

## Conference Beginnings

The original seeds for the conference first held in February of 2001 lay in the early work of the individual professional groups – all co-sponsors of this weekend's conference. Some of these efforts date back to the early 1980s, and a few even earlier. The work was difficult and often unsupported by many of our own professional groups. The common denominator was the realization that our colleagues – be they nurses, physicians, pharmacists, dentists, counselors, social workers, EAP professionals or others – were as susceptible to addictive disease as the rest of the population. Contrary to wishful thinking, we had no special immunity.

We did, however, have a special public trust and particular risks as health care professionals. The need for prevention, education, early identification, intervention and treatment, and supportive recovery programs was overwhelming. Each profession responded in its own way, depending on its sense of responsibility to its own members, its resources, and its leadership. Each program struggled, persevered, and evolved over the years, and each has significant accomplishments to show for it. Some of the individuals most active in the field today were directly affected by these early efforts.

Over the years, many of us have sought advice and support from one another, and have learned from each other as we worked to develop programs responsive to the unique needs of our own groups. Collaboration on other levels was slower to evolve – perhaps a reflection of the role and boundary issues that characterize our practice environments.

A conference planning committee was established with representatives from each sponsoring organization after word was received of a grant to the KPAPN organization to put on an educational conference. These conferences would not have happened without generous grants from such organizations as the Baptist Healthcare System, the Good Samaritan Foundation, the Kentucky School on Alcohol and Drug Studies, and the Kentucky Division of Mental Health and Substance Abuse.

The work of the Planning Committee has been a unique journey. Imagine an ever-growing group of diverse healthcare professionals, sitting around a table with no designated “leader.” Decisions were reached by consensus and mutual respect. As the process continued, we felt almost like a family, and in fact we have dubbed ourselves the “All of Us” group.

We are now into our tenth annual conference, and we do intend for this to continue to be an annual event. We believe that these conferences serve as bridges to further interdisciplinary efforts. New ways to network and to promote prevention, education and recovery across disciplines are sure to emerge. We can do together what we cannot do alone. Please contribute your energy and ideas!

*The AOU Group, January 2010*

### **CAPTASA Mission Statement**

*The mission of CAPTASA – Clinical Applications of the Principles in Treatment of Addictions and Substance Abuse – is to educate and inform professionals and concerned persons about addictions, alcoholism, dependencies, and available treatment options.*