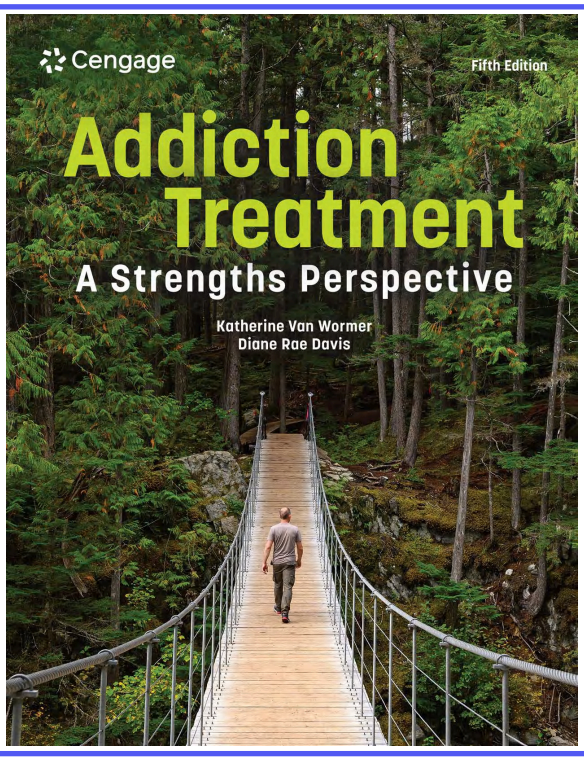


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Dedication

To the frontline workers in the field of addiction, to the men and women for whom substance use disorder (SUD) treatment is not only a profession but a mission, who so often "have been there" themselves, persons who care so much that they may even burn out eventually, but who in the meantime will help save people from the demon that is addiction. We need to keep in mind that for every individual helped, one whole family is spared—from child abuse, violence, bankruptcy. Therefore, with gratitude to the professional helpers and AA/NA sponsors alike, I dedicate my contribution to this book to you.

And, in particular, I dedicate this book to my son, Rupert van Wormer, MSW, Ph.D. who has had extensive experience as a mental health case manager in a housing first, harm reduction program in Seattle and who now is a mental health social worker at the Salem VA Clinic in Oregon.

—Katherine van Wormer

To my family, who support me with love and laughs. This includes Circe the cat, who steadfastly sleeps on my work-in-process every day. Most of all, this book is dedicated to the people who are taking their lives back from addiction and to their heroic journey.

—Diane Rae Davis

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Since the publication of the last edition, between the outbreak of the COVID-19 pandemic and the opioid overdose crisis, the world has changed. Often the solution to one national emergency has unintended consequences related to another. And this is what happened during the lengthy, isolating lockdown. Stress levels mounted, which, in turn, accelerated the opioid overdose death rate. At the same time, the dangerous drug fentanyl appeared on the scene, a potent synthetic opioid with deadly results.

The dual public health crises accomplished what years of social activism had failed to do—they ushered in new public health policies directed at both epidemics. For the one, a mass vaccination, telehealth treatment, and masking campaign was launched, and for the other, the government put political and moral concerns aside and funded life-saving strategies to make naloxone kits readily available and provide fentanyl strips at drug sites for testing. For the first time, the term and philosophy of harm reduction is widely used in White House documents. At the same time, the war on drugs is not yet dead and rears its ugly head in the war on persons found in possession of fentanyl and on those involved in its sales. At the state level, harsh anti-drug laws are being passed in some states, while there are moves toward decriminalization of some psychoactive drugs in others.

Within this altered and mostly positive social climate we are proud to offer a 5th edition of *Addiction Treatment. A Strengths Perspective.* This publication is especially relevant today given exciting research that bolsters the strengths of diverse schools of treatment—12-Step facilitated treatment and motivational interviewing, which were once seen at odds with each other. From our first edition of the text, we have consistently praised the strongpoints of each of these diverse approaches.

Note the bridge chosen for the cover design of this text. Our choice was a bridge to signify our attempt in this book to bridge the gap between the traditional 12-Step approach and the teachings of harm reduction. The bridge also symbolizes a way to cross over water (as in "a bridge over troubled water") or a swamp or a steep decline, as a way of easing or expediting one's travels. In this sense, we can think of a bridge to recovery.

To reflect the temper of the times, we have made the following changes to the text:

- Use of person-first language in the addictions field similar to that used in the fields of mental health and disability treatment,
- The inclusion of diagnostic information throughout the text based on the most recent edition of the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5-TR) (APA, 2022),
- In response to the DSM-5 classification of pathological gambling from its Impulse Control Disorder category to a new category called Substance-Related and Addictive Disorders, gambling disorder is included throughout the text as well as an expanded section in Chapter 6. The unprecedented increase in Sports Betting and Internet Gambling is described in a new section,
- Splitting the overlong chapter on the biology of addiction into two chapters; chapter 3 will now focus only on alcohol use disorder and chapter 4 on other drugs of misuse,
- Chapters 3 and 4 each include detailed sections on prescription medications now widely used in substance use disorder treatment,
- Updated summaries of exciting brain and genome research which advances our understanding of the nature of addition and recovery,
- The latest research validating the effectiveness of the 12-step model for treatment and the proliferation of online mutual help resources as a result of the COVID-19 pandemic.
- Updated descriptions of political developments in the support of harm reduction practices, and the growing acceptance in treatment of harm reduction and strengths-based stategies such as motivational interviewing,
- The social determinants of health, including historical trauma and ongoing discrimination, are updated and recognized for their critical role in determining the pathway to diagnosis, treatment, and recovery,
- New boxed readings written by experts in the field and personal alcoholism infused with the academic information provided,
- Increased content on transgender populations, trauma-informed care,
- New descriptions of current social and cultural meanings and differences attached to gender and how these meanings impact the trajectory of addiction,
- As in the previous edition, all of the content of the text has been carefully updated to reflect scientific advances in the field and in research as well as advances in the conceptualization of the nature of addiction itself.

Organization and Framework

In common with the disease model, this text puts an emphasis on biology as a key factor in understanding the nature of addiction. It is our belief that human behavior can be understood only in terms of its biological, psychological, social, and spiritual components. The biopsychosocial framework, accordingly, has been chosen as the organizing framework for this book. *Biologically,* we will be looking at recent developments in neurobiological and pharmaceutical research related to addictive behavior. From a *psychological* standpoint, we will want to consider motivational and cognitive-based treatment innovations and evidence-based research on treatment effectiveness. And *sociologically,* we always consider the fact that any specific individual who enters into treatment does not live in a vacuum but is both shaped by and a shaper of his or her social and political environment.

Divided into four parts, the first of which is introductory, *Addiction Treatment* includes three core sections that cover the biology, psychology, and social aspects of addiction, respectively. The spiritual dimension is included in the psychological and social parts of the book.

Strengths-Based Therapy

The terminology, ideology, and conceptual framework for this undertaking derive from a strengths perspective. This client-centered approach is compatible with the harm reduction model in that the overriding purpose is to help the client reduce the harm to himself or herself or others. Harm reduction therapy allows for creativity in the design of treatment strategies. Total abstinence from dangerous drug use is certainly not discouraged, nor is total abstinence from alcoholic beverages by those with a genetic predisposition to get "hooked." But starting with "where the client is" rather than where we think the client should be is the basic principle underlying harm reduction. Placing faith in the client's ability to make choices is a related concept.

Basic Assumptions of the Text

Congruent with the biopsychosocial, ecosystems configuration, the perspective advanced in this book is that addiction, to be a viable concept, must be viewed interactionally. Each component of the system, in other words, is seen in constant and dynamic interaction with every other component; reality is rarely linear; cause and effect are intertwined. Related to addiction, the nature versus nurture controversy is resolved through an understanding that steers away from a dichotomized "either–or" type of logic, as seen in the pointless is it nature or nurture arguments, for example. Our preference is for logic of the "both–and" variety. Consistent with this perspective, addiction is viewed as both a biological and a psychosocial phenomenon. There is, further, a spiritual dimension as well. The simplistic, adversarial view of human phenomena leaves us with only partial truths and fierce loyalties that hinder us in our understanding of complexity. To advance knowledge, we need to hear from a multiplicity of voices. That the nature of addiction is infinitely complex will be revealed in the pages of this book. Essential to the study of addiction is a theoretical approach that is eclectic, knowledge that is interdisciplinary, and the personal stories of people who have there. Such an approach is open-minded rather than antagonistic toward diverse models.

Some other basic assumptions that underlie this textbook are:

- Addiction exists along a continuum; many people may be addicted to one substance or activity; one person may be addicted to multiple substances or activities involving risk. (See chapters 1 and 7)
- Much of the criticism concerning various models of addiction (e.g., the disease model, the learning model, and individual responsibility theory) is valid; these models do tend to be unidimensional and narrow, but then, much of the criticism itself is unidimensional and narrow. (See chapter 1)
- There are hereditary tendencies toward addiction, but the development of addiction depends on interaction between the person and the social environment. (See chapters 3, 4, and 12)
- Socioeconomic determinants greatly influence the path into addiction and the possibilities for recovery. (See chapters 2, 12, and14)
- Given the dangerous binge-drinking culture that now dominates our colleges, we need to give consideration to changing the drinking culture in America and question the under-21 public drinking laws. (See chapter 14)
- Evidence from neuroscience offers compelling evidence of brain change following substance use addiction. The notion of addiction as a brain disease is therefore compelling, but the concept of brain injury is accurate as well. (See chapter 4).
- Involvement in mutual-help groups such as Alcoholics Anonymous can be invaluable in enhancing recovery and providing support to family members. (See chapter 10)
- When the focus is on promoting healthy lifestyles and on becoming motivated to change rather than on the substance misuse per se, many clients can be reached who would otherwise stay away. (See chapters 1, 6, and 9)
- The war on drugs is politically and ethically misguided; issues of race, class, and gender define the parameters of this "war." (See chapter 2, 12, and 14)

- Because there will never be a drug-free society, the only pragmatic approach is a public health or harm reduction approach. (A theme throughout the book)
- Addiction counselors who are themselves recovering have some advantages over counselors who "have not been there"; however, this kind of personal involvement is no more essential in this field than in related fields such as health and mental health care (See chapters 1 and 2).
- Addictive behaviors are highly destructive to the family as a system and to each family member within that system; treatment, therefore, needs to include strong family counseling components. (See chapter 11)
- Professional training in counseling skills and neurobiological and psychosocial knowledge is just as essential for work in this field as it is for comparable fields of practice.
- Consistent with recent research on recovery, treatment effectiveness is most accurately measured in terms of the reduction in harmful health-related practices rather than by total abstinence from drinking and/or other drug use.

Addiction Treatment: A Strengths Perspective is intended for use as a primary text in courses related to substance misuse or as a secondary text in courses, graduate or undergraduate, related to health, social work, mental health, offender rehabilitation, and family counseling. Suffused with case examples and summaries of the latest scientific research, this book is directed to many types of practitioners in the addictions or related fields—from those who work with people who are having problems with alcohol, drugs, or gambling and their families on a day-to-day basis to those who rarely see a person struggling with addiction but who are in positions of supervision, management, and policymaking related to addiction issues.

In the same way that hope is offered by counselors to even the seemingly most wretched persons with addiction problems, we wish to offer hope (and appreciation) to the practitioners who dedicate their lives to work with those for whom other practitioners have little empathy or use. The hope that we would offer is ingrained in a strengths perspective itself. An approach that seeks resilience in clients and encourages workers to focus on possibilities rather than problems should go a long way toward preventing exhaustion and burnout in a field that is often characterized by both (See Saleebey, 2012). Although a perspective geared to seek the positives in a person struggling with addiction problems would have been foreign to the addiction treatment in earlier years, and few of the tough-minded counselors talked of self-esteem or empowerment, these counselors of the old school had a mission, and they cared in ways it would be hard to imagine. Their legacy should be recognized. Working with people who seemingly are bent on self-destruction is never easy. We constantly have to remember that the phoenix rose from a pyre of ashes, not a soft pillow, and that it is in those ashes that we find the embers of hope and change. That is what this book is about.

A word from Katherine van Wormer, MSSW, Ph.D., Professor Emerita of Social Work, University of Northern Iowa, Cedar Falls.

Being from an alcoholic background (my father) and an alcoholic city (New Orleans), I had no desire to do substance misuse counseling initially. But then in the 1980s, as a sociologist equipped with a brand new degree in social work, I ventured to Washington State in search of a change in scenery and a job. After an inauspicious beginning in community home health and hospice, I found myself working at the community alcoholism treatment center in Longview, Washington. This treatment center was fairly laid back as far as addiction treatment centers go. Unlike my previous job, the work was fun and highly creative, and the clients got progressively better instead of progressively worse with terminal health conditions. The two-year outpatient program brought palpable results that were gratifying to see.

About five years later, I found myself in another scenic part of the world--Norway. As part of a mini-migration of Americans to Norway and Sweden to bring the Minnesota Model or 12-Step-based treatment, I trained counselors in group skills and actually learned the rudiments of the American disease model from a fellow American in Norway. Although the inevitable personnel crises abounded in a program that was run by ex-clients with limited periods of sobriety, I again witnessed the miracles of recovery and experienced the joy of seeing lives on the mend. In my public relations capacity, I spoke through translators to various community groups about alcoholism as a personal disease and as a family disease. Back in the U.S., I taught social work and coordinated the addictions treatment certificate at the University of Northern Iowa. Today, I am retired and live in Madison, Wisconsin to help in the care of grandchildren. Relevant books I have co-authored include *The Maid Narratives: Black Domestics and White Families in the Jim Crow South* (2012, LSU Press, *Human Behavior and the Social Environment, Macro Level* (2017, Oxford University Press), and *Women and the Criminal Justice System* (5th ed.) (2022; Routledge).

A Word from Diane Rae Davis, MSW, Ph.D., Professor Emerita of Social Work, Eastern Washington University, Cheney, Washington

It seems that my entire life has been intertwined with one addiction or another. If you looked at my genogram, you would see addiction all over it and the subsequent deaths, illnesses, and divorces that follow. You would also see pockets of recovery. My own recovery from alcoholism was a terrible struggle. It took 3 years to get clean and sober from the time I was absolutely convinced I was an alcoholic. When I finally did, I had no job, no husband, no home to live in, and a son in my care. Yet my