

Technical Information

SAMHSA

Substance Abuse and Mental Health
Services Administration

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LIVE

This webinar is now live.



It is being recorded.



Please remain muted.

Welcome

Central East PTTC Webinar

“Stigma the Gift that Keeps on Giving”

Residual Effects of Stress During the Recovery Process from Active Substance Use

The Central East PTTC is housed at the Danya Institute in Silver Spring, MD

Oscar Morgan
Executive Director

Deborah Nixon Hughes
Project Director

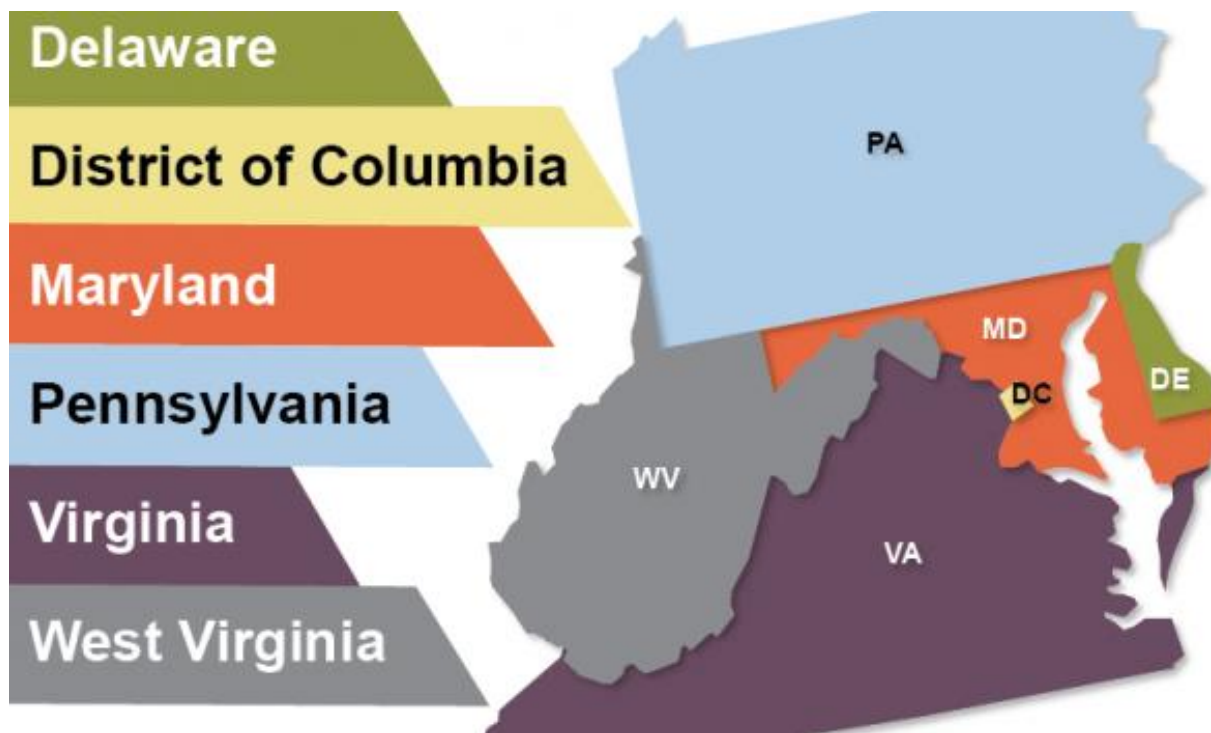


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Central East Region

SAMHSA REGION 3



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The use of affirming language inspires hope.

LANGUAGE MATTERS.

Words have power.

PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.

ethnicity spirituality
orientation practices
normalize experiences expression
standard create
Ethnic stories terror identity
race share injustices
change care Matter shootings
Racial education
space
seem normal cultural
powerful
NASW self Black
gender affected Lives hate
Diversity uncertainty
sexual advocacy
religious competency
humility



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PTTC Mission



To Strengthen the Capacity of the Workforce

1

To Deliver Evidence-Based Prevention Strategies

2

Facilitate Opportunities for Preventionists to Pursue New Collaboration Opportunities, which include Developing Prevention

3

Partnerships



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Services Available



Online Courses



Technical Assistance



Skill Based Training



Webinar



Toolkits



Facilitate Prevention Partnership & Alliances



Research Learning Collaborative



Newsletter



Technology Driven Models



Literature Searches



Virtual Meeting



Research Publication



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Other Resources in SAMHSA Region 3



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ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



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MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



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Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

“Stigma the Gift that Keeps on Giving”

Residual Effects of Stress During the Recovery Process from Active
Substance Use

Part 1

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June 11, 2022

SAMHSA
Substance Abuse and Mental Health
Services Administration

The logo features a stylized red swoosh above the text "THE DANYA INSTITUTE".
THE DANYA INSTITUTE

Presenters



Demetrie Garner



Shawn Colvin



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Shawn Colvin has served as the Treatment Services Manager and Treatment Coordinator at the Helping Up Mission for the past ten years, directly impacting over 2,000 lives. Twenty-two years in active addiction provided valuable experiences and lessons that now inform his work in helping others. Currently, he is in his twelfth year of clean and sober recovery.

He has acquired numerous certifications, including Certified Peer Recovery Specialist (CPRS), Recovery Peer Supervisor (RPS), and Recovery Coach Professional Facilitator (RCPF).

In his role as Treatment Services Manager, Shawn collaborates with mission executives and partner organizations, including Johns Hopkins Medical Center and Greater Baltimore Medical Center. He oversees and manages all aspects of resident treatment and care, which include everything from Medical Assisted Therapy (MAT) to initial Peer Recovery Coaching.

Aside from his management role and coordinator responsibilities, he serves as the on-site RCPF, training individuals toward the goal of becoming a CPRS.

In both his professional and personal roles, Shawn's goal is always to share his experience, strength, and hope with his clients, students, and colleagues.

Demetrie Garner has been active in his recovery for over five years. After multiple arrests, incarcerations, homelessness, and countless overdoses, the recovery process promoted a new way to live. Accepting servitude as a way of life, he continues to work with people with high-risk behaviors as the Regional Project Coordinator for the Hepatitis C (HCV) micro-elimination project at MedStar Health Research Institute and MedStar Health. His role intersects with patient navigation, liaison to specialist providers, principal investigator assistant, and project coordination. Before his current role, he was promoted from MedStar Health as a Peer Recovery Specialist in substance use disorders at one of the largest emergency departments in Maryland. Having worked firsthand with substance use populations and being in active recovery, he is positioned to access and provide evidence-based lived and holistic approach experience to fill the gaps in our structured recovery process for individuals. As a University of Maryland at Baltimore County (UMBC) graduate, he is now pursuing his master's in public policy with a concentration in healthcare. Recently, he has accepted board membership at The Helping Up Mission, a non-profit servicing men, women, and children experiencing homelessness and substance use in Baltimore

Course Description

While many intricate parts develop a positive outcome to recovery, identifying triggers that cause stress is the first step to a continuous, healthy recovery. Stigma can often become the conduit for environmental and emotional triggers. It is crucial to challenge and dismantle the stigmatizing attitudes and beliefs surrounding addiction and the recovery process. As we unpack the association of stress and triggers, we will close the loop on the missing link of dismantling the negative attitude of doubt facing the newcomer in recovery.

Learning Objectives

1. Recognize the role of stigma as a potential trigger for stress in individuals in recovery.
2. Understand the importance of identifying triggers that cause stress during recovery.
3. Investigate the various ways in which stigma can act as environmental and emotional triggers.
4. Consider how dismantling stigma can contribute to a healthier and more successful recovery.



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Which animals are the best: dogs or cats?



- Dogs 🐕
- Cats 🐈



How to participate:

- Scan the QR code from a mobile device OR
- Click on the link in the chat OR
- Go to menti.com and enter the code at the top of this slide.

Stigma is a set of negative attitudes and stereotypes that can create barriers to treatment and make these conditions worse

- The binding factor of substance use that prevents recovery

Different Forms of Stigma

- Public Stigma



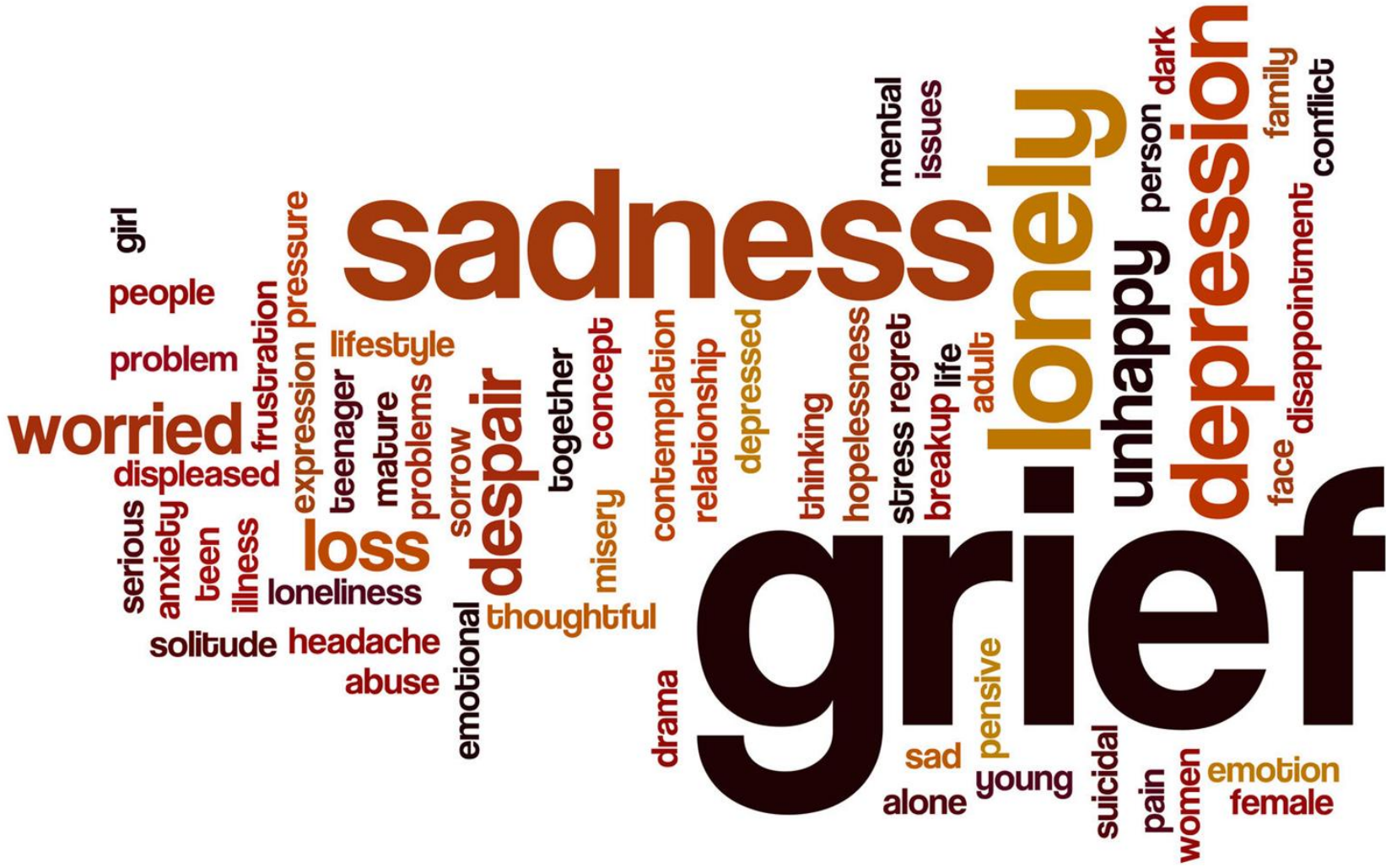
- Self Stigma



- Institutional Stigma



Stigma Volkow ND. [Stigma and the toll of addiction](#). *New England Journal of Medicine*. 2020;382(14):1289-1290. doi:10.1056/nejmp1917360



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Emotional and Psychological Effects of Stigma

Shame
+
Guilt = Isolation



An excess of shame undermines recovery; whereas enhanced self-esteem, hope, and inspiration facilitates recovery

Hill JV, & Leeming D (2014). Reconstructing 'the alcoholic': Recovering from alcohol addiction and the stigma this entails. *International Journal of Mental Health and Addiction*, 12, 759–771. 10.1007/s11469-014-9508-z
[\[CrossRef\]](#) [\[Google Scholar\]](#)





- Dismantling Stigma in Self
- It Takes A Village
- It's A Marathon Not A Sprint



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The Role of Stigma as a Potential Trigger for Stress

- Demetrie-“The Time I had a boil that landed me in the ER”

- Shawn- “ When I first got clean”



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Mentimeter Activity

Join at menti.com | use code 3849 7131



How do you define triggers and what can cause them?

All responses to your question will be shown here

Each response can be up to 200 characters long

Turn on voting in Interactivity to let participants vote for their favorites

How to participate:

- Scan the QR code from a mobile device OR
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Definition of Trigger- a stimulus that elicits a reaction

What constitutes a trigger

- Emotional
- Environmental
- Situational
- Physical

Identify Triggers

- Self-reflection
- Therapeutic techniques
- Support Groups

Managing Triggers

- Coping Strategies
- Preparation
- Stress Management

APA dictionary (2019). APA dictionary of Psychology. Available online at: <https://dictionary-apa-org.proxy-bc.researchport.umd.edu/trigger>



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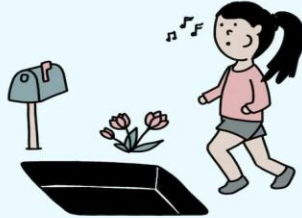
NOT A TRIGGER

It's normal to feel upset, anxious, or extremely uncomfortable when we encounter difficult content. Having these strong reactions is normal and learning to regulate them is part of healthy emotional development.



TRIGGER

Trauma triggers are different. They often include a loss of a person's sense of time, space, and/or self. Emotion is amplified, completely muffled, or sometimes seemingly unrelated to a situation. Triggers are like a TRAPDOOR in the brain.



Common Triggers In Recovery

- Identification of Triggers Specific to the Recovery Process.
- Can I See The Warning Signs? Impact of Triggers on Recovery
- My Past Can Be Used As Indicators To Keep Me Healthy.



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Mentimeter Activity

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SCAN ME

How much do you agree with the following statement?

Strongly Disagree

We can become conditioned to living in stress.

Strongly Agree



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- ❖ How Do I Use My Stress As A Tool For My Recovery?
- ❖ Parameters, Parameters, Parameters
- ❖ See Something, Say Something



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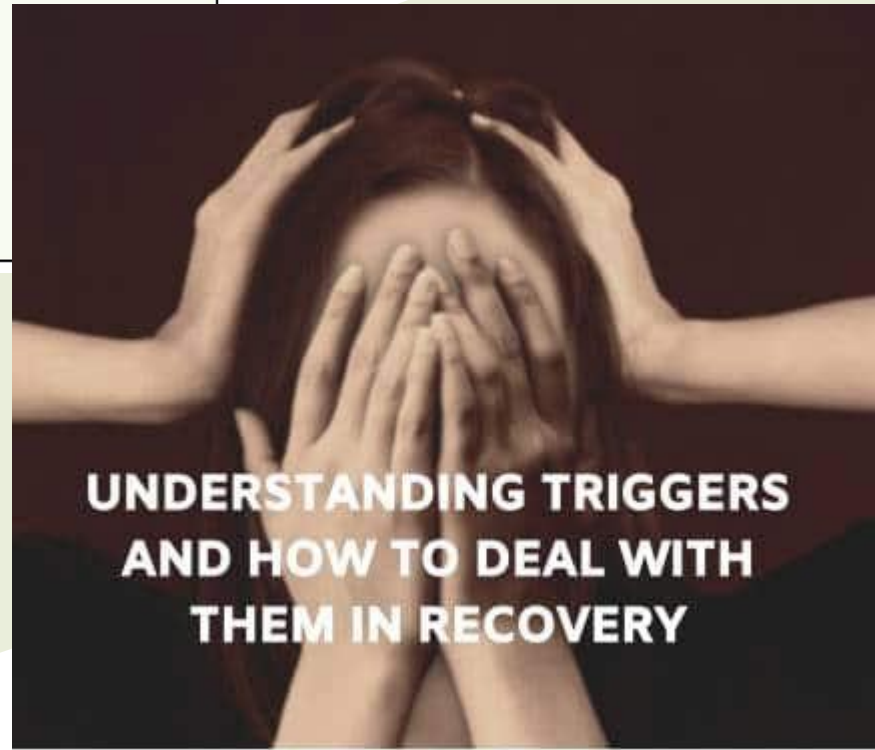
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STRESS FIRST AID MODEL



Seven Cs of Stress First Aid:

- 1. CHECK**
Assess: observe and listen
- 2. COORDINATE**
Get help, refer as needed
- 3. COVER**
Get to safety ASAP
- 4. CALM**
Relax, slow down, refocus
- 5. CONNECT**
Get support from others
- 6. COMPETENCE**
Restore effectiveness
- 7. CONFIDENCE**
Restore self-esteem and hope



- I Can Only Use What I have
- Knowledge Is Key

Consider how dismantling stigma can contribute to a healthier and more successful recovery

Education and awareness

- Public Education Campaigns
- Training for Healthcare Providers
- School Programs

Community Support

- Peer Support Programs
- Family Education
- Community Events



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Personal Stories with Mental Health Integration

- **Testimonies from People in Recovery**
- **Integrated Care Models:**
- **Trauma-Informed Care**
- **Holistic Approaches**



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Advocacy and Education

- **Empowering Peer Advocates**
- **Recovery Advocacy Movements**



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- New Lifestyle Breed New Habits
- The Benefits of Dismantling Stigma That Causes Triggers



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Small Group Discussion



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Instructions

- Turn on your camera if you are willing and able
- Designate a notetaker
- Read through the case study
- Discuss the case study questions
- The notetaker should type up a short summary of the discussion/group answers to the questions
- The notetaker pastes their summary in the zoom chat after the breakout session ends



Case Study

Tyrone, a 35-year-old African American male, endured neglect as a child and grew up in foster care, leading him to start using drugs and alcohol at an early age. Despite numerous unsuccessful rehab attempts, he began a Suboxone program late last year. However, Tyrone's network consists mostly of men unfamiliar with maintenance-based treatment (MBT) and unsupportive of it, causing him to keep his treatment a secret due to their negative attitudes towards MBT. As a result, Tyrone has withdrawn from his network functions and support groups. How does his network perpetuate Tyrone's stigma, and how can he address their stigmatizing practices that leave him isolated, akin to his experiences in foster care? Moreover, how has Tyrone responded to their stigma by erecting his barriers, and what are some possible strategies to overcome his dilemma?

- Turn on your camera if you are willing and able
- Designate a notetaker
- Read through the case study
- Discuss the case study questions
- Notetaker: type up a short summary of the discussion/group answers to the questions
- The notetaker pastes their summary in the zoom chat after the breakout session ends

Tyrone, a 35-year-old African American male, endured neglect as a child and grew up in foster care, leading him to start using drugs and alcohol at an early age. Despite numerous unsuccessful rehab attempts, he began a Suboxone program late last year. However, Tyrone's network consists mostly of men unfamiliar with maintenance-based treatment (MBT) and unsupportive of it, causing him to keep his treatment a secret due to their negative attitudes towards MBT. As a result, Tyrone has withdrawn from his network functions and support groups. How does his network perpetuate Tyrone's stigma, and how can he address their stigmatizing practices that leave him isolated, akin to his experiences in foster care? Moreover, how has Tyrone responded to their stigma by erecting his barriers, and what are some possible strategies to overcome his dilemma?

Discussion:

- How might Tyrone's early experiences of neglect and foster care have influenced his susceptibility to substance use and addiction?
- In what ways do you think Tyrone's childhood experiences impact his current approach to recovery and trust in support systems?
- How does Tyrone's network perpetuate stigma against maintenance-based treatment (MBT)?
- What are the psychological impacts of this isolation on Tyrone's mental health and recovery?
- If you were in Tyrone's position, how would you handle the stigma from your network?

Q & A

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Contact Us



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Prevention Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

a program managed by



Central East PTTC website:
www.pttcnetwork.org/centraleast

Danya Institute website:
www.danyainstitute.org

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