**Marketing & Membership**

The Marketing and Membership committees are working together to increase our energies related to expanded membership. This membership in IAAP is a benefit to all professionals who seek on-going education related to the treatment of substance abuse and addictions.

We continue to support and plan for the educational conferences offered by the Indiana Association of Addiction Professionals. Our next educational opportunity is Clinical Supervisor Training - January 17-18, 2014 which will be presented at the Indiana Wesleyan University Indianapolis Education Center on Priority Way in Indianapolis. Two ways to register:

**By Phone:** please call 317-481-9255  
**Online:** [www.iaapin.org](http://www.iaapin.org)

We now have a strong email list for the community mental health centers in the state with the intent of keeping those folks informed of up-coming education opportunities that meet the standards for CEUs.

Anyone interested in having an educational event for their work site, please contact Stephanie at the IAAP office. If you are interested in being part of this work at the committee level please contact me at [jeannehayes10@gmail.com](mailto:jeannehayes10@gmail.com).



## Elections Committee

IAAP has been a strong membership association since its infancy and it continues to grow. However the strength of the IAAP relies on willingness of its members. Imagine, if you will, your client informs you during your next session of having visited a specific Support group, which has been existence for several years. The client proceeds to inform you of the experience being that the Chairperson continued to ask other attenders to volunteer for specific tasks to allow the meeting to continue to function. Your response consists of wondering if those who consider the group to be an instrumental part of recovery maintenance will respond to the call as a responsibility to those who rely on the meeting. The parallel to this scenario is you are "the other attenders" of IAAP, and the question to ask yourself is "when will I take on the responsibility of serving in IAAP?"

The wonderful news is each member has ample time to ponder over this question, as the process for elections of 2014 begin in June. While a member does not need to be elected to serve on a committee, it is required to serve on the Board. And, the Board consists of members who became active in some capacity.

The Elections Committee, chaired by Brent Stachler, consists of Toni Lovell, Warren Gray, George Scott, Eunice Taylor, and Teresa Jones. The work of this committee occurs in late spring of each year and ends in October at the Annual Membership meeting. The timeframe with which we operate is as follows:

In June, requests are sent to all members if IAAP for nominations of available Board of Director or officer positions. In July, all nominations are reviewed by the Committee to ensure the nominees are eligible by reviewing the established criteria for the respective position. In August, ballots are sent to all members of IAAP, followed the tally of all eligible votes in September and the

announcement of the results at the Annual Membership meeting in October.

In 2014 we will be focusing upon elections for the following: President-Elect, Treasurer, Secretary, and 2 Representatives from the Northeast Region. The Northeast Region of the State Indiana, identified as Region 2 is defined as the area located east of US 31 from the Michigan-Indiana state line south to US 40 from Indianapolis to the Indiana-Ohio state line and includes all of Avon, Danville, New Winchester, Bainbridge, Groveland, Morton, Hollandsburg, Bellmore, Rockville, Hillsdale, and Montezuma along US 40, and Carmel and Fishers in the Indianapolis area.

Only our Best;  
Brent A. Stachler, LCAC, LMFT,  
MAC, ICCS  
Past President



## Words of Wisdom

Your vision will become clear only when you look into your heart. Who looks outside, dreams. Who looks inside, awakens. *Carl Jung*



## Thursday Drinking and Academic Load Among College Women

Rose Marie Ward, Robert N. Bonar, Elizabeth A. Taylor, Kathryn A. Witmer, Craig S. Brinkman, Michael J. Cleveland, Terri L. Messman-Moore

**Objective:** Research indicates that alcohol consumption by college students fluctuates across the semester, with consumption changing because of social events and calendar holidays. In addition, some research indicates that Thursday alcohol consumption is a function of Friday course schedule. Students with courses after 10 a.m. or not at all on Friday are more likely to consume alcohol on Thursday nights. Furthermore, college women are increasingly consuming alcohol at higher levels and comprise a larger portion of college students in comparison with their male counterparts. The current study was aimed at examining patterns of Thursday night alcohol consumption and academic load among female college students.

**Method:** College students (N = 383, 100% female) participated in a 10-week paper- and web-based survey on alcohol consumption. After completion of the study, academic records of the participants were retrieved for objective measures of academic load.

**Results:** Patterns of Thursday alcohol consumption relate to timing and difficulty of the first course on Friday. However, patterns of Thursday alcohol consumption were not related to other aspects of academic load (e.g., number of academic credits, fall semester grade-point average, cumulative grade-point average, other Friday courses).

**Conclusions:** It seems that female students who are more likely to consume alcohol on Thursday night have made academic scheduling decisions to allow for this experience. These decisions seem to not adversely affect their grade-point average. Findings suggest that changes to the academic calendar to curb alcohol consumption warrant further investigation. (*J. Stud. Alcohol Drugs*, 74, 941-949, 2013)

**Source:** *Journal of Studies on Alcohol & Drugs*  
Submitted by B. Kay Bontrager

## Telephone-Based Self-Change Modules Help Stabilize Early Natural Recovery in Problem Drinkers

Kerstin E.E. Schroder, Jalie A. Tucker, Cathy A. Simpson

**Objective:** Self-guided attempts to resolve drinking problems are common, but little is known about the processes by which supportive interventions of lower intensity might promote resolution. This study investigated how brief supportive educational modules delivered as part of an interactive voice response self-monitoring (IVR SM) system helped stabilize initial resolution among otherwise untreated problem drinkers.

**Method:** Recently resolved problem drinkers allocated to the intervention group of a randomized controlled trial were offered IVR access for 24 weeks to report daily drinking and hear weekly educational modules designed to support resolution. Using data from the 70 active IVR callers, hierarchical linear models evaluated whether module retrieval reduced subsequent alcohol consumption, including high-risk drinking, and whether module retrieval attenuated the effects on drinking of established proximal risk factors for relapse (e.g., urges, drug use, and weekends). The analyses controlled for initial resolution status (abstinence or low-risk drinking).

**Results:** Urges, drug use, and weekends were associated with increased drinking reports on the next IVR call (all  $p$ s < .01), whereas retrieving a module was associated with decreases in next-call drinking reports, including high-risk drinking episodes ( $p$  < .05). Module retrieval, however, did not reduce or buffer the effects of urges on drinking. Findings were similar across initially abstinent and low-risk drinkers.

**Conclusions:** IVR-delivered supportive educational modules may help stabilize initial problem-drinking resolutions, but mechanisms of change deserve more study. The study adds to evidence of the co-occurring negative effects of multiple behavioral and environmental risk factors on the temporal patterning of post-recovery alcohol use. (*J. Stud. Alcohol Drugs*, 74, 902-908, 2013)

**Source:** *Journal of Studies on Alcohol & Drugs*  
Submitted by B. Kay Bontrager

## Risk for Inhalant Initiation Among Middle School Students: Understanding Individual, Family, and Peer Risk and Protective Factors

Allison J. Ober, Jeremy N.V. Miles, Brett Ewing, Joan S. Tucker, Elizabeth J. D'Amico

**Objective:** Because initiation of inhalants at an early age is associated with a range of health and behavioral problems, including an increased likelihood of inhalant dependence (based on criteria from the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition), we conducted discrete time survival analyses to determine the role of time-invariant and time-variant (over five waves) risk and protective factors as well as grade in inhalant initiation among middle school students.

**Method:** The current study uses data from 3,215 students who were initially surveyed as sixth graders in 2008-2009 and were resurveyed in seventh and eighth grades. Students were part of a larger substance use prevention trial conducted in greater Los Angeles. The sample is racially/ethnically diverse (54% Hispanic/Latino, 16% Asian, 14% White, 3% African American) and 51% male.

**Results:** Seventeen percent of youths initiated inhalants during middle school. Higher drug refusal self-efficacy, familism (i.e., values related to family), and parental respect were associated with decreased odds of inhalant initiation. Having a significant adult or older sibling who used substances was associated with increased risk of initiation, but adult influence declined linearly and by the end of seventh grade was no longer a risk factor. Self-rated popularity was associated with inhalant initiation in seventh grade only, and perceived substance use by peers was associated with inhalant initiation in sixth grade only.

**Conclusions:** The influence of adults, siblings, and peers on inhalant use may be strongest in sixth and seventh grade. Interventions to prevent inhalant initiation should target sixth and seventh graders, address influence by family and peers, and provide skills training to improve drug refusal self-efficacy. (*J. Stud. Alcohol Drugs*, 74, 835-840, 2013)

**Source:** *Journal of Studies on Alcohol & Drugs*  
Submitted by C. Albert Alvarez

## Predictors of Dropout in an Outpatient Treatment for Problem Drinkers Including Cognitive-Behavioral Therapy and the Opioid Antagonist Naltrexone

Salla Vuoristo-Myllys, Jari Lahti, Hannu Alho, Juhani Julkunen

**Objective:** This study investigated predictors of dropout in an outpatient treatment program for problem drinking that included individual cognitive-behavioral therapy combined with naltrexone. Specifically, we investigated whether sociodemographic factors, severity of alcohol dependence, history of problem drinking, or intensity of alcohol craving assessed at the beginning of the treatment predicted dropout from an outpatient program among a sample of 372 patients (65% male). We also investigated whether the effectiveness of the treatment (the change in alcohol consumption and symptoms of alcohol craving) or adherence to naltrexone was related to dropout.

**Method:** Predictors of dropout were investigated using an analysis of covariance with the number of attended treatment sessions as an independent variable.

**Results:** Our results demonstrated that the treatment entry factors predictive of dropout were younger age, lower severity of alcohol dependence, better ability to resist and control alcohol use, and lower obsession with alcohol. In addition, those who dropped out were more likely to begin the program by abstaining from alcohol and had lower adherence to naltrexone use than those who completed the program. The length of stay for treatment was not related to change in alcohol consumption.

**Conclusions:** Patients with less severe alcohol-related problems may lack motivation for treatment, specifically cognitive-behavioral therapy and naltrexone. These patients may benefit more from less intensive treatments. (*J. Stud. Alcohol Drugs*, 74, 894-901, 2013)

**Source:** *Journal of Studies on Alcohol & Drugs*  
Submitted by C. Albert Alvarez

## New Final Regulations Issued on Mental Health Parity and Addiction Equity Act of 2008

December 4, 2013

On November 13, 2013, three federal agencies, the Department of Treasury, Department of Labor and Department of Health and Human Services (collectively, "the agencies") jointly published final regulations (the "Final Regulations") implementing the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 ("MHPAEA") and a related set of Frequently Asked Questions. Generally, MHPAEA prohibits group health plans from applying financial requirements (e.g., copays) or treatment limits (e.g., number of annual visits) on mental health or substance use disorder services that are more restrictive than those applied to the group health plan's medical and surgical benefits.

The Final Regulations apply to group health plans and health insurance issuers for plan years beginning on or after July 1, 2014. This means the Final Regulation would be applicable on January 1, 2015 for calendar year plans. The Final Regulations also apply to all individual market insurance, including grandfathered individual market coverage, for policy years beginning on or after July 1, 2014. The Interim Final Regulations issued in 2010 shortly before the Affordable Care Act was passed continue to apply to group health plans until the Final Regulations are applicable.

The Final Regulations make a significant number of important changes to the Interim Final Regulations. Plan sponsors should begin evaluating the Final Regulations soon to determine what plan design changes will be needed. Please see the memo at the following website address:

[http://www.groom.com/media/publication/1319\\_Menal\\_Health\\_Parity\\_New\\_Final\\_Regulations\\_Issued.pdf](http://www.groom.com/media/publication/1319_Menal_Health_Parity_New_Final_Regulations_Issued.pdf)

Source: Groom Law Group Chartered  
Submitted by Ann Ninness

### Words of Wisdom

What lies behind us and what lies before us are tiny matters compared to what lies within us.

*Ralph Waldo Emerson*

## Biden to meet with Newtown families, announce mental health funds

December 10th, 2013 06:00 AM ET

Posted by CNN White House Producer Kevin Liptak

Washington (CNN) - Vice President Joe Biden, an administration point man on reducing gun violence, will meet with families who lost loved ones in the Sandy Hook Elementary School massacre on Tuesday as the one-year anniversary of the shooting approaches.

Biden, who spearheaded an effort in the aftermath of the tragedy to find ways of stopping mass shootings, will discuss new funding for mental health services with the Newtown, Connecticut, families, who have publicly asked for privacy as the December 14 anniversary approaches.

Mental health advocates will also join the meeting, according to a White House official. The \$100 million in new money is a part of recently announced Obama administration mental health push that also placed new rules on how insurance companies cover mental illnesses.

In November, Health and Human Services Secretary Kathleen Sebelius announced her department would begin enforcing the 2008 Mental Health Parity Act, which included the guidelines that insurers treat mental illnesses the same as physical ailments.

Greater attention to mental illness was one of the focuses of Biden's task force, which proposed ways of stemming gun violence. While the President and Biden announced 23 executive actions designed to curb shootings, legislative action failed on Capitol Hill, despite early indications of support.

In particular, a bill that would have required universal background checks on gun sales failed to garner enough support in the Senate. That measure was considered the most likely potential law to gain backing by senators of both parties. Other proposed measures, such as a ban on assault weapons, gained even less support.

Source: CNN Politics Political Ticker  
Submitted by Ann Ninness

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## 2014 ICCS Training January 17-18, 2014 Register Today!

Online: [www.iaapin.org](http://www.iaapin.org)  
By Phone: (317)481-9255

### BENEFITS OF NAADAC/IAAP MEMBERSHIP

- 33 free CE's via NAADAC's web-site: [www.naadac.org](http://www.naadac.org) - (*Medication Management for Addiction Professionals: Campral Series and Blending Solutions*).
- Free access to NAADAC's online Career Center at [www.naadac.org](http://www.naadac.org).
- Assistance with referrals concerning ethical or legal questions or complaints and two free hours of help on a Legal Assistance Hotline provided by NAADAC's liability company with malpractice insurance available through the Van Wagner Group.
- Free subscription to NAADAC's official magazine, *Addiction Professional*, which is published six times annually.
- Peer support and network opportunities through national and state conferences and workshops.
- Reduced rates for continuing education including the qualification course for the U.S Department of Transportation's Substance Abuse Professional.
- Reduced rates for publications such as the *Basics of Addiction Counseling: A Desk Reference and Study Guide*, used by experienced professionals and as a guidebook for preparation for certification exams.
- Access to the *NAADAC News*, the association publication only available to NAADAC members.
- Substantially reduced rates for professional Certification and re-certification as National Addiction Counselor (NCAC) or Master Addiction Counselor (MAC). *Please note that certification is not included in NAADAC membership but is a separate process. (Certification is not a requirement of membership in NAADAC.)*
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