

# Welcome to The Rural!

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## General Information

### Messages or Program Updates

Please check the message board outside of the Great Hall for any last minute updates to the program, including location changes, cancellations, and additions. This information will also be shared in the Cvent app. Messages for other attendees can be left at the information desk or shared within Cvent.

### Meals

This year, conference breakfast will be hosted in the Great Hall. Lunch will be in the Mere Price Commons building, and dinner will be provided only where indicated on the schedule. Please wear your name badge at lunch, as it is your meal ticket. Any dietary restrictions not already communicated to UW-Stout staff should be declared as soon as possible. For recommendations on where to eat dinner on days it is not provided, please ask event staff.

### Emergencies

In case of emergency, please call 911. UW-Stout police will be notified of any 911 calls. They are also available at (715) 232-2222

### Parking

Parking is available in UW-Stout lot #4 (1400 Broadway St. S Menomonie, WI). If you receive a parking ticket, please contact campus police at the number above.

### Lost and Found

Lost and found items will be held at the Registration desk for pickup, and information about lost and found items will be shared via the Cvent app. Unclaimed items will be held by Continuing Education and Conferences through the close of on demand viewing.

### On Campus Internet Access

Connect to the StoutGuest wireless network. The network will prompt you to enter your email address, but you will not need a password.

### Non-Smoking Policy

Please note that smoking is not allowed within any University of Wisconsin-Stout buildings or patios.

### On Campus Housing

Guests staying on campus will be in the McCalmont Residence Hall. Please see your email for information on checking into on campus housing. Residence Hall check out is at 12:00 P.M. on either June 11 or June 12. Information on checkout procedures will be provided the day before you check out of your dorm. There is a \$50 fee for keys not returned at checkout.

### Conference App

The virtual elements of The Rural, including on demand viewing, will be handled via a software called Cvent. Cvent has both an app and a website where attendees can join message boards, watch live or recorded sessions, and receive notifications from event planners. To access Cvent from your phone, please visit the app store and download the **Cvent Events** app. Within the app, search for "2026 National Rural Institute on Alcohol, Drugs, and Addictions" and download the event. Upon opening the event, the app will ask for your name and the email you used to register for the event. Once you enter this information, it will email or text you a code to confirm your information, and you will be able to access the full event! To access Cvent from your computer, visit <https://cvent.me/wqVgxN> (case sensitive). When prompted, enter your name and the email you used to register. The system will send you an email with a code to enter, and you will be able to use that to log in.

If you have any questions about this, please visit **NRADAN.org/Cvent** or ask event staff at the registration table. If you would like to practice watching a session on demand, Harold Hughes's speech "Bringing Excellence to Rural America" will be available on demand beginning Monday, June 8.

### CEUs

CE Credit/Continuing Education Units (CEUs) are available for the in person, virtual, and on demand portions of The Rural through NAADAC. On demand viewing will be available through September 1, 2026.

**In person CEU verification** is done via sign in sheets in each room. Please be sure to sign in for every session you attend to be sure you get credit for all of them.

**Virtual CEU verification** is done automatically through Cvent. CEU certificates will be distributed by mid September. If you need official CEU verification before September, please contact [revoirs@uwstout.edu](mailto:revoirs@uwstout.edu)

# At-a-Glance Schedule

## Sunday, June 7, 2026

2:30–6:00 p.m.	Conference Check In
5:30–6:30 p.m.	Pre-Conference Social
6:30–8:45 p.m.	Welcome & Keynote 1

## Monday, June 8, 2026

7:30–8:45 a.m.	Breakfast in the Great Hall
8:00–8:20 a.m.	NRADAN Board Presentation
8:30–8:45 a.m.	Welcome & Daily Awards
8:45–9:45 a.m.	Keynote 2
10:15–11:15 a.m.	Part 1: Tracks 1 – 4
11:30 a.m.–12:30 p.m.	Part 2: Tracks 1 – 4
12:30–1:45 p.m.	Lunch in Price Commons
1:45–2:45 p.m.	Part 3: Tracks 1 – 4
3:00–4:00 p.m.	Part 4: Tracks 1 – 4
3:30–4:30 p.m.	Snack Break
4:30–5:30 p.m.	Special Topics 1 – 4

### Monday Night Activity: Barbeque Dinner

Join us outside the Memorial Student Center (or, if it's raining, in the MSC terrace) to relax after the first full day of the Rural! If needed, the moderator in your special topic will let you know where to go.

## Tuesday, June 9, 2026

7:00–8:45 a.m.	Breakfast in the Great Hall
7:30–8:30 a.m.	Open Board Meeting
8:30–9:45 a.m.	Keynote 3
10:15–11:15 a.m.	Part 1: Tracks 5 – 8
11:30 a.m.–12:30 p.m.	Part 2: Tracks 5 – 8
12:30–1:45 p.m.	Lunch in Price Commons
1:45–2:45 p.m.	Part 3: Tracks 5 – 8
3:00–4:00 p.m.	Part 4: Tracks 5 – 8
3:30–4:30 p.m.	Snack Break
4:30–5:30 p.m.	Special Topics 5 – 7

### Tuesday Night Activity: Community Band Concert

We're headed to Wilson Park (800 Wilson Ave) for an outdoor concert!

The concert starts at 7:30 p.m., and a local nonprofit will have treats for sale.

## Wednesday, June 10, 2026

7:30–8:30 a.m.	Breakfast
8:30–8:45 a.m.	Welcome & Daily Awards
8:45–9:45 a.m.	Keynote 4
10:15–11:15 a.m.	Part 1: Tracks 9 – 12
11:30 a.m.–12:30 p.m.	Part 2: Tracks 9 – 12
11:30–1:45 p.m.	Lunch in Price Commons
1:45–2:45 p.m.	Part 3: Tracks 9 – 12
3:00–4:00 p.m.	Part 4: Tracks 9 – 12
3:30–4:30 p.m.	Snack Break
4:30–5:30 p.m.	Special Topics 8–10

### Wednesday Night Activity: Variety Show!

Relax with old friends, make new ones, and show off your skills at the Variety Show hosted by Rictus Grin!

The Show starts at 7:30 p.m. in the Terrace. Heavy appetizers will be provided.

## Thursday, June 11, 2026

7:30–8:15 a.m.	Breakfast in the Great Hall
8:15–8:30 a.m.	Welcome & Daily Awards
8:30–9:45 a.m.	Special Topics 11 – 13
10:00–11:30 a.m.	Closing Remarks & Keynote 5

# Sessions at a Glance

A note on conference structure:

Some sessions at The Rural are grouped into tracks. The disparate parts of these tracks build on each other, so while you don't have to stay in one track all day, you might learn more if you do!

## Monday, June 8, 2026

Track 1: Medical Topics	Ballroom A
Track 2: Grant Writing and Fund Raising Survival School	Ballroom C
Track 3: Out of Control? Understanding Sex, Trauma, Addiction & Sexual Wellness	Cedar/Maple
Track 4: At the Point of Risk: Understanding Gambling Use Disorders	Oakwood
Special Topic 1: Faith, Community, and Recovery: Leveraging Spirituality in Recovery	Cedar/Maple
Special Topic 2: Comprehensive Assessments	Ballroom C
Special Topic 3: Addiction, Recovery and medication	Oakwood
Special Topic 4: Embracing Creativity in Recovery	Ballroom A

## Tuesday, June 9, 2026

Track 5: Substance Potpourri	Ballroom A
Track 6: The Family's Journey Through Change and Conflict	Ballroom C
Track 7: LGBTQIA+ Topics	Cedar/Maple
Track 8: Indigenous People Improving	Oakwood
Special Topic 5: Behind Closed Doors: The Reality of Women and Gambling Harm	Cedar/Maple
Special Topic 6: Becoming a supervisor: for counselors and therapists	Ballroom A
Special Topic 7: Crossing Generations in the Workplace: A Collaborative Learning Journey	Ballroom C

## Wednesday, June 10, 2026

Track 9: History of the 12 Steps and Alcoholics Anonymous. One Man's Journey	Ballroom A
Track 10: Ethical Conflict, Moral Injury, and Value Recovery: A Pastoral Model	Cedar/Maple
Track 11: Overview of Trauma Informed Treatment	Ballroom C
Special Topic 8: 12 Steps Beyond AA	Cedar/Maple
Special Topic 9: Understanding and Working with Loss in the Context of SUD	Ballroom C
Special Topic 10: Strengthening Clinical Supervision: Strategies for Rural Success	Ballroom A

## Thursday, June 11, 2026

Special Topic 11: Responding to co-occurring cognitive impairment in SUD treatment.	Ballroom A
Special Topic 12: Working with Indigenous Populations	Cedar/Maple
Special Topic 13: Rural Poverty	Ballroom C

# Plenary Sessions: MSC Great Hall

## **Positive Psychology and the Impact in a Rural Community**

**Desiree Grin, Ph.D**

**Sunday, June 7 | 7:20 p.m. – 8:20 p.m.**

Dr. Grin’s keynote will explore the science of human strengths, resilience, and well-being, focusing on practical strategies to improve mental health, personal growth, and overall life satisfaction. Participants will learn how mindset, gratitude, emotional intelligence, optimism, and meaningful relationships contribute to thriving in both personal and professional settings. The presentation highlights evidence-based approaches for building resilience, reducing stress, and creating healthier environments that support success and well-being. Attendees will leave with actionable tools to enhance motivation, strengthen coping skills, and foster a more positive and purpose-driven life.



## **Addiction in the Headlines**

**Dr. Kirk Moberg**

**Monday, June 8 | 8:45 a.m. – 9:45 a.m.**

The field of addiction medicine continues to evolve rapidly on a range of fronts. We continue to develop a greater depth of understanding regarding the nature of the disease as well as gain an appreciation for varying approaches to treatment. This presentation will survey some of the recent developments in the field of addiction medicine that have made the headlines in both the medical literature and the popular press.



# Plenary Sessions: MSC Great Hall

## **Stigma Where It Hurts Most: Changing Culture Around Behavioral Health and Justice Involvement in Rural Communities**

**David Dawdy, MA, LLP, CCHP**

**Tuesday, June 9 | 8:45 a.m. – 9:45 a.m.**

Rural substance use treatment programs are often on the front lines with people who have been repeatedly incarcerated, stigmatized, and written off as non compliant or hard to engage. This presentation explores how stigma, whether toward people with substance use disorders, mental health disorders and and justice involvement doesn't just live in individual attitudes but is baked into policies, workflows, and everyday language. Drawing on experiences from correctional behavioral health and rural systems, we will look at how culture shows up in documentation, rules, handoffs, even the words we use; and how small shifts can have outsized impact on safety, engagement, and recovery.

Rather than relying on policy or funding fixes, this session focuses on practical, trauma informed strategies that leaders, supervisors, and clinicians can put into practice immediately. We will examine real world examples of teams that have changed how they think and talk about stigmatized individuals, and how peer support and lived experience roles can become powerful engines for culture change instead of token add ons. Participants will leave with concrete language tools, supervision practices, and simple "culture checks" they can use to reduce stigma and build more hopeful, recovery oriented environments in even the most challenging rural and correctional settings.



# Plenary Sessions: MSC Great Hall

## **Who Is Worth Treating? Rural Addiction Care, Collective Power, and the Fight for Equitable Access**

**Gus Raymond, tLMHC, CADC, NCC**

**Wednesday, June 10 | 8:45 a.m. – 9:45 a.m.**

Rural addiction professionals navigate impossible resource gaps, shifting political landscapes, and systems that were often built for someone else's population. This keynote examines the question that runs underneath all of it: who actually gets care — and who doesn't? Drawing on nearly a decade of direct practice in community mental health, family treatment court, and rural school-based prevention, presenter Gus Raymond explores how the moral lens that has always distorted addiction care keeps regenerating in new forms — and how rural providers are uniquely positioned to dismantle it.



This is not a keynote about barriers. It's about power — the power that already exists in this conference, in our agencies, in our professional affiliates, and in our communities when we rely on each other like the neighbors we are. Participants will leave with a framework for understanding how culture gets built and rebuilt in small systems, and with concrete suggestions for direct action: from clinical practice to agency advocacy to legislative engagement through organizations like NAADAC and NRADAN. Come ready to think, to feel, and to leave with direct actions to take home.

## **Channeling Harold Hughes: How We Move Forward**

**Dee Owens**

**Thursday, June 11 | 10:30 a.m. – 11:30 a.m.**

If we think it's difficult today, let me tell you how it was for Senator Hughes! We can learn from his example about how to carry forward with purpose and intent — and how to enjoy the ride. Come along for this glimpse into the past and how it informs the present and our path forward as we serve our clients and care for ourselves.



# Institute Tracks: Monday

**Monday, June 8, 2026**

## **Track 1: Medical Topics**

Room: Ballroom A

Speaker: Dr. Kirk Moberg

The medical impact of addictive disorders continues to change. Medical access can be limited in rural communities putting this population at particular risk for adverse outcomes.

### **Part 1: Chronic Pain**

Chronic pain is much more than just acute pain that lasts a long time. It represents a point at which pain is no longer just a symptom but rather the disease itself. This session will review the physiology, classification and treatment paradigms of chronic pain.

### **Part 2: Pain and Addiction**

There is considerable correlation in patients who experience both addiction and chronic pain. This session will explore this correlation from both a physiologic and clinical perspective.

### **Part 3: Gambling Disorder**

A Review Gambling Disorder was added to the section on addictive disorders in the DSM-5 over ten years ago. It is the process addiction that is probably the best understood but many gaps in our understanding remain. This session will provide an up-to-date overview of Gambling Disorder.

### **Part 4: Pharmacologic Interventions for Addictive Disorders**

There are relatively few FDA approved medications to treat addictive disorders, and these are limited to Tobacco Use Disorder, Alcohol Use Disorder and Opioid Use Disorder. This session will detail each of these medications and those currently being investigated for use in treating these and other addictive disorders.

## **Track 2: Grant Writing and Fund Raising Survival School**

Room: Ballroom C

Speaker: Paul N. McKenzie, PhD

The fastest rate of substance misuse in the nation is not urban centers, but small rural communities. Despite the devastating impact that drugs and alcohol have on rural communities, the availability of high quality prevention, treatment, and recovery services is often sparse, many times due to inadequate funding. This workshop provides step-by-step training on how to secure funding to support services in a rural environment. This workshop was presented before at the National Rural Institute to exemplary reviews. The length, pace, content, and energy level for the workshop are appropriate for a Track presentation format.

### **Part 1: Understanding the Approach**

Introduction to the workshop structure and overview

- Grant Review exercise and discussion
- The three most important elements of a successful grant
- Why a partnership is important to grant writing and program operation
- What is the single most important thing to do to increase funding? How are grants reviewed and how to use this information to your advantage
- Review of data sources useful to your local community
- What are the essential supplies that every grant writer needs
- Assumptions underlying a grant application, and how to maximize your success
- What is your motivation for writing? What SHOULD your motivation be?

### **Part 2: Understanding Grant Applications**

Top 10 Reasons that a grant is not funded

- How to use a grant "skeleton" to guide writing and facilitate the review process.
- Avoiding dumb mistakes
- Identifying funding sources quickly

# Institute Tracks: Monday

- Building a data warehouse to use in future grants
- What types of data are useful in grants?
- A Section by Section analysis of a typical grant – what is it? How to make it better?
- Winning the battle of first impressions.
- Strong opening sentences
- How to write a clear and measurable goal/objective

### **Part 3: Understanding the Creative Edge to Securing Funds**

Understanding the Creative Edge to Securing Funds The importance of cultural competence in grant writing, partnership and program

- Demystifying program evaluation
- Budgets in grants, what to do, what never to do
- What to do when a grant is rejected?
- Letters of support that will increase the likelihood of getting funded
- The aesthetics of grants – why pretty is important
- Hate grant writing? How to raise money other ways

### **Part 4: Finishing Up and Questions**

Finishing Up and Questions The workshop changes as the classroom composition and interest varies. New exercises are added, or unique discussions conducted to accommodate to specific problems attendees describe. The workshop consists of lecture, discussion, skill practice, and review of online materials. It moves at a furious pace, with a significant amount of materials and tools provided to participants.

## **Track 3: Safety First: Proven Strategies to Prevent and Respond to Workplace Violence in Behavioral Health and Substance Use**

### **Treatment Agencies**

Room: Cedar/Maple

Speaker: Phil McCabe, CSW, CAS, DRCC

Workplace violence is an escalating concern in behavioral health and substance use treatment agencies, where staff routinely engage with individuals in acute crisis, withdrawal, or severe emotional distress. Healthcare workers face a disproportionate risk, accounting for 73% of all nonfatal workplace violence injuries, nearly six times the rate of other occupations.

This interactive, skills-based workshop prepares participants to prevent, recognize, and respond to all four OSHA-classified types of workplace violence, Type I (Criminal Intent), Type II (Client/Patient/Visitor, including former or unsatisfied clients and family members), Type III (Worker-on-Worker, including supervisors or leadership), and Type IV (Personal Relationship). The curriculum also addresses ideologically motivated terrorism, including targeted acts of violence driven by extremist beliefs that may impact healthcare, behavioral health, and community-based workplaces. Real-world case studies, including the 2025 CDC shooting, assaults in psychiatric and addiction treatment settings, and incidents of mass violence and civil unrest, illustrate how community stressors can heighten workplace risks.

Participants will analyze scenarios such as domestic violence spillover, patient dissatisfaction escalating to aggression, and staff vulnerability exacerbated by moral injury, compassion fatigue, and burnout. Evidence-based strategies include trauma- and violence-informed de-escalation techniques, rapid environmental safety assessments, and integrating personal and organizational resilience practices into prevention planning. The second part of the presentation features Stress First Aid, a peer-support and self-care model for high-stress occupations, with methods to strengthen coping skills, peer networks, and psychosocial safety climates

# Institute Tracks: Monday

that visibly prioritize worker well-being.

By session's end, participants will have practical, research-backed tools to improve workplace safety, safeguard staff and clients, and foster resilient, trauma-informed care environments—while aligning with OSHA guidance and Joint Commission violence prevention standards.

**Part 1:** The Landscape of Healthcare Violence & The Four OSHA Threat Types along with the recent emergence of Idiomatic Violence

**Part 2:** Proactive Environmental Safety & Trauma-Informed De-Escalation.

**Part 3:** Understanding Vicarious Trauma: Exploring how the psychological impact of healthcare violence can persist for months or years after an event. Defining “stress injuries” (trauma, loss, moral injury, and wear-and-tear)

**Part 4:** Implementing the Stress First Aid Model.

## Track 4: At the Point of Risk: Understanding Gambling Use Disorders

Room: Oakwood  
Speaker: Anita Pindiur

Navigating a “hidden” Disorder in a Complex Field. Gambling use disorder often hiding in plain sight. One that can develop without obvious physical signs, yet carries significant consequences for individuals, families, and entire communities. This session provides a comprehensive overview of gambling use disorder across the lifespan, with a focus on how it presents in adolescents and impacts family systems. Participants will explore the psychological, social, and environmental factors that contribute to the development of gambling use disorder, as well as the

unique challenges it poses compared to other behavioral health conditions. The course will examine how stigma, accessibility, and evolving technologies, including online betting and mobile platforms, have increased both risk and complexity in prevention and treatment efforts. A core emphasis is placed on understanding the interconnected roles of individuals, families, and communities in both the emergence and resolution of gambling-related problems. Attendees will learn to recognize early warning signs in teens and adults, understand family dynamics that may either buffer or exacerbate risk, and identify community-level strategies that support prevention and early intervention. In addition, this course provides a practical introduction to evidence-informed prevention strategies, screening tools, and treatment approaches. Participants will gain insight into how to navigate a fragmented and rapidly evolving field, including when and how to refer individuals for specialized care. By the end of the course, participants will have a clearer understanding of how to identify, address, and respond to gambling use disorder in a way that is informed, compassionate, and grounded in a systems-level perspective.

**Part 1:** Gambling Use Disorders 101; an overview of history, diagnostic criteria and identifying types of gamblers

**Part 2:** Family; across the life span of gambling from teens to older adults how gambling affects individuals.

**Part 3:** Community; how accessibility and acceptability influence gambling, gambling related harm, and measures to reduce risk and harm as a result of gambling.

**Part 4:** Prevention, Intervention and Treatment; what you can do even if gambling is not your specialty. When and how to screen, refer, and treat.

# Institute Tracks: Tuesday

**Tuesday, June 9, 2026**

## **Track 5: Substance Potpourri**

Room: Ballroom A

Speaker: Dr. Kirk Moberg

This track will review the current status of selected addictive substances.

### **Part 1: Alcohol**

The reputation of alcohol has changed over the last several years from a substance with purported health benefits if consumed in moderate quantities to one where the ideal amount consumed is none. This session will review the medical impact of alcohol.

### **Part 2: Cannabinoids**

Cannabinoids encompass a variety of compounds the use of which are governed by a complex, multi-layered system of federal and state regulations. This session will review various cannabinoid products and their medical impact.

### **Part 3: Stimulants**

Stimulant use remains popular in the United States. The combination of stimulants with opioids is a particularly toxic mixture. This session will provide an overview of the impact of stimulants. The complex biochemistry of stimulants will also be reviewed.

### **Part 4: What's the latest?**

The availability and popularity of specific substances is a moving target. This session will review current trends of a variety of substances in terms of markers such as use prevalence and overdose.

## **Track 6: The Family's Journey Through Change and Conflict**

Room: Ballroom C

Speaker: Dee Priddis, PhD

This 4-hour workshop will provide tools and knowledge, through a communication lens, to manage conflict when the family is experiencing change. The change may occur within a dysfunctional family system (e.g., addiction, alcoholism, abuse) or when a family system tries to heal. We will explore the communication studies lens of the family to understand conflict, conflict styles, stigma, and grief.

### **Part 1: Introduction to Conflict and Family Systems**

Part one will introduce participants to definitions of conflict, family, and family systems. Participants will also learn the ways in which addiction of one (or more) family members impacts the whole family, not just the individual. Participants will discuss aspects of interpersonal communication and the origin of our conflict management skills.

### **Part 2: The Role of Power in Conflict**

Interpersonal Power is defined as "the ability to influence a relational partner in any context because you control, or at least the partner perceives you control, resources that the partner needs, values, desires, or fears" (Hocker, Berry, & Wilmot, 2022). Power is unique to the specific interpersonal relationship (e.g., work, family, partner, friend), rather than an individual quality. We will address the types of power that each relationship partner brings to the relationship and the role of that power. We will also discuss power imbalance and how to even the power in the relationship during the second session of this short course.

### **Part 3: Conflict Styles: Yours and Theirs**

We will address conflict style, or patterned responses a person uses in conflict, during the third session of this short course. You will take the Thomas-Kilmann Conflict Styles self-assessment to calculate your "go to" conflict style. Together, we will discuss the benefits and drawbacks of the various conflict styles that one party may use. You will increase

# Institute Tracks: Tuesday

your toolbox of strategies when patterned conflict styles appear in your interpersonal relationships.

## **Part 4: Grief, Stigma, Social Support**

Part four will discuss the role of grief when you have a loved one with SUD. Disenfranchised grief may look different for various loved ones, as it impacts the whole family system. We will review my published research on disenfranchised grief within families. Social support is often overlooked for the family member due to the stigma associated with SUD. We will identify and discuss how we can support family members to help the family system heal.

## **Track 7: LGBTQIA+ Topics**

Room: Cedar/Maple

Speaker: Chad Curtis, Gus Raymond, Patrick Perry, Philip McCabe

For our seasoned Rural attendees, this is a radically different LGBTQ+ track than we have offered in the past. For new comers, you will get fresh information on LGBTQ+ issues from four very different nationally recognized presenters on the latest clinical updates on this special population which will prepare you for working with very specific identities. All four presenters have very unique experiences in working with this population including diverse rural areas of the country.

## **Part 1: LGBTQ2iA+ Inclusivity: From Awareness to Action - Chad Curtis, LMSW/CTS/RAE/RAC/CPRS/CHSM/SAP**

This dynamic session equips professionals with the foundational knowledge and practical tools needed to create affirming, inclusive environments for LGBTQ2iA+ individuals. Participants will learn key terminology related to gender identity and sexual orientation, explore the real-world impact of stigma, bias, and discrimination, and identify strategies for navigating respectful professional interactions. The session will also address cultural humility,

implicit bias, and the unique risks LGBTQ+ individuals face related to addiction and suicide. Attendees will leave prepared to move beyond passive support and toward actionable allyship in their workplaces and communities.

## **Part 2: Digging Deeper - Working with trans, non binary, and intersex clients - Patrick Perry, MA, LPCC**

Often in rural settings clients who are trans, Non binary and Intersex do not have access to a community that is like them. As a counselor it is imperative that we provide affirming support and inform them of supports in their community and online. Rural clients tend to have higher use of drugs and alcohol due to lack of support. Some support sources will be given in the presentation. In this presentation we will look at the unique experiences and challenges of our transgender, non-binary, and intersex clients. After completing this session participants will be able to understand what it means to be transgender, non-binary, or intersex and clinicians will understand risk factors for substance use in this population and use affirming practices in the treatment settings. We will also look at how trauma and rate of suicide impacts this population and the importance of trauma informed care.

## **Part 3: Sex, Intimacy & Recovery: Supporting LGBTQ+ Clients Through a Sex-Positive Recovery - Philip McCabe, CSW, CAS, DRCC**

This interactive one-hour workshop is designed for addiction counselors, behavioral health professionals, peer support specialists, and recovery advocates working with LGBTQ+ clients. The session explores the complex relationship between recovery, sexuality, intimacy, attraction, and relational patterns through a sex-positive, trauma-informed, and culturally responsive framework. Using the "Invisible Line" experiential activity, participants will engage in guided reflection and discussion around topics including emotional vulnerability, hookup culture, fantasy versus genuine connection, attraction patterns,

# Institute Tracks: Tuesday

shame, boundaries, and recovery-based intimacy. Special attention will be given to the unique experiences of LGBTQ+ individuals navigating recovery within environments where substance use, nightlife, sexuality, and community connection may intersect. The workshop emphasizes that sex positivity is not the absence of accountability, but the ability to discuss sexuality openly and without shame while supporting healthier, more intentional behaviors aligned with recovery goals and personal wellbeing. Participants will leave with practical tools for facilitating affirming conversations about sex, intimacy, relationships, and emotional connection in clinical and recovery settings.

## **Part 4: Ethics of Affirming Care - Gus Raymond, tLMHC, CADC, NCC**

This workshop explores the ethical dimensions of providing affirming, competent clinical care to transgender and gender expansive (TGE) clients in behavioral health settings, with particular attention to the challenges facing rural practitioners. Drawing on guidance from the ACA, NAADAC, NASW, and APA, participants will examine how core ethical principles – including confidentiality, informed consent, non-maleficence, and justice – apply specifically to TGE care, including navigating systemic and provider-level barriers that are often amplified in rural contexts. Through the application of established ethical decision-making frameworks (Corey’s Model, the CVCM, and the Counselor-Advocate-Scholar Model), participants will develop practical strategies for providing gender-affirming care that honors client autonomy, reduces gatekeeping, and addresses the unique access challenges faced by rural TGE clients seeking behavioral health services.

## **Track 8: Indigenous People Improving**

Room: Oakwood

Speaker: Dianne Sullivan

Indigenous tribes are a relatively small part of the U.S. population, but are disproportionately affected by health issues including substance use & mental health disorders. Tribes have been historically marginalized by government policy and actions. The boarding school era and removal acts of the last two centuries have left long lasting psychological scars on their communities. Often, we are treatment providers and prevention specialists as people in tribal communities to trust systems that have been historically harmful. This track will focus on helping professionals develop and use culturally competent tools and techniques to assist in the process of healing. Topics will include 12-step resistance, developing trust, alternative models of recovery, and developing a strong therapeutic alliance.

**Part 1:** Session One will briefly cover the Native experience with discussing some of the federal Indian policies used by the government over a two hundred year period. Understanding context is important in developing the alliance.

**Part 2:** Session Two will cover the impact of intergenerational and historical traumas impact on Native people. Participants can discover how our way helping may have been more harmful in working with people in different modes of prevention addiction treatment practices.

**Part 3:** Session Three we will look at how Our Culture is Our Prevention and how tribes are working across generations to incorporate traditional and cultural practices, focusing on youth to utilize tools and a way of life that has always been there. How can we as professionals demonstrate a willingness to learn how to best assist the whole family system with wellness.

**Part 4:** Session Four will focus on how Indigenous communities are reclaiming traditional lifestyles that embrace what has always existed in our community. Participants will learn and demonstrate ways they can connect with clients in respectful appropriate ways. We will talk about we as providers can establish guiding relationships with people

# Institute Tracks: Wednesday

in the community to better serve the Indigenous populations.

**Wednesday, June 10, 2026**

## **Track 9: History of the 12 Steps and Alcoholics Anonymous. One Man's Journey**

Room: Ballroom A  
Speaker: Mike Jamison

Historically rural areas have lacked access to substance abuse services. The program of Alcoholics Anonymous is the most readily available resource. Even today most of the public has little or no understanding of the 12 steps and the practice of these steps.

**Part 1:** AA's spiritual roots: Frank Buchman: Oxford Groups: Others (Roland Hazard III, Ebby Thatcher, , Carl Jung, Samuel Shoemaker ,etc., contributing toward the creation of Alcoholics Anonymous Time line(1918-1934)

**Part 2:** Bill W and Dr Bob getting sober (AA's slender threads) Years(1934- 1939)

**Part 3:** In depth explanation of steps 1-5.who originated them. what the steps mean. I will be sharing my personal experience/journey with these steps

**Part 4:** In depth explanation of steps 6-12. I will be giving examples of my experience

## **Track 10: Ethical Conflict, Moral Injury, and Value Recovery: A Pastoral Model**

Room: Cedar/Maple  
Speaker: Jeffrey Ahonen

When ethical conflicts arise, so do

psychological and spiritual distresses; long-term and acute moral distress can lead to moral injury, a unique type of trauma response. Characterized by an intense and protracted sense of guilt and shame, moral injury is linked to mental health challenges, such as post-traumatic stress disorder, as well as to substance use disorders. While moral injury among combat veterans, first responders, and therapists has received attention, the prevalence of severe moral stress and moral injury among the general population remains largely unknown. The potential impact of moral distress and moral injury among rural populations is particularly worrisome due to the socioeconomic factors that give rise to stressors; scarcity of treatment resources leaves rural persons vulnerable to the lingering effects of moral stress and moral injury also is cause for concern.

### **Part 1: Ethics, Ethical Conflict, and Moral Stress**

The goal of ethics is sometimes characterized as the Good Life (Aristotle) or the life of love toward God, neighbor, and self (Jesus). When the surrounding circumstances of life are in harmony with a person's moral and ethical frameworks, there is human flourishing in body, mind, and soul; when an ethical conflict arises, there is moral stress. In this session, we review basic ethics and ethical principles to establish a foundation for our study of the psychological and spiritual dimensions of ethical conflict and the resulting moral stress.

### **Part 2: Ethical Conflict, Moral Distress and Moral Injury**

Stress is a normal and unavoidable part of human life; distress is a trauma reaction to unhealthy stressors. The moral stress arising from ethical conflict likewise is a normal and healthy reaction; moral distress develops if the ethical conflict endures over a period of time or comes acutely in a form that shocks the conscience. Moral distress and moral injury conceptualize the adverse psychological and spiritual impacts from extreme ethical conflict,

# Institute Tracks: Wednesday

which result in protracted or intense senses of personal guilt and shame. Moral distress and moral injury are linked to mental health challenges, frequently appearing alongside post-traumatic stress disorder, as well as to substance use disorders. In this session, we summarize the research on moral distress and moral injury to provide further insight into the psychological, spiritual, and behavioral impacts of ethical conflict.

### **Part 3: Assessment of Ethical Conflict, Moral Distress, and Moral Injury**

“In order to treat, we must know.” This is a fundamental principle of medical ethics that has been attributed to Hippocrates, the founder of clinical medicine. It stands for the idea that assessment of the patient is the necessary first step in helping the patient; modern practice has added the crucial element of the patient’s context as part of an holistic approach to assessment. In this session, we examine several assessment tools that have been developed for evaluating moral distress and moral injury as presented by a particular person. The assessment results provide critical facts and vital insights to the service provider regarding the nature of the initiating and recurring ethical conflict; the scope of the moral distress or moral injury suffered, and the observable psychological, spiritual, and behavioral expressions.

### **Part 4: Ethical Conflict, Moral Injury, and Value Recovery**

Moral distress and moral injury are characterized by a prolonged and pronounced sense of guilt and shame that the sufferer has appropriated to the self. Addressing this guilt and shame is key to the resolution of the suffering in the psychological, spiritual, and behavioral dimensions. As a treatment modality targeted specifically at remedying guilt and shame, pastoral counseling ought to be considered as a component of an holistic approach to the client’s care. Through the offering of forgiveness and reconciliation,

the pastoral counselor assists the injured by affirming their ethical values, absolving their guilt and shame, and recovering their sense of moral worth. This session relates several techniques from pastoral counseling that can be helpful in prevention of moral distress, treatment of moral injury, and recovery from its adverse impacts.

## **Track 11: Overview of Trauma Informed Treatment**

Room: Ballroom C

Speaker: Desiree Grin

History of Trauma-Informed Care: 4-Track Series.

This four-track presentation series explores the evolution of trauma-informed care, tracing how our understanding of trauma has shifted from misunderstanding and stigma to compassionate, evidence-based practices that promote healing and resilience.

### **Part 1: Early Views of Trauma and Mental Health**

This session examines how trauma was understood throughout history—from ancient responses to suffering, to wartime terms like “shell shock” and “battle fatigue,” to early psychiatric approaches that often-overlooked emotional wounds.

### **Part 2: The Recognition of PTSD and Trauma Science**

Focuses on the formal recognition of Post-Traumatic Stress Disorder (PTSD), the rise of trauma research, and the groundbreaking impact of Adverse Childhood Experiences (ACEs). This track highlights how trauma affects the brain, body, and long-term health outcomes.

### **Part 3: From Awareness to Trauma-Informed Systems**

# Institute Tracks: Wednesday

Explores how healthcare, education, social services, and criminal justice systems began shifting from asking “What’s wrong with you?” to “What happened to you?” This track introduces the core principles of trauma-informed care and organizational change.

## **Part 4: Healing-Centered Practice and the Future of Care**

Examines modern approaches including resilience-building, cultural humility, community healing, and equity-centered care. Participants learn how trauma-informed leadership and healing-centered engagement create safer, stronger systems and communities.

This series equips audiences with both historical context and practical tools to better understand trauma, reduce re-traumatization, and support long-term healing.

# Special Topics

**Monday, June 8, 2026**

## **Special Topic 1: Faith, Community, and Recovery: Leveraging Spirituality in Recovery**

Room: Cedar/Maple

Speaker: Rommel Johnson, Ph.D

Faith, Community, and Recovery: Leveraging Rural Spiritual Networks for Addiction Prevention and Recovery: Faith communities often play a key role in the social and emotional lives of rural residents, shaping identity, coping mechanisms, and a sense of belonging that greatly influence addiction recovery. This presentation examines how rural spiritual networks—including churches, lay leaders, and informal faith-based support systems—can serve as powerful partners in prevention, treatment, and long-term recovery. Drawing from research, the session emphasizes how spirituality can provide meaning, resilience, and social connection, while also recognizing that religious stigma, moralizing messages, or spiritual struggles can increase shame and discourage seeking treatment. Rural communities face unique challenges in addiction care, including limited treatment resources, geographic isolation, and ongoing stigma. In this setting, faith communities often become the primary support systems. Studies show that healthy religiosity and spiritual coping are linked to lower substance use and better recovery outcomes (Kim-Spoon et al., 2018; Neff & MacMaster, 2018). Conversely, negative religious coping—such as beliefs in divine punishment or abandonment—can increase distress and hinder progress (Exline et al., 2014). This presentation will explore how addiction professionals can ethically and effectively work with faith leaders while maintaining boundaries, cultural humility, and respecting client autonomy.

## **Special Topic 2: Comprehensive Assessments**

Room: Ballroom C

Speaker: David Dawdy

Suicide risk assessment is one of the hardest parts of clinical work, especially in substance use disorder (SUD) treatment, where risk is often higher and more complicated to understand. This workshop is designed to give clinicians realistic, usable skills for talking about suicide, assessing risk, and planning next steps with the people they serve. We'll start with a clear, accessible look at current suicide data, major risk and protective factors, and common warning signs, then connect these directly to everyday SUD practice. Throughout, we'll focus on the clinician's role: managing our own emotional reactions, asking direct but respectful questions, and using language that reduces shame rather than increasing it. A recurring theme is that no one can predict suicide with certainty, but we can make thoughtful, well-documented decisions that are grounded in evidence and collaboration. Because this training is geared toward SUD professionals, we'll look closely at situations that come up often in these settings: assessing risk when someone is intoxicated or in withdrawal, recognizing high-risk moments like post-detox, early recovery, and relapse, and addressing times when substance use itself may be the primary method of self-harm. We'll also talk about how suicide risk assessment fits with relapse prevention, recovery supports, and level-of-care decisions. Participants will be introduced to tools and frameworks such as the Columbia SSRS, SAFE-T, and the Stanley-Brown Safety Plan, with an emphasis on how to use them in real conversations—not as checklists to get through, but as guides to richer assessment. The workshop will close with a practical look at documentation, legal and ethical responsibilities, HIPAA, and ways clinicians can sustain themselves while working in high-risk SUD environments.

# Special Topics

## Special Topic 3: Addiction , Recovery and Medication

Room: Oakwood

Speaker: Dr. Paul Mladnick, MS, LADC, LMFT

This session will describe the progression of addiction , factors that led to recovery and the impact of medication in my recovery . This is a personal story of addiction , recovery and the use of medication as part of recovery

## Special Topic 4: Embracing Creativity in Recovery

Room: Ballroom A

Speaker: Brenda Rausch

The recovery process is about change and connection. Art and creativity can help us access our emotions and discover new connections “through the back door,” so to speak—offering a way around the self-protective walls that are built up in active addiction. Come and learn how to incorporate creativity, in its many forms, into the healing process.

**Tuesday, June 9, 2026**

## Special Topic 5: Faith, Community, and Recovery: Leveraging Spirituality in Recovery

Room: Cedar/Maple

Speaker: Terra Cabert

This session brings a real and honest look into the experiences many women face when gambling becomes a way to cope or survive. Through lived experience and storytelling, we explore why so many women keep their gambling struggles hidden and what is

happening underneath the surface that the outside world rarely sees. The session also highlights the very real societal differences between how men and women are portrayed and what they experience when it comes to gambling and gambling recovery. Women often carry expectations around caregiving, emotional labor, and being everything to everyone. These pressures influence both how they experience gambling harm and how and where they seek. We'll also touch on the role of hormones across a woman's life, including perimenopause, postpartum changes, monthly cycles, and the impact these hormonal shifts can have on stress, impulse control, emotional regulation, and the ability to recover. This presentation is grounded in a lived experience perspective while offering insight for clinicians, peers, prevention, professionals, and advocates who want to understand what gambling harm and seeking recovery looks like behind closed doors for women.

## Special Topic 6: Becoming a Supervisor: For Counselors and Therapists

Room: Ballroom A

Speaker: Patrick Perry

Supervisors are the models that others can pattern themselves after and need to have a sense of integrity that comes with it. It is imperative that counselors and therapists who end up becoming supervisors have adequate training to do so. In several states it is required as a part of licensure to provide supervision. This course is for supervisors who are or will be providing supervision for interns, and people seeking state licensure to practice. Also, other general supervisor tasks will be discussed such as supervisee self care, working with different populations, ethical considerations, boundaries co-occurring disorders. Treatment modalities (both what the supervisee wants to use and the experience of the supervisor. Also,

# Special Topics

all are trained in CBT and supervisee's need a good working knowledge of CBT.) Diagnosing or referring for serious mental illness are important and training how to share diagnoses with clients. A supervisor needs to teach what it means to be trauma informed and how to work with clients who have trauma.

## **Special Topic 7: Crossing Generations in the Workplace: A Collaborative Learning Journey**

Room: Ballroom C

Speaker: Dee Priddis, PhD

For the first time in history, there are five generations in the workplace. From leaders with decades of insight to leaders just beginning their professional journey, everyone possesses valuable contributions to the collective wisdom of lifelong learners. We invite you to join us for this interactive session to share experiences and gain insights from different generations as we expand generational boundaries and create connections.

**Wednesday, June 10, 2026**

## **Special Topic 8: 12 Steps Beyond AA**

Room: Cedar/Maple

Speaker: Desiree Grin, PhD

Exploring 12-Step Solutions Beyond AA  
This presentation offers an informative and open discussion about 12-step recovery approaches outside of Alcoholics Anonymous. Participants will learn about alternative fellowships and support programs that use the 12-step model to address a wide range of challenges, including substance use, behavioral addictions, codependency, grief, trauma recovery, and personal growth. The session will explore the principles behind 12-step recovery, how different groups adapt these concepts to meet specific needs, and ways individuals can

find supportive recovery communities that align with their experiences and beliefs. Attendees will leave with a broader understanding of available recovery resources, practical tools for support and accountability, and encouragement for building long-term wellness and connection.

## **Special Topic 9: 12 Understanding and Working with Loss in the Context of SUD**

Room: Ballroom C

Speaker: Julie Bates-Maves

Addiction is about both presence and absence. In considering how to help people survive or end an addiction, we need to consider the whole picture of what the behaviors brought, produced, or were intended to produce (presence) and what they took away (absence). When clients move towards recovery, some begin to grieve what was lost during the addiction. But what about grieving the loss of the addiction itself? This presentation will explore such losses and offer suggestions for clinical interventions.

## **Special Topic 10: Strengthening Clinical Supervision: Strategies for Rural Success**

Room: Ballroom A

Speaker: Heather Smith

This workshop is designed to support individuals who are looking to become a clinical supervisor, for those new to providing clinical supervision, and for those looking to enhance their current skills as a clinical supervisor working in rural areas. The workshop is relative to supporting leadership development by identifying challenges related to clinical supervision within rural areas and give tools to help those individuals feel confident in doing so. This

# Special Topics

workshop aims to support workforce expansion in the substance abuse field by increasing potential interest for providers/supervisors to conduct clinical supervision for addiction professionals towards initial licensure, or ongoing supervision requirements. Information from New Hampshire's Credentialing Support Partnership will be shared to demonstrate effective innovative approaches in overcoming challenges of providing clinical supervision in rural areas.

**Thursday, June 11, 2026**

## **Special Topic 11: Responding to Co-occurring Cognitive Impairment in SUD Treatment**

Room: Ballroom A

Speaker: Thomas Beckers, BS, LADC, CBIS

Neurologic informed care involves the incorporation of neurologically-based education and training to enhance understanding of how emotional responses, cognition, and behavior are shaped by neurological processes. This presentation will explore the interconnections among alertness, attention, processing, short-term memory, and executive functioning. Additionally, it will address the impact of drugs and alcohol on cognition and discuss how to make accommodations in substance use disorder treatment. The talk will also feature experiential examples alongside practical strategies for adapting service delivery to address co-existing cognitive impairments.

## **Special Topic 12: Working with Indigenous Populations**

Room: Cedar/Maple

Speaker: Dianne Sullivan

With the highest rates of substance use

and mental disorders among races in this country. We will look at how Indigenous people were impacted throughout American history. Treatment providers can learn ways to communicate and build relationships to improve client outcomes. How can we become more effective in developing trusting relationships to promote wellness and recovery for the Native community? Participants will demonstrate hands-on skills to improve trust and be welcomed to share their experiences in working with diverse populations.

## **Special Topic 13: Rural Poverty**

Room: Ballroom C

Speaker: Sherri Downing

Rural substance use and addiction are common, but we don't always factor in the context, which can include intergenerational, crisis poverty, under- and unemployment, educational attainment, and systemic racism. This session will discuss some of the risk factors that lead to rural poverty, its culture and enduring legacy, and effective solutions. After completing this session, participants will be able to: Name at least 3 common rural strengths. Describe at least 2 hidden rules of rural poverty. Discuss ways in which generational poverty differs from situational poverty.

# Faculty Bios



## Jeffrey Ahonen

Executive Director,  
The Way to Peace

Jeffrey is an ordained minister, pastoral counselor, and ethics educator who has been a frequent presenter on ethics at The Rural during the past decade. He has taught ethics at the university level for 15 years, currently serving as an instructor of ethics at Colorado Technical University. Jeffrey

is the founder of The Just Community, a nonprofit organization dedicated to community-based ethics education. He has a multifaceted background that includes prior work as a behavioral health therapist, a substance use disorder counselor, and a litigation paralegal. Jeffrey is an advocate promoting community mental wellness, substance misuse prevention, and access to justice services.



## Rev. Joe Amico

Executive Director,  
NALGAP Board of Director

Joe Amico is an international speaker on LGBTQAI+ addiction issues, Licensed Alcohol and Drug Abuse Counselor, Certified Addictions Specialist (Alcohol, other drugs and sex addiction), and ordained United Church of Christ (UCC) clergy person. Joe is currently the President of the

National Rural Alcohol and Drug Abuse Network (<https://nradan.org/>). He is past president of SASH (Society for the Advancement of Sexual Health) and NALGAP: The Association of Lesbian, Gay, Bisexual, Transgender Addiction Professionals and Their Allies (<https://nalgap.org/>). Joe is currently the Senior Pastor of Tabernacle Congregational Church (UCC) in Salem, MA. <https://tabernaclechurch.org/>

An experienced counselor and consultant in the addiction field, Joe has served as a chaplain and director of adolescent substance use disorder programs, vice president for clinical affairs of a national mental health and addiction treatment program for LGBTQAI+ clients, clinical program director for a long term residential treatment program for men who would otherwise be homeless, and wrote the curriculum and trained the staff for the first inpatient LGBTQAI+ psych unit in New England. Joe was an editor and contributor to SAMSHA's Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual and Transgender Individuals and its subsequent curriculum for training counselors on LGBTQAI+ issues. Joe has published numerous journal articles on LGBTQAI+ substance use and sex addiction issues, conducted webinars on LGBTQAI+, and been a speaker at such notable conferences as NAADAC, Cape Cod Symposium, Journey Together Conference, and the UK/European Symposium on Addictive Disorders.

Joe is the recipient of the 2011 NALGAP Leadership Award, the 2013 SASH Merit Award, the 2016 North Shore Pride Fabulous 5 Award, and in 2024 named a Paul Harris Fellow by the Rotary Club of Salem, MA.

Joe is available to conduct workshops and staff trainings on LGBTQAI+ issues, speak at conferences, and consult with both addiction programs and churches who want to make their programs more affirmative for clients. <https://joeamico.com/>



## David Dawdy

Consultant,  
TBD Solutions

With over 30 years of experience in behavioral health, David Dawdy has led transformative initiatives across corrections, crisis stabilization, youth residential care, and community-based treatment. As the former Mental Health Director for

the Michigan Department of Corrections, he developed and managed comprehensive mental health, substance use disorder, and sexual offense treatment programs for justice-involved individuals. Now a behavioral health consultant with TBD Solutions, Mr. Dawdy collaborates with organizations to enhance service delivery, optimize systems, and implement evidence-based strategies. His expertise in program development, policy analysis, and workforce training helps agencies navigate complex challenges, improve outcomes, and drive meaningful change. Whether advising leadership teams, developing innovative care models, or providing expert training, Mr. Dawdy delivers strategic solutions tailored to each organization's needs. A dynamic speaker and trainer, he is passionate about equipping professionals, families, and communities with the tools to reduce stigma and improve care access. Through consulting, advocacy, and education, David remains committed to strengthening the behavioral health field and advancing impactful solutions.



## Sherri Downing

Principal,  
Sherri Downing Consultant

Sherri Downing, principal and owner of Sherri Downing Consulting, is nationally recognized as a thought leader for her expertise in homelessness and housing with an emphasis on these issues in frontier and rural communities. She has expertise in issues that

lead to and sustain homelessness, including poverty, domestic and sexual violence, trauma, and behavioral health disorders. Ms. Downing is a popular public speaker and an experienced coalition and capacity builder. She is knowledgeable about public housing initiatives and implementing the strategies, public policies, and practices needed to address homelessness. She currently serves as Vice Chair on her local Public Housing Authority Board of Commissioners, as Vice President and Planning Committee Chair for the National Rural Alcohol and Drug Abuse Network, Inc., and as the Scholarship Committee Chair for the Helena, Montana chapter of Soroptimist International. She is also the President-Elect for the Soroptimist International of Helena, and the incoming Chair of the Live Your Dream Award committee for Montana.

# Faculty Bios



## DeAnne Priddis

Associate Professor,  
Middle Tennessee University

DeAnne Priddis (Ph.D., University of Wisconsin-Milwaukee) has been an Associate Professor of Organizational Communication at Middle Tennessee State University since 2016. She teaches courses in Training & Development, Interviewing, Organizational Communication, and Conflict Resolution. Dr.

Priddis is also a 2006 alumna of UW Stout with an MS in Training & HR Development. Her research includes conflict in families and organizations. She has several publications on the impact of addiction on family systems. Dee has been part of the Rural family since 2012, facilitating Rural tracks since 2015, and on the NRADAN board since 2023.



## Philip McCabe

Board Certified Sexologist

Phil McCabe currently serves as the President of NALGAP: The Association of LGBTQ+ Addiction Professionals and Their Allies, and as a trainer and educator with Rutgers University, where he helps healthcare providers strengthen LGBTQ+ cultural competency, resilience, and violence prevention.

A former consultant to the Substance Abuse and Mental Health Services Administration (SAMHSA), he has contributed to national initiatives promoting recovery-oriented, LGBTQ+-affirmative approaches to care. Additionally, he serves on the Advisory Board for the National Symposia on Addiction, helping shape education, policy, and practice in the evolving field of behavioral health.



## Dr. Kirk Moberg

Clinical Professor,  
University of Illinois College of  
Medicine

Dr. Kirk Moberg has spent his entire career in the field of addiction medicine. He is a graduate of the University of Illinois College of Medicine (UICOM) and is board certified in Internal Medicine and Addiction Medicine. He treated

patients and served as medical director of three addiction treatment centers in east and west central Illinois. Although recently retired from clinical practice Dr. Moberg remains active in teaching. He is a Clinical Professor of Internal Medicine and Psychiatry at UICOM and teaches courses for a variety of other professional organizations. He loves teaching at the National Rural Institute and has been doing so for over 20 years.



## Desiree Grin

Owner,  
Muttua, Inc.

Dr. Desiree Grin is a dynamic speaker, educator, and thought-provoking leader known for her work in trauma-informed care, positive psychology, Brainspotting, and community wellness. She delivers engaging, evidence-based presentations that translate research into practical tools audiences can

apply immediately. She has worked with incarcerated individuals and those in addiction recovery, offering practical insights into trauma, resilience, and lasting behavior change. Drawing on positive psychology frameworks that strengthen well-being and resilience, and on Brainspotting a brain-body, trauma-focused modality that uses fixed eye positions to help process difficult experiences. Dr. Grin helps individuals and organizations better understand trauma, support nervous system regulation, and build healthier cultures in healthcare, education, and leadership settings. Her approach is compassionate, strengths-based, and transformative designed to inspire lasting growth, healing, and meaningful change.



## Dianne Sullivan

Lac Courte Oreilles  
Community Health Center

Dianne "Ishkodekwe" Sullivan, MA, CSAC is an enrolled member of the Lac Courte Oreille Band of Ojibwe outside of Hayward, WI. She has been in the substance use field as an outpatient counselor since 1985. Dianne currently works at the Bizhiki Wellness Center at the LCO Health Center. It has been her professional life goal to support and

guide Ojibwe people to their path of SUD recovery & wellness. In her personal life she celebrated 43 years of recovery in December. She has one son, and the four most beautiful grandchildren in the world.

# Faculty Bios



## Terra Carbert

Podcaster, Community Moderator

Terra Carbert is a person in long-term recovery from compulsive gambling. Since entering recovery in 2016, she has become passionate about amplifying the voices of people with lived experience and ensuring women are included in conversations around gambling harm, recovery, and treatment

approaches.

Terra is the creator and host of the Ambitious Addicts podcast and serves as co-administrator of Broke Girl Society, an online community of more than 3,500 women around the world who are actively in or seeking recovery from gambling harm.

She holds a Bachelor's degree in Marketing Management, has trained as a recovery coach, and serves on the Board of the Minnesota Alliance on Problem Gambling.



## Tom Beckers

Director of Residential Services, Vinland Center

Tom Beckers has been delivering substance use disorder treatment services for 24 years; 22 of those years have been with adults at Vinland Center, a 61-bed substance use disorder treatment program located in Loretto, Minnesota. His focus is on taking a neurologically

informed approach that interprets addictive behaviors as brain-based impairments that can improve. Traditional approaches to rehabilitation are helpful but also neglect working on cognitive skills, particularly from a milieu management perspective. He has provided consultation and training to organizations that provide a range of services to adults in the community. He has partnered with entities such as the University of Minnesota, Hazelden Betty Ford Center, and The Brain Injury Alliance of Minnesota, Iowa, and North Dakota. He has been sighted as a contributor to a research project that looked at the effects of mindfulness-based interventions on adults with a history of traumatic brain injuries.



## Anita Pindiur

Way Back Inn

Anita Pindiur is the Executive Director of the Way Back Inn and has been with the Way Back Inn since 2002. Anita graduated from Loyola University for her undergraduate and Benedictine University for her Masters of Science in Clinical Psychology. Anita is involved with many boards, committees and task

forces, advocating for treatment and recovery for those affected by use disorders.



## Patrick Perry

Mental Health Professional, Perry Counseling Services LLC

Patrick Perry has been a practicing mental health therapist for over 20 years, originally licensed in Tennessee, then Ohio, and based in the Twin Cities since 2011. For much of his career, Patrick has worked in chemical

dependency treatment centers and has specialized in this area through his private practice. He spent eight years with the Pride Institute and has also dedicated his practice to serving LGBTQIA+ clients.

As a self-identified transman, Patrick has practiced openly where it has been safe to do so and has been writing letters for trans-identified clients for over a decade. He has worked with both adolescent and adult populations throughout his career. Patrick incorporates clinical hypnotherapy into his practice as a tool for processing trauma, allowing clients to move forward with greater focus on other areas of their lives. Practicing clinical hypnotherapy since 2005, he uses metaphor to help clients understand complex concepts and believes that visualizing change is essential to achieving it in a lasting way.



## Mike Jamison

Retired LADC

Mike Jamison's career as a Licensed Alcohol/Drug Counselor spans over forty-five years. He is a graduate of the Hazelden Foundation Chemical Dependency Counselor Training Program.

Throughout this forty- five-year span, Mike has worked

for several managed health Care organizations in out- patient programs throughout the Twin Cities area.

He was a Counselor at The Hazelden Foundation 's extended care unit (Jellinek Hall) for four years. Most recently, Mike was the Director of non-residential services at The Retreat, Wayzata, MN. Mike draws from his extensive experience and wisdom in teaching the principles of living a Twelve Step program of recovery.

# Faculty Bios



## Dr. Paul McKenzie

Director,  
Southeast Center for Strategic  
Community Development

Dr Paul N. McKenzie is the Director of the Southeast Center for Strategic Community Development, founded to help build capacity of community and faith based organizations. He has authored over \$180 million dollars in funded grant proposals, served as

principal investigator or evaluator for over ninety federal grants, and specializes in at-risk youth, families, and evidence-based prevention programs.

He is the founder of the Institute for Adolescent Addictions, selected as a model program by the Texas Commission on Alcohol and Drug Abuse, and the Euphrasia Center, named one of fifteen most promising female offender programs in the nation by the U.S. Department of Juvenile Justice and Delinquency Prevention. Dr. McKenzie has authored two books and numerous articles in his field and in 1984, received the Outstanding Research Award from the American Association for Marriage and Family Therapy.



## Nick Pfeifer

LICSW, MLADC

Over the past 30 years, Nick Pfeifer, LICSW, MLADC, has worked across the substance use continuum of care in both clinical and administrative roles. Prior to working for NHADACA as a Clinical Supervisor, Nick was the Head of Counseling and Psychological Services at Better

Life Partners where he oversaw clinical operations throughout New England. His experience includes direct practice, overseeing clinical services and programming for settings including residential, drug court, IOP, IDCMP, and other programs. Nick is a prior member of the NH Board of Licensing for Alcohol and Other Drug Use Professionals. He currently provides clinical supervision, coaching and mentoring of new clinicians seeking LADC and MLADC licensure through the Credentialing Support Partnership at the NH Alcohol & Drug Abuse Counselors Association. Additionally, Nick is the founder/consultant of Cairn Consulting, in Loudon, NH.



## Paul Mladnick

Licensed Alcohol/Drug  
Counselor, Licensed Therapist,  
Bridges & Pathways Counseling  
Service

Licensed Therapist and Alcohol-Drug Counselor, Private Practice Bridges and Pathways Counseling Service Paul's experience in the alcohol/ drug treatment field are in both outpatient and inpatient programs. He worked

in long term care and the family program at Hazelden BettyFord. Additionally, Paul is a Board-Certified Clinical Consultant through the National Council on Problem Gambling. He is currently in private practice in Forrest Lake, MN.

Paul is one of the co-founders of the National Rural Institute and continues to serve on the NRADAN Board.



## Brenda Rausch

Board Member,  
Spiritual Program Retreat

Brenda Rausch is passionate about sharing her experience, strength, and hope with others on a recovery journey. Brenda is the author of Stepping into Trust: A Poetic Journey of Recovery. She holds a master's degree in addiction counseling from Hazelden Betty Ford

Graduate School and worked in the addiction treatment industry for 20 years in a variety of roles. She has significant knowledge and experience in 12 step programs including Alcoholics Anonymous, Alanon, Codependents Anonymous and Adult Children of Alcoholics.

For most of her career Brenda worked in the nonprofit sector. Prior to entering the treatment industry, she worked in administration for two rural nonprofit hospitals. Brenda is a current board member of Spiritual Program Retreat. (a 12-Step immersion focused on multiple weekend retreats and aftercare). Brenda and her husband Tom have three grown children and three grandchildren.

# Faculty Bios



## Gus Raymond

Speaker/Consultant - Trans & LGBTQIA2S+ Issues, NAADAC

Gus Raymond (he/him), tLMHC, CADC, NCC is a licensed mental health counselor and certified alcohol and drug counselor with nearly a decade of clinical experience in rural and underserved settings. He operates A. Raymond Consulting LLC, specializing in

ethics education and LGBTQIA2S+ affirming care for behavioral health organizations. He co-chairs the NAADAC LGBTQIA2S+ Practice Standards Committee, serves as Vice-Chair of the NBCC Foundation's Minority Fellowship Program – Addiction Counseling Advisory Council, and is president of the Iowa Association for Addiction Professionals. He holds a faculty appointment at Hazelden Betty Ford Graduate School and is a doctoral student in Sociology at the University of Iowa.



## Dee Owens

Dee S. Owens most recently worked with ASTHO, the Association of State and Territorial Health Officials, on opioid preparedness and pain-clinic closures; she previously served as Special Assistant to the Director at the Center for Behavioral Health Statistics and Quality at the Substance Abuse and Mental Health

Services Administration. During nearly 8 years at SAMHSA, she was a member of the agency Rural Task Force as well as liaison to the Office of Rural Health Policy at HRSA. Ms. Owens previously worked as the Single State Authority for substance-use services in both Oklahoma and the Marshall Islands and directed the Alcohol-Drug Information Center at Indiana University, providing prevention and education for students, faculty, and staff. She served as a Board Officer of the National Rural Alcohol and Drug Abuse Network and taught annually at the National Rural Institute on Alcohol, Drugs, and Addiction at the University of Wisconsin, Stout. Ms. Owens holds an MPA from the Indiana University School of Public and Environmental Affairs, and she is the recipient of the Secretary's Award for Meritorious Service, the Harold E. Hughes Exceptional Rural Professional award, and the Monson Bringing Excellence to Rural



## Julie Bates-Maves

Professor, Ph.D., LPC, University of Wisconsin Stout

Julie Bates-Maves, LPC, PhD is a licensed professional counselor and professor of Clinical Mental Health Counseling at the University of Wisconsin-Stout. She specializes in treating trauma, substance use disorders, and resilience-building.



## Rommel Johnson

Assistant Professor, University of Texas Rio Grande Valley

Dr. Rommel Johnson is an Assistant Professor of Rehabilitation Services and Counseling at the University of Texas Rio Grande Valley and a nationally recognized scholar and clinician in addiction counseling. He holds a Ph.D. in Counselor Education and

Supervision and is a Licensed Professional Counselor, a Certified Advanced Alcohol and Drug Addiction Counselor, a Certified Rehabilitation Counselor, and a National Certified Counselor. With more than a decade of clinical and leadership experience, Dr. Johnson has provided counseling, supervision, and program development across community and private practice settings. His research and professional work focus on substance use disorders, behavioral addictions, multicultural counseling, and the intersection of disability and recovery. Dr. Johnson has secured more than \$1 million in federal funding, published scholarly articles in peer-reviewed journals and edited volumes, and contributed to national policy efforts addressing addiction in underserved communities. He is an active member of NAADAC and has presented at national conferences on topics such as neuroplasticity, relapse prevention, and culturally responsive addiction treatment.

# Faculty Bios



## Heather Smith

Clinical Supervisor,  
New Hampshire Alcohol  
and Drug Abuse Counselors  
Association

Heather Smith, LCMHC,  
MLADC, R-DMT is a dedicated  
professional with over 15 years  
of experience in the fields of  
mental health and substance  
use treatment across a  
variety of clinical settings. She  
has held key administrative

and supervisory roles, providing expert clinical oversight and mentorship to licensure & certification candidates in NH. Heather is the founder of True Colors Counseling, PLLC, a telebehavioral health private practice established in 2020. She also serves as a clinical supervisor with the Credentialing Support Partnership at the NH Alcohol & Drug Abuse Counselors Association, offering external supervision and credentialing support. Known for her holistic and individualized approach, Heather's guidance has empowered emerging addiction professionals to confidently navigate credentialing and uphold excellence in ethical client care.



## J. Chad Curtis

We Are One Recovery

Dynamic and accomplished  
Licensed Social Worker (LMSW)  
with extensive experience in  
trauma treatment, program  
development, and leadership  
within healthcare and  
nonprofit sectors. Proven  
ability to implement evidence-  
based practices, manage  
multidisciplinary teams, and

drive organizational growth. Skilled and strong commitment to serving LGBTQ+ and socio-economically disadvantaged populations. Adept at building collaborative partnerships and fostering environments that promote recovery, empowerment, and holistic well-being.

# Who Plans The Rural

Every year, the National Rural Alcohol and Drug Abuse Network, Inc. (NRADAN) plans the National Rural Institute on Alcohol, Drugs, and Addictions.

## But who is NRADAN?

The National Rural Alcohol and Drug Abuse Network, Inc. (NRADAN) is a 501(c)(3) non-profit organization with the mission to equip providers serving rural communities affected by substance use, behavioral, and mental health conditions with the tools they need to evoke change.

The purposes of NRADAN, Inc. are:

- To provide an annual training institute and other learning opportunities.
- To provide leadership and advocacy for the solution of rural substance use, behavioral, and mental health conditions.
- To represent rural issues at the national and international levels.

## How can I get involved?

Become a member!

- Contact Paul Mladnick at
- [NRADAN.org/Contact-Us](http://NRADAN.org/Contact-Us)
- Membership Dues are \$25 for an individual or \$100 for an agency

Learn more about the Board!

- NRADAN's Board of Directors meets every year during The Rural. This year, we'll meet on Tuesday, June 9, at 7:15 a.m. in the UW-Stout Memorial Student Center's Oakwood room.
- Can't join us in person? No worries! Reach out via [NRADAN.org/contact-us](http://NRADAN.org/contact-us) and we'll get you connected.
- Or chat with any of the board members listed in the next column!

## How can I support The Rural?

Visit [NRADAN.org/Support](http://NRADAN.org/Support), or check out our booth in the exhibitor hall!

## Board of Directors

Rev. Joe Amico, M.Div, CAS, LADC-1  
Board President  
Massachusetts

Sherri Downing, BA  
Board Vice President  
Montana

Desiree Grin, PhD  
Board Secretary  
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Board Treasurer  
Tennessee

Jereme Rose, BS  
Kentucky

Paul Mladnick, LADC, LMFT  
South Carolina

Tom Farley  
Wisconsin

Christy Stuetelberg, LMHC, LAC  
South Dakota

Dani Mortenson  
Wisconsin

Paul McKenzie  
South Carolina