

Becoming an Addictions Counselor

A COMPREHENSIVE TEXT

FOURTH EDITION

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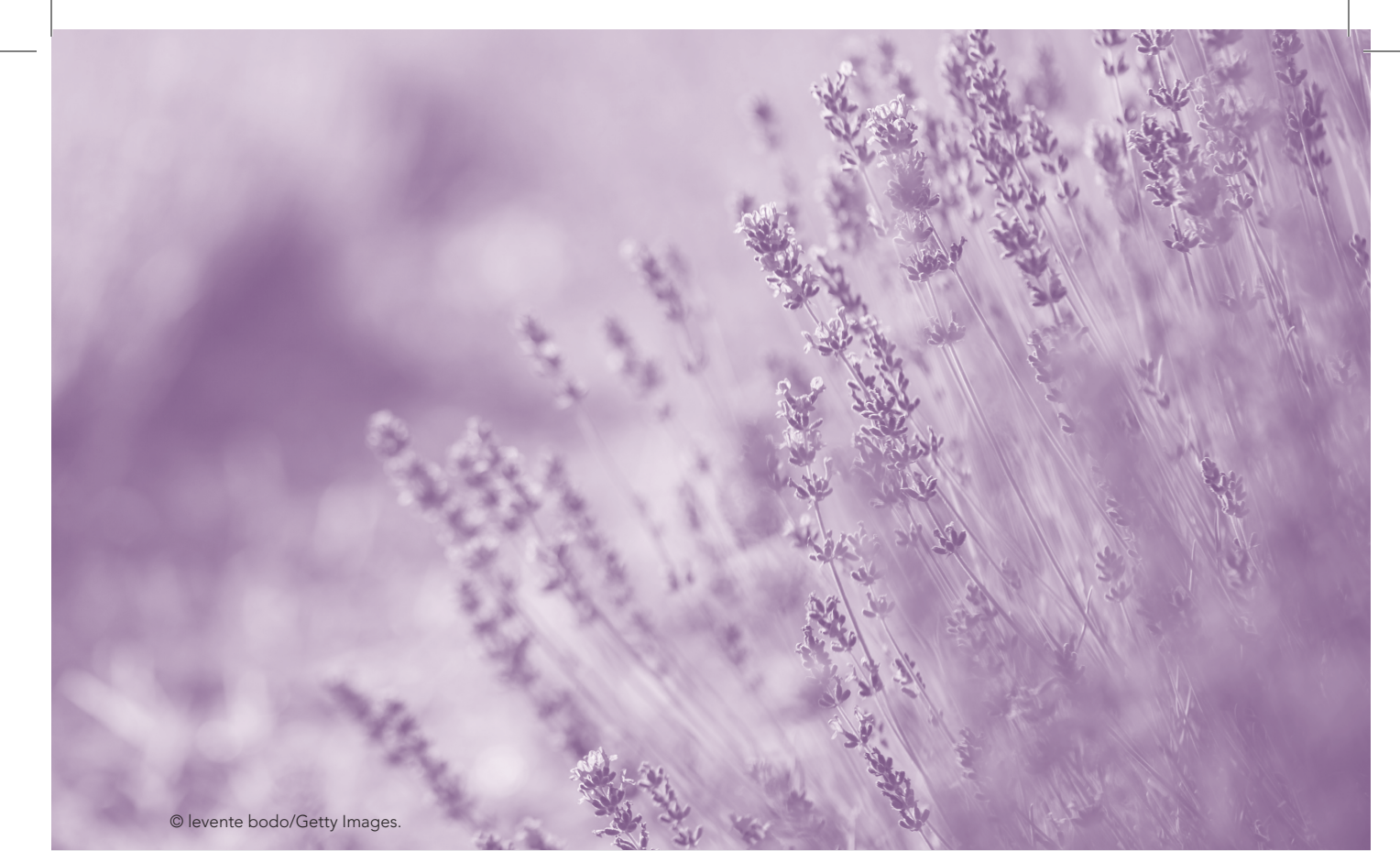
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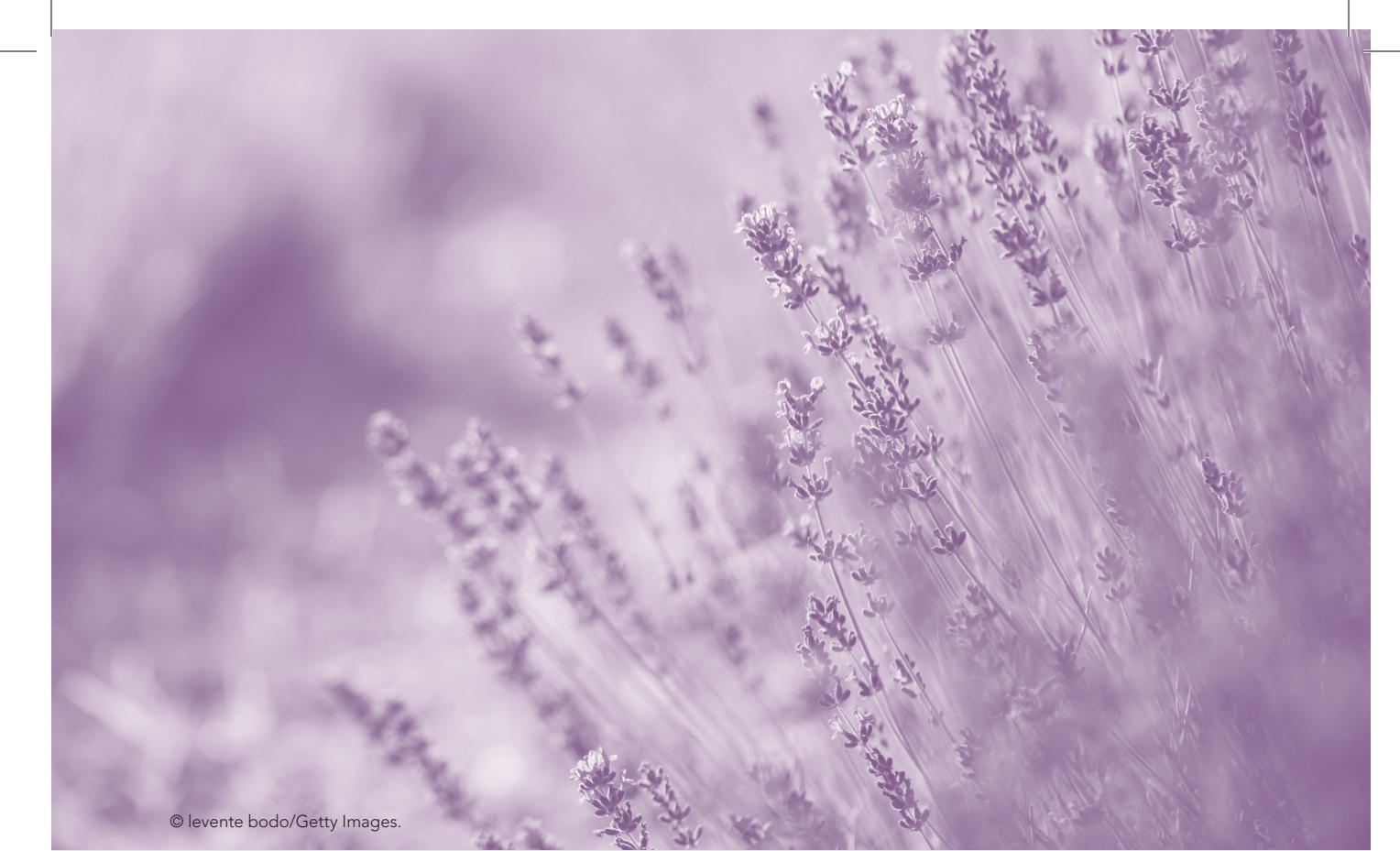
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PREFACE

As we send the Fourth Edition of this text into production, opioid overdosing has become the leading cause of death for Americans under the age of 50, claiming almost 60,000 lives in 2016. 2017 is promising even graver statistics. The need to train and expand the substance abuse workforce is more critical than ever.

This text is designed for undergraduate and graduate curricula in substance use disorder (SUD) studies, counseling, and social work, and for preparation for entry to or career enhancement within the helping workforce.

Tremendous changes are sweeping the field of counseling and treatment of SUDs. It is important to eliminate outmoded preconceptions.

- Harsh, confrontational treatment practices are rapidly becoming obsolete. Treatment is empathetic and collaborative; it is done “with” a client, rather than “to” them, focusing on inherent motivations to change and on client strengths.

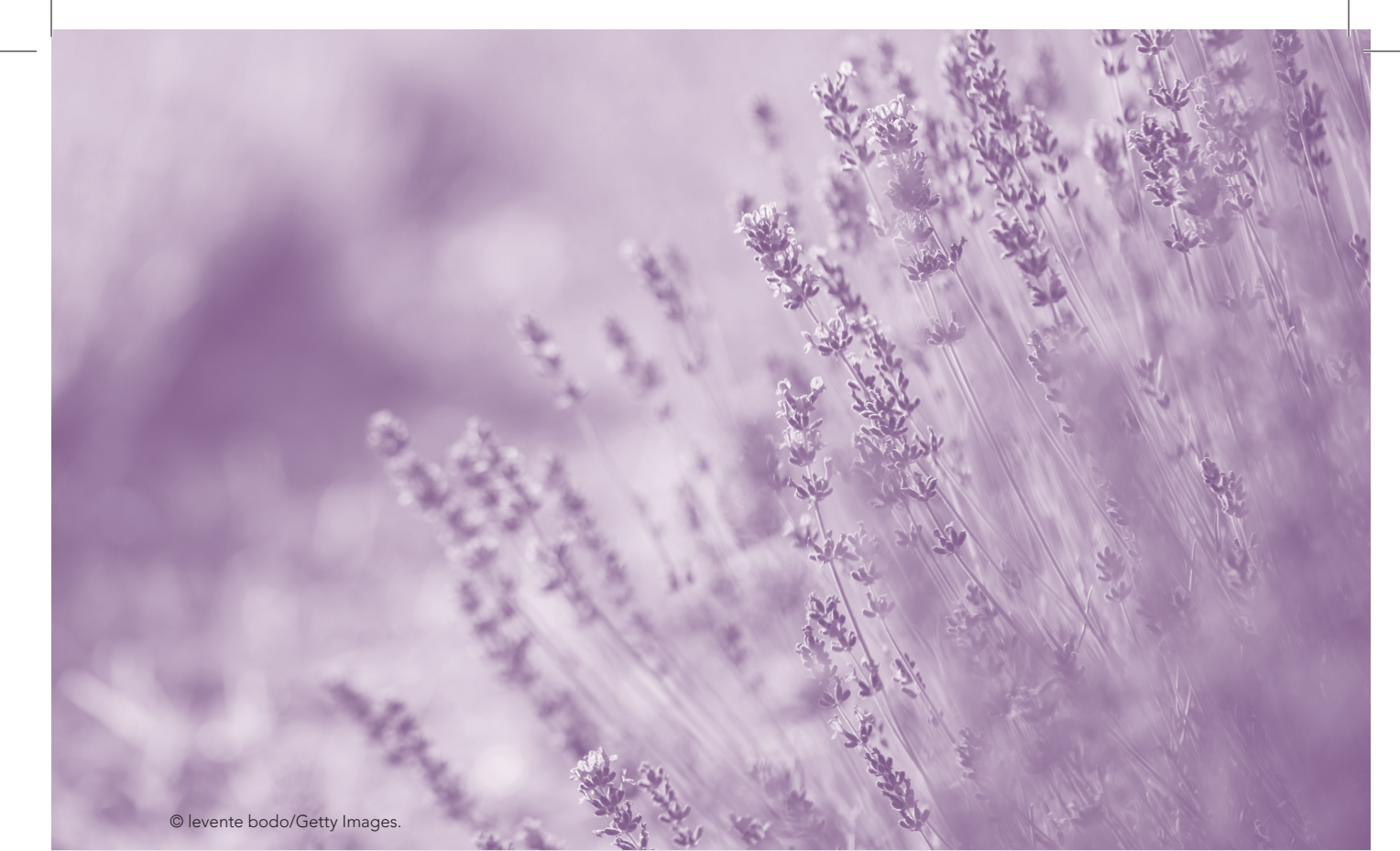
- Substance abusers are much less likely to be forced to accept the label of “addict.” There is a new nonstigmatizing “language of recovery” (chart in Chapter 3.)
- A fixed length of stay in an inpatient rehabilitation facility as “treatment” has been discarded. Most treatment is outpatient, and furthermore, recovery support services are needed for years. New roles and credentials, such as recovery mentors, have come into existence.
- Police departments in many states are diverting substance abusers into treatment rather than arresting them, through alternative-to-incarceration programs.
- Recovery is increasingly celebrated rather than kept hidden. The New Recovery Movement is a new and powerful force, involving many “recovery community organizations.”
- Becoming a counselor simply by being in recovery and attending some workshops is no longer adequate. Most of the workforce has at least a bachelor’s degree in a helping or counseling profession. Half of the states in America have master’s level licensure. The Addiction Studies Accreditation Commission (a coalition of educator and counselor associations) is evaluating addiction studies curricula.

WHAT’S NEW IN THIS EDITION?

- We have upgraded to *Diagnostic and Statistical Manual of Mental Disorders*—5th edition (DSM-5) in our chapter “Co-Occurring Disorders” and wherever the DSM is cited.
- A new chapter, “Sustaining Recovery,” has been added, including topics not previously covered: building recovery capital, mindfulness; trauma informed care; and the third wave of cognitive behavioral therapy, such as the acceptance and commitment therapy and dialectical behavior therapy.
- In our renamed chapter, “Initiating Recovery,” sections have been added on nonstigmatizing language and new police initiatives, such as the Police Assisted Addiction Recovery Initiative or/Gloucester model which get help for substance users rather than arrest them.
- In our chapter on ethics, the professional codes of ethics have been updated and a new section on ethical digital marketing has been included.
- We have included a new section on crisis intervention in our chapter on individual counseling.
- Our chapter on culture supplies more information on the complexities of cultural change and assimilation and how to address these with clients.
- In our chapter on family, we introduce an alternative to the “disengagement” model of Al-Anon and the forceful Johnson Intervention Model—the Community Reinforcement and Family Training system of working with family members.

Perhaps, the most important aspects of our training philosophy are the following.

- We encourage and even insist on *critical thinking* about the assumptions underlying traditional and habitual use of treatment models.
- We insist that counselors meet the unique set of client needs by offering a menu of treatment options rather than a “cookie-cutter” response (Myers 2002).
- We advocate the new collaborative, strength-based modality embodied in the recovery-oriented systems of care.
- We encourage experiential training via structured exercises in the classroom setting.
- Finally, we support recovery advocacy and the celebration of recovery and encourage students and faculty to join recovery community organizations, the Association for Addictions Professionals, and the International Coalition for Addiction Studies Education.



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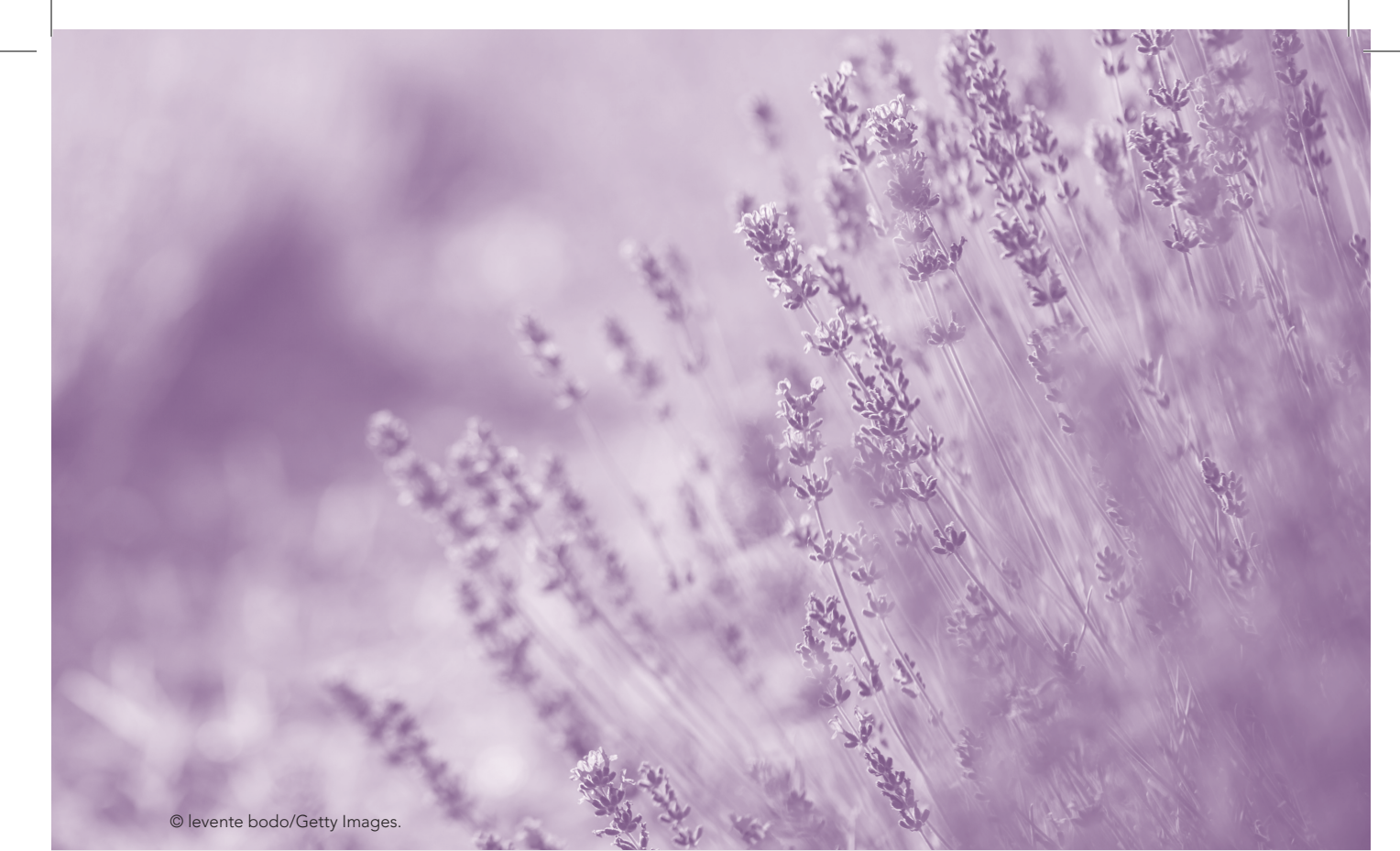
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Norman Salt wishes to thank the New Jersey Prevention Network (NJPN) for allowing him to train counselors and gain their insight and feedback for the last 20 years. I thank my wife Margie for her patience and my daughters and grandchildren (Kelsey, Colin, and CJ).





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Peter L. Myers, PhD, is a former President of the International Coalition for Addiction Studies Education and Emeritus at National Addictions Studies Education Commission. He retired from directing an addictions curriculum and Student/Employee Assistance Program at Essex County College in Newark, New Jersey (1981–2008). He was the Emeritus Editor in Chief of the *Journal of Ethnicity in Substance Abuse* and was on the editorial board of *Substance Abuse*. He is also the coauthor or editor of six texts in the drug- and alcohol-abuse field. He is on the Board of Directors of Columbia Pathways to Recovery, which is a recovery community organization in upstate New York.

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