

# CONTINUING EDUCATION SESSIONS



PROVIDENCE, RI

## **Pathways to sustained recovery: Interventions and community driven approaches for long-term success**

**Continuing Education Program**

**April 3-5, 2025**

**Prvidence, RI, USA**

**The Society for Addiction Psychology, APA Division 50, is approved by the American Psychological Association to sponsor continuing education for psychologists. APA Division 50 maintains responsibility for this program and its content.**

### **How to Receive Continuing Education Credit**

To be eligible to receive Continuing Education (CE) credit for any/each eligible program—CPA events with the CE designation—you must comply with ALL of the following:

#### **Prior to CPA 2025:**

- Continuing Education will be offered for some programs/sessions at the 2025 Collaborative Perspectives on Addiction Conference (CPA2025).
- Programs or sessions that have been approved for Continuing Education credit are also indicated in the general program next to session title in this program (e.g., 1.25 CE).
- A PDF downloadable file will be placed on the website prior to the conference with the above information. There is an additional fee associated with CE processing and it is reflected in the registration form, the final program, as well as on the conference website.
- Information about CE on the conference website and final program will include a description of the educational objectives for each eligible program and the number of CE credits offered for each program/session. Where applicable, information about commercial support or potential conflict of interests will be indicated clearly.
- Register and pay for CE processing via the CPA registration form.

#### **During CPA2025:**

This year we are using the company CE-Go to aid in completion of all CE materials.

Because the CPA conference is held in person, these are steps you should take as a CE Program participant.

- To receive CE credit, you must be present for the entire duration of a program/session.
- You must have your badge scanned in and out at the start and end of each CE-approved program/session for which you would like to receive credit. A conference student volunteer will be present to scan your badge.
- To receive CE credits, you must fill out the evaluation form from CE-GO (See details under CE-Go Process Info).

### **CE-Go Process Info:**

Each professional is responsible for the individual requirements as stipulated by his/her licensing agency. Please contact your individual licensing board/regulatory agency to review continuing education requirements for licensure renewal. Please note: You must attend "live" (in real-time) for the duration of the training to earn CE credits.

After the event, you will receive access to your evaluation and continuing education certificate via a personalized "attendee dashboard" link, hosted on the CE-Go website. This link will be sent to the email account you used to register for the event.

Upon accessing the CE-Go "attendee dashboard", you will be able to:

- Complete evaluation forms for the event
- Download your continuing education certificate in a PDF format

If you have any questions or concerns regarding the CE-Go platform, please contact CE-Go at 888-498-5578 or by email at [support@ce-go.com](mailto:support@ce-go.com) Please Note: Emails for this event will come from "[support@ce-go.com](mailto:support@ce-go.com)".

Please make sure to check your spam/junk folder in case those emails get "stuck". We'd also suggest "Allowlisting" [support@ce-go.com](mailto:support@ce-go.com). This tells your email client that you know this sender and trust them, which will keep emails from this contact at the top of your inbox and out of the junk folder.

### **Other CE Questions:**

Questions regarding CE offerings should be directed to the chair of the Education and Training Committee Ellen Vaughan, Ph.D. [elvaugh@iu.edu](mailto:elvaugh@iu.edu). You can also contact Erin Deneke, Ph.D. and Jordan Davis, Ph.D., 2025 CPA Program Co-Chairs at [EDeneke@caron.org](mailto:EDeneke@caron.org) and [jordand@rand.org](mailto:jordand@rand.org). If any concerns arise during the conference about any CE activity, please read the grievance procedures that have been established by the CE committee on the last page of this CE program.

**Collaborative Perspective on Addiction 2025  
Keynote & Symposia Offering CE Credits**

**Thursday April 3, 2025**

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**Time:** Thursday April 3<sup>rd</sup> 8:00am-9:30am

**Place:** Narragansett B & C

**Title:** ADDICTION RECOVERY: FROM CULTURE TO SCIENCE (1.0 CE)

**Keynote Speaker:** John Kelly, Ph.D.

**Summary:**

Since the initial declaration of a “war on drugs” under the Nixon administration 50 years ago, much has been learned regarding the taxonomy, etiology, epidemiology, neurobiology, typology, and phenomenology of addiction that has shifted public policies and public opinion on addiction away from incarceration toward treatment and public health. More recently there has been a further focus on interventions that move beyond acute care stabilization and short-term intervention toward models of assertive clinical-community linkage and long-term recovery management that promise to enhance rates of stable remission. This talk will review these paradigmatic shifts during the past 50 years with a focus on how the concept of recovery has moved beyond its significant, but general, cultural meaning, to become a major focus in clinical science and practice.

**Learning Objectives:**

- Summarize the major clinical paradigmatic shifts occurring during the past 50 years.
- Describe the clinical course of addiction recovery and its mobilizers and mechanisms.
- Apply clinical linkages to community-based recovery support services

**Learning Level:** Advanced

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**Time:** Thursday April 3<sup>rd</sup> 9:45am-11:00am

**Place:** Narragansett B

**Title:** COMMUNITY-ENGAGED APPROACHES FOR ADDRESSING CO-OCCURRING PTSD AND SUD IN DIVERSE POPULATIONS (1.25 CE)

**Presenters:** Nicole Weiss, Ph.D. (Chair), Prachi H. Bhuptani Ph.D., Jillian R. Scheer Ph.D., & Colin T. Mahoney Ph.D.

**Summary:**

Individuals with lived experiences of trauma and substance use have historically been excluded from the research process. Community-engaged research aims to facilitate authentic, collaborative, equitable, and sustainable partnerships between academic, community, and practice partners. By meaningfully involving individuals with lived experiences in the research process, community-engaged research directly responds to community and practice needs, preferences, and priorities, resulting in culturally competent, rigorous, relevant, and beneficial interventions. This symposium brings together researchers who are using community-engaged

research approaches to develop and evaluate interventions for diverse populations of individuals with lived experiences of trauma and substance use. First, Weiss et al. will present on a partnership with a First Nations community that informed the content and structure of an alcohol intervention targeting historical trauma. Next, Bhuptani et al. will describe how information from informant and stakeholder interviews and a campus advisory board guided the development of an intervention to address alcohol use and sexual victimization among college women. Next, Scheer et al. will present on the use of exit interviews to assess LGBTQ+ people's perspectives on an expressive writing treatment for posttraumatic stress disorder and unhealthy drinking. Finally, Mahoney et al. will discuss the application of post-treatment interviews for adapting an integrated treatment for co-occurring alcohol use disorder and posttraumatic stress disorder. Our goal is to provide knowledge and tools to advance community-engaged research for co-occurring posttraumatic stress disorder and substance use disorder interventions.

**Learning Objectives:**

- Describe different approaches for community-engaged research.
- Name at least 1 benefit of partnering with community and practice partners in the development and implementation of research.
- Describe community-engaged research approaches to develop and evaluate interventions for co-occurring PTSD and SUD.

**Learning Level:** Intermediate

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**Time:** Thursday April 3<sup>rd</sup> 9:45am-11:00am

**Place:** Narragansett C

**Title:** ALCOHOL USE, RELATED BEHAVIORS, AND SUPPORT PREFERENCES IN SEXUAL AND GENDER MINORITY COMMUNITIES (1.25 CE)

**Presenters:** Hannah Cole, M.S. (Chair), LP Palazzolo, M.A., Alyssa, L. Norris. Ph.D., Autumn Rae Florimbio, Ph.D. (Discussant)

**Summary:**

A growing body of literature indicates that sexual and gender minority (SGM) populations are at increased risk for alcohol misuse and related harms. A more nuanced understanding of alcohol use behaviors and correlates may yield important insights about potential targets for intervention and pathways to reduce risk. Additionally, soliciting direct feedback, including perspectives and preferences of these communities, may enhance intervention appeal, relevance, and efficacy.

This symposium will discuss alcohol- and health-related behaviors and intervention preferences in diverse SGM samples. Dr. Autumn Rae Florimbio will serve as moderator and introduce the symposium topic and each presentation. First, Ms. LP Palazzolo will present data on the intersection between alcohol use and loss of control eating, two risky health behaviors associated with adverse physical and mental health consequences, in a sample of gender diverse adults. Ms. Hannah Cole will discuss alcohol intervention preferences of gender diverse adults elicited via a novel discrete choice methodology. Dr. Alyssa Norris will present qualitative findings on perceptions of alcohol use motivations, coping skills, and preferences for intervention support among queer young adults assigned-female-at-birth. Taken together, these presentations aim to expand our understanding of alcohol use, health behaviors, and intervention preferences among SGM populations, which may help inform culturally tailored approaches to reducing alcohol-

related harms. The session will conclude with questions and discussion moderated by Dr. Florimbio.

**Learning Objectives:**

- Describe at least two features of the relationship between loss of control eating and alcohol use in gender minority people.
- List at least two alcohol intervention and support preferences among gender minority people.
- List at least two social and coping factors that may contribute to drinking patterns in SGM people.

**Learning Level:** Introductory

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**Time:** Thursday April 3<sup>rd</sup> 9:45am-11:00am

**Place:** Blackstone

**Title: EMERGING TRENDS IN CANNABIS POLICY AND THEIR IMPACTS ON CANNABIS HARM (1.25 CE)**

**Presenters: Samuel Acuff, Ph.D. (Chair), Cassandra Boness, Ph.D., Justin Strickland, Ph.D., Nina Christie, Ph.D., Rachel Tomko, Ph.D. (Discussant)**

**Summary:**

The cannabis regulatory landscape continues to shift rapidly, with both medical and recreational cannabis now legalized in more than half of U.S. states and signals of willingness by the DEA to reschedule cannabis. Since the start of state-level initiatives to legalize cannabis three decades ago, cannabis use frequency and hospitalizations have increased; yet evidence suggests that perception of cannabis harms have decreased. A clear understanding of the effects of cannabis regulation and policy on perceptions of harm and experienced negative consequences may help guide future cannabis regulatory decisions. The current symposium presents state-of-the-science findings, using data acquired through epidemiological and experimental approaches that span the translational spectrum, to quantify and test mechanisms of perceived and experienced cannabis harm. Dr. Boness will present a meta-analysis of epidemiological prevalence of cannabis use disorder. Dr. Acuff will present vignette data examining perceptions of harm as a function of cannabis use frequency, state cannabis regulation, and person-level legalization beliefs using data collected from adults across the United States. Dr. Strickland will present data on perceived and experienced harms of cannabis drug-drug interactions with licit products (e.g., caffeine) using a human laboratory behavioral pharmacology paradigm. Finally, Dr. Christie will present an in-depth assessment of pre-post changes in cannabis and other drug use behaviors in the months preceding and immediately following recreational cannabis legalization in New Mexico. The data presented in this symposium and subsequent discussion will describe how perceptions of some cannabis harms may be sociocontextually dependent with guidance for future policy decisions described.

**Learning Objectives:**

- Describe sources of heterogeneity in cannabis use and cannabis use disorder prevalence across epidemiological surveys.

- Recognize how person- and state-level factors impact the perception cannabis-related harm.
- Explain how constituent cannabinoids of the cannabis plant interact with each other as well as with other pharmaceutical and recreationally used drugs.

**Learning Level:** Introductory

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**Time:** Thursday April 3<sup>rd</sup> 11:15am-12:30pm

**Place:** Narragansett B

**Title: INTEGRATING UNDERREPRESENTED POPULATIONS INTO SUBSTANCE USE RESEARCH: THE KEY TO INFORMED TREATMENT (1.25 CE)**

**Presenters: Maria Eugenia Contreras Perez, Ph.D. (Chair), Xiangyu Tao, Ph.D., Michelle Hospital, Ph.D., & Eric Wagner, Ph.D. (Discussant)**

**Summary:**

Underserved and underrepresented populations, such as individuals from underrepresented racial and ethnic backgrounds, often face systemic barriers, including racism and discrimination, that heighten substance use risks and limit access to effective prevention and treatment. This symposium highlights the urgent need to address these disparities through inclusive substance use research. The first presentation examines the relationship between offline and online gendered racial or ethnic discrimination and substance use as a coping mechanism among Asian, Black, and Hispanic or Latina young women. Findings reveal shared and unique challenges across these groups, emphasizing the necessity of targeted prevention strategies to address the intersectional impacts of gendered racial or ethnic discrimination. The second presentation investigates the mechanisms of behavioral change in Motivational Interviewing (MI) with emerging adults from underrepresented racial or ethnic backgrounds. By analyzing treatment outcomes and in-session language, this study highlights the need for equitable interventions that align with the developmental needs of individuals from these populations. The final presentation explores the cultural and developmental adaptation of Mindfulness-Based Interventions (MBIs) for Latine emerging adults to address heavy episodic drinking. Using a community-engaged approach, this study underscores the importance of culturally tailored strategies in reducing health disparities and promoting sustainable prevention outcomes. Together, these talks illuminate the critical role of inclusive research in developing prevention and intervention strategies that effectively address the needs of underserved and underrepresented populations, paving the way for long-term, sustainable recovery.

**Learning Objectives:**

- Analyze the impact of offline and online gendered racial or ethnic discrimination on substance use as a coping mechanism among young women of color.
- List at least one mechanism of behavioral change in motivational interviewing (MI) with emerging adults.
- Describe the process of culturally adapting mindfulness-based interventions (MBIs) for Latine emerging adults.

**Learning Level:** Introductory

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**Time:** Thursday April 3<sup>rd</sup> 11:15am-12:30pm

**Place:** Narragansett C

**Title: PERSONALIZING RECOVERY: IMPROVING SUBSTANCE USE TREATMENT WITH MACHINE LEARNING AND DIGITAL DATA (1.25 CE)**

**Presenters: Kendra Wyant, M.S. (Chair), Gaylen Fronk, M.S., Marilyn L. Piccirillo, Ph.D., Albert Burgess-Hull, Ph.D.**

**Summary:**

Substance use disorders are complex, chronic conditions that require ongoing support. The type of support needed can vary depending on the individual and the stage of their recovery. Researchers and clinicians are increasingly focusing on personalizing treatment to meet these evolving needs across the continuum of care. Personalized approaches to treatment selection and clinical decision-making aim to increase likelihood of early treatment success by using genetic, lifestyle, and environmental factors to match individuals with the most effective intervention. Ongoing monitoring with digital data and clinician follow-up may help tailor and titrate treatment in real-time, optimizing its effectiveness for each individual. Personalized risk monitoring and feedback can improve continuing care by helping patients adapt their lifestyles, behaviors, and supports to meet their changing needs. In this symposium, we highlight the breadth of personalized, adaptive approaches to treating and managing substance use disorders. Gaylen Fronk will present the clinical benefit of a model that matches individuals to their optimal smoking cessation treatment using baseline characteristics. Dr. Marilyn Piccirillo will discuss an approach for using digital phenotyping data to tailor the delivery of cognitive-behavioral skills for co-occurring anxiety and stress symptoms and problematic alcohol use. Kendra Wyant will show the feasibility of dynamically characterizing and predicting alcohol lapse risk up to two weeks into the future. Dr. Albert Burgess-Hull will demonstrate how prediction models can be successfully updated in real-time and implemented in a large outpatient treatment center for early identification of treatment outcomes in patients with opioid use disorder.

**Learning Objectives:**

- Describe the importance of personalized and adaptive substance use treatments.
- Summarize how machine learning and sensing data can be used to tailor substance use treatments to individual needs.
- Identify benefits and challenges of integrating machine learning and sensing methods in clinical practice

**Learning Level:** Intermediate

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**Time:** Thursday April 3<sup>rd</sup> 11:15am-12:30pm

**Place:** Blackstone

**Title: REAL-WORLD DIGITAL SOLUTIONS FOR SUBSTANCE USE DISORDERS: FROM PREVENTION TO RECOVERY (1.25 CE)**

**Presenters: Anne C. Fernandez, Ph.D. (Chair), Jazmin Hampton, M.D., Dr.P.H., M.P.H., Sydney D Shoemaker M.S., Lara Coughlin, Ph.D.**



**Summary:**

Digital tools that prevent, treat, and support recovery from substance use disorder (SUD) have the potential to improve SUD outcomes in our nation; however, real-world barriers such as digital inequity and lack of payer support limit the reach of these tools. This symposium features four talks on innovative digital tools that address real-world barriers to sustainable digital SUD care. Dr. Jazmin Hampton discusses the RAE cHealth digital tool, which supports peer recovery-based SUD treatment while addressing digital inequities and social determinants of health. The study demonstrates high usability and engagement despite socioeconomic barriers, highlighting its potential to enhance SUD treatment outcomes. Sydney Shoemaker, MS, presents the feasibility and predictive validity of real-time memory testing for detecting alcohol-induced blackouts among young adults. Worse memory test performance predicted heavier drinking and more severe blackouts, and most participants expressed willingness to use the memory tests to avoid blackouts. Dr. Lara Coughlin presents the Incentives2Quit program, which promotes smoking cessation among Medicaid beneficiaries, showing high engagement and cessation rates. Its iterative development included patient feedback and multi-sector partnerships to address smoking-related disparities in low-income populations with payer support. Dr. Anne Fernandez presents on digital contingency management (CM) for co-occurring alcohol and opioid use disorders, focusing on creating an implementation blueprint using state Medicaid data, clinical trial data, and input from a Medicaid advisory board. Altogether, these talks underscore the significant role of innovative accessible digital technologies in enhancing SUD recovery for diverse individuals and communities with an eye toward real-world sustainability.

**Learning Objectives:**

- Describe elements of digital tools that prevent and treat substance use disorders.
- Identify and describe at least 2 barriers that individuals with lower SES face utilizing SUD digital tools.
- Describe at least 1 strategy that improves long-term sustainability of SUD digital tools.

**Learning Level:** Intermediate

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**Time:** Thursday April 3<sup>rd</sup> 1:45pm-3:00pm

**Place:** Narragansett B

**Title:** ENGAGING THE VETERAN COMMUNITY IN DIGITAL HEALTH INTERVENTION DEVELOPMENT (1.25 CE)

**Presenters:** Noah R. Wolkowicz, PhD (Chair), Lauren DiPaolo, Ph.D., Erin D. Reilly, M.Ed., Ph.D., & Megan Kelly, Ph.D. (Discussant)

**Summary:**

Digital health interventions (DHIs; i.e., delivery of healthcare interventions or their components via digital technologies such as smartphones or internet-based platforms) represent an exciting opportunity to address common healthcare barriers in addiction treatment (e.g., care proximity and access, generalizability of treatment to patients' "real lives"). Nonetheless, such technologies are often developed in the absence of empirical support and with little input from the patients for whom they are designed. This gap is especially concerning when considering the potential benefit such tools could offer to patients from marginalized communities (e.g., patients in rural

communities, with limited provider access, or who may be skeptical of traditional medical settings following decades of prejudice) and underscores the need for thoughtful, empirically rigorous DHI development. This symposium brings together three talks on projects at various stages of DHI development (e.g., attitude assessment and design input, feasibility and acceptability testing), which employ mixed qualitative/quantitative methods to promote patient-centered design. Our research is focused within the Veterans Healthcare Administration, which is one of the largest integrated healthcare systems in the U.S. and which serves a population with relatively high prevalence of substance use disorders and exacerbating co-occurring conditions (e.g., PTSD, chronic pain). Through these talks we hope to underscore the importance of attending to equity in DHI access and development, and provide illustrations of how such research can occur in practice.

**Learning Objectives:**

- Describe how digital health interventions can support the treatment of substance use disorders.
- Explain the differences between at least 2 different approaches to digital health intervention.
- Identify at least 2 ways in which researchers/developers can promote equity in digital health intervention design.

**Learning Level:** Introductory

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**Time:** Thursday April 3<sup>rd</sup> 1:45pm-3:00pm

**Place:** Narragansett C

**Title: CANNABIS USE AND MENTAL HEALTH IN PREGNANCY: FROM ETIOLOGY TO INTERVENTION (1.25 CE)**

**Presenters: Lauren Micalizzi, Ph.D. (Chair), Lindy Howe, Ph.D., Rebecca Denson, M.A., & Cynthia Battle, Ph.D.**

**Summary:**

As cannabis continues to be marketed as a natural remedy for stress, nausea, pain, and other common pregnancy symptoms, many pregnant individuals perceive it as a safe option. Reflecting this perception, many report using cannabis to manage stress and mood, often viewing it as highly effective for symptom relief. This symposium explores the factors driving prenatal cannabis use (PCU), its complex relationship with maternal mental health, and cutting-edge approaches to intervention. The first presentation investigates lifetime trauma exposure among pregnant individuals who use cannabis, revealing alarmingly high rates of trauma, with sexual abuse being particularly common. The second presentation utilizes ecological momentary assessment to examine perceptions of cannabis use for managing affective states during pregnancy, highlighting that cannabis may serve as both positive and negative reinforcement for mood regulation. The third presentation draws on qualitative research to identify preferences for health messaging around PCU, emphasizing the need for tailored approaches that address mental health symptoms while educating about the potential risks of use. The symposium concludes with promising findings demonstrating the feasibility, acceptability, and safety of what is, to our knowledge, the first intervention designed to reduce PCU while improving perinatal mental

health. Together, these presentations illuminate the nuanced relationship between PCU and maternal mental health, offering insights into the drivers of use and avenues for intervention. By bridging research from etiology to intervention, this session aims to foster interdisciplinary collaboration and identify actionable strategies to advance research, inform policy, and enhance clinical care.

**Learning Objectives:**

- Describe potential reinforcement mechanisms and implications of prenatal cannabis use.
- Identify how to tailor cannabis use health messaging to pregnant persons.
- Name at least one evidence-based intervention approaches aimed at reducing prenatal cannabis use while addressing perinatal mental health.

**Learning Level:** Introductory

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**Time:** Thursday April 3<sup>rd</sup> 1:45pm-3:00pm

**Place:** Blackstone

**Title:** ALCOHOL-RELATED RISK FACTORS AND INTERVENTION PREFERENCES AMONG DIVERSE NON-COLLEGE EMERGING ADULTS (1.25 CE)

**Presenters:** James Murphy, Ph.D. (Chair), Rose Marie Ward, Ph.D., Avery C Buck, B.A., Jacob Tempchin, M.S., Laura Reid Marks, Ph.D. & Lara Coughlin, PhD (Discussant)

**Summary:**

Approximately 60% of emerging adults (EAs) in the US do not earn a 4-year college degree, and these individuals are at elevated risk for developmentally persistent alcohol problems and AUD. Individuals without a college degree are also more likely than college graduates to experience poverty and to identify as members of minoritized racial/ethnic groups. College student EAs have shown recent population-level reductions in drinking, which may be due in part to university-based prevention efforts over the past two decades. The efficacy of these prevention efforts is encouraging, but the disproportionate focus on college students might exacerbate existing health and economic disparities for individuals without a college degree. This symposium will describe novel approaches to understanding alcohol-related risk factors and intervention preferences among non-college emerging adults. Rose Marie Ward uses factor analysis, network analysis, and latent profile analysis to validate a widely used alcohol problem measure in a diverse, non-college EA sample with elevated alcohol risk. Avery Buck describes trajectories of alcohol-related risk, negative affective-symptoms, and substance-free reinforcement over a three-year period among diverse college and non-college EAs recruited from the community. Jacob Tempchin describes the results of a quantitative study that investigates the receptiveness of non-college EAs with elevated drinking risk to engaging with various forms of alcohol interventions. Laura Marks extends this work via a qualitative thematic analysis of alcohol intervention preferences among racially diverse non-college EAs with a history of risky drinking. Lara Coughlin will synthesize the findings and generate recommendations for future research and practice.

**Learning Objectives:**

- Summarize information about the unique risks associated with alcohol use among emerging adults without a four-year college degree.

- Identify alcohol intervention preferences among high risk emerging adults without a four-year college degree.
- Name at least two unique alcohol intervention preferences of African American emerging adults without a four-year college degree.

**Learning Level:** Intermediate

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**Time:** Thursday April 3<sup>rd</sup> 3:15pm-4:30pm

**Place:** Narragansett C

**Title: MULTILEVEL STRESSORS AS INFLUENCES OF INEQUITIES IN SUBSTANCE USE AND HARMS FOR MINORITIZED PEOPLE (1.25 CE)**

**Presenters: Sarah L. Pedersen, Ph.D., & Hayley Padovano, Ph.D. (Chairs), Robert W. S. Coulter, Ph.D., M.P.H., & Abigail Ytsel Morales, B.S.**

**Summary:**

Longstanding inequities in substance use and health outcomes are increasing for many minoritized groups. Community-engaged research examining conditions of daily life that underlie stress and resiliency is needed to identify malleable intervention targets. This interactive symposium will examine multi-level (structural, social, momentary) stressors in relation to substance use outcomes across three different minoritized groups: LGBTQ+ young adults who have experienced alcohol harms, Black young adults who use cannabis, and Latinx individuals with alcohol use disorder (AUD). Robert Coulter, an early-career scientist, will present on the co-development of a theoretical model to understand drivers of alcohol harms for LGBTQ+ through human centered design processes with community partners. Abigail Morales, a graduate student, will present on perceived stress among Hispanic/Latinx adults and non-Hispanic/Latinx adults with elevated risk for liver disease prior to and after an AUD intervention. Sarah Pedersen, a mid-career scientist, will present findings from a community-engaged study showing differences in associations between acute increases in stress and cannabis use for Black and White young adults. Attendees will also engage in a human centered design exercise to generate ideas about how stress and coping strategies increase or mitigate risk for inequities. Discussant, Hayley Treloar Padovano, will integrate the audience-generated ideas with the conclusions of the speaker's presentations to provide an experiential example of how community partnerships can deepen understanding of stress and resiliency for minoritized groups. In the wider setting of unfairness and bias, addressing inequities in substance use, intervention, and outcomes requires rethinking our research designs and prioritizing representation.

**Learning Objectives:**

- Recognize inequities in substance-use health risks for specific groups.
- Practice a human centered design process to understand social, structural, and individual determinants of health that are associated with race, ethnicity, or sexual identity.
- Generate ideas about how stress and coping strategies increase or mitigate risk for inequities in substance use, intervention, and outcomes.

**Learning Level:** Intermediate

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**Time:** Thursday April 3<sup>rd</sup> 3:15pm-4:30pm

**Place:** Blackstone

**Title: THE ROLE OF ALCOHOL, CANNABIS, AND NICOTINE CRAVING IN SUBSTANCE USE SEVERITY AND HEALTH COMORBIDITY (1.25 CE)**

**Presenters:** Tim Janssen, Ph.D. (Chair), Alexander W. Sokolovsky, Ph.D., M. A. Monnig, Ph.D., & Cara Murphy, Ph.D.

**Summary:**

We present a series of talks highlighting the complex relationships between substance craving, substance use severity, and health. Craving is a hallmark symptom of substance dependence and antecedent of substance use. Research has demonstrated that substance use contributes to the development of mental health disorders, which can reciprocally increase the substance-related risks when such craving occurs situationally. Substance use is also associated with increased risks for physical health conditions, including cardiovascular disease, liver disease, and cancer. Substance craving shares neural mechanisms linked to other mental health disorders, which are sensitive to increased stress and other environmental factors in individuals with comorbid health conditions. The role of craving in substance use has been investigated with a mix of laboratory and naturalistic research, and the present symposium synthesizes and extends these efforts. Dr. Sokolovsky will present findings regarding tobacco cue-elicited craving for cigarettes and e-cigarettes in naturalistic settings among young adult dual users. Dr. Monnig presents findings from an experimental alcohol administration study examining craving among light and heavy drinkers. Dr. Murphy will present findings pertaining to individuals with obesity who smoke cigarettes in a 2x2 (e-cigarettes vs. no e-cigarettes; abstinence-contingent incentives vs. non-contingent incentives) experimental contingency management paradigm, prospectively predicting cigarette, e-cigarette, and food craving. Dr. Janssen presents findings on between- and within-subjects-associations between lab-based and smartphone-based assessments of craving and alcohol use among those with and without ADHD. Each of these talks will explore key design considerations, including demographics, substance use characteristics, intervention targets, and comorbid health effects.

**Learning Objectives:**

- Summarize how substance craving relates to different types of substance use, from in vivo, lab-based, and treatment-based perspectives.
- Describe how the presence of physical and mental health comorbidities exacerbate the impact of craving on predicting substance use.
- Describe treatment implications and potential intervention targets related to craving, focusing on adaptive-, therapy-based, and pharmaceutical approaches.

**Learning Level:** Intermediate

**Friday April 4, 2025**

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**Time:** Friday April 4<sup>th</sup> 8:30am-9:30am

**Place:** Narragansett B & C

**Title: COMMUNITY DRIVEN PATHWAYS TO SUSTAINABLE RECOVERY FOR ALL (1.25 CE)**

**Diversity Keynote Speaker: Corrie Vilsaint, Ph.D.**

**Summary:**

A growing evidence base supports the integration of community driven services to sustain long-term recovery from substance use disorder. An urgent challenge, however, is widening health disparities. In the U.S., Black and Latinx people are about half as likely to remit compared to their White counterparts. Additionally, the rate of fatal drug poisonings has decreased among White Americans but has increased among other racial/ethnic groups. Recovery housing is an empirically supported approach that can be leveraged to engage new people onto the continuum of care and minimize racial/ethnic differences in remission. Dismantling health disparities will require confronting the historical role of medical mistrust in minoritized communities, identifying where disparities exist on the care continua, and implementing community-based structural competencies that ameliorate risk of SUD recurrence beyond current standard care practices.

**Learning Objectives:**

- Explain why improving racial literacy is essential to mitigating medical mistrust.
- Recognize where health disparities are perpetuated in the treatment of SUD.
- Utilize recovery housing as an effective community-driven intervention on the continuum of care for SUD.
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**Learning Level:** Introductory

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**Time:** Friday April 4<sup>th</sup> 9:45am-11:00am

**Place:** Blackstone

**Title: EXAMINING HOW CANNABIS USE PATTERNS INFLUENCE CO-USE OF ALCOHOL AND CANNABIS EXPERIENCES (1.25 CE)**

**Presenters: Holly Boyle, Ph.D. (Chair), Jennifer L. Shipley, Ph.D., M.P.H., Mark Prince, Ph.D., & Jeffrey Wardell, Ph.D. (Discussant)**

**Summary:**

With the rapidly changing landscape surrounding cannabis legalization, young adults are increasingly using cannabis as it becomes more accessible. Greater access and use of cannabis increases the likelihood of co-use of cannabis and alcohol. Co-use is associated with increased consequences compared to single substance use making it a public health concern. In co-use research, cannabis use is often operationalized as any use and, therefore, co-use studies often only examine characteristics of alcohol use (e.g., alcohol consumption). Yet, the frequency (e.g., number of sessions), amount (e.g., grams), form (e.g., flower vs. concentrates vs. edibles), and/or

mode of administration (e.g., smoke vs. vape) of cannabis may influence the co-use experience. This symposium will explore how patterns of cannabis use may influence co-use experiences via intensive longitudinal methods. Dr. Shipley will present a day-level study examining differences in context and patterns of cannabis use (i.e., forms, modes) on simultaneous alcohol and cannabis use days compared to cannabis-only days among college students. Dr. Boyle will present a day-level study examining whether frequency, form, and/or quantity of cannabis is different on co-use days involving high intensity drinking (8+/10+ drinks/occasions for females/males), heavy episodic drinking (4+/5+ drinks/occasions), or moderate drinking (1-3/1-4 drinks/occasion) among college students. Dr. Prince will present a daily diary study of college students examining cannabis use (e.g., frequency, order of use) during pregaming, rapid alcohol consumption before a social event. Dr. Wardell will synthesize the findings and comment on the importance of focusing on cannabis use patterns to better understand co-use behavior.

### **Learning Objectives:**

- Describe differences in alcohol and cannabis use on co-use versus single substance use (alcohol-only, cannabis-only) occasions among young adults.
- Summarize cannabis use patterns (e.g., frequency, form, mode, quantity) reported by young adults during risky drinking occasions (e.g., heavy drinking events, pregaming).
- Name at least one advantage of intensive longitudinal methods to examine co-use patterns, proximal predictors, and acute outcomes

**Learning Level:** Introductory

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**Time:** Friday April 4th 11:15am -12:30pm

**Place:** Narragansett B

**Title: EMBRACING THE COMPLEXITY: TREATMENT OF OPIOID USE DISORDER AND CONCURRENT MENTAL HEALTH DIAGNOSES (1.25 CE)**

**Presenters: R. Ross MacLean, Ph.D. (Chair/Discussant), Ian A. McNamara, M.A., Ariel Hoadley, Ph.D., M.P.H., Rachel Rosen, Ph.D., & Margaridha Ribeiro, B.A.**

### **Summary:**

With good reason, medication for opioid use disorder (MOUD) is the first line treatment for opioid use disorder (OUD). MOUD clearly reduces mortality and overdose; however, concurrent mental health diagnoses and related stigma are not typically a focus of care. Increasing our understanding of how mental health diagnoses intersect with MOUD can improve and inform MOUD outcomes. In this series of talks, we will highlight the complexity of OUD clinical care and review potential targets to enhance treatment. First, Mr. McNamara will present results from a qualitative study of individuals with OUD that emphasize the importance of and gaps in treatment adjunctive to MOUD. Dr. Hoadley will then discuss data from justice-involved adults that underscores the complexity, stigma, and decreased quality of life in those with concurrent OUD and mental health diagnoses. Next, Dr. Rosen will present a scoping review of depression and OUD in individuals engaged in buprenorphine treatment, including a reduction in depression symptoms after initiation. Finally, Ms. Ribeiro will present data on the possible role of experiential avoidance and association with anxiety and depression in individuals with OUD and chronic pain engaged in methadone treatment. Collectively, these studies will highlight the

perspectives and treatment needs of individuals with OUD to improve MOUD care while expanding treatment targets and improving care.

**Learning Objectives:**

- Identify gaps in treatment of mental health diagnoses in MOUD clinical care.
- Examine how mental health symptoms, such as depression, are influenced by MOUD clinical care.
- Recognize factors that may be associated with effective treatment of co-occurring mental health problems and opioid use disorder.

**Learning Level:** Intermediate

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**Time:** Friday April 4th 11:15am -12:30pm

**Place:** Narragansett C

**Title: PARENTING AND SUBSTANCE USE IN CULTURALLY DIVERSE SAMPLES OF ADOLESCENTS AND EMERGING ADULTS (1.25 CE)**

**Presenters: So Young Choe, Ph.D. (Chair), Lin Tran, M.A., & Julia Felton, Ph.D.,**

**Summary:**

Although the influence of parenting on substance use among adolescents and emerging adults is widely acknowledged, a nuanced understanding of which aspects of parenting predict substance abuse in these populations is lacking. In this symposium, we fill gaps in understanding the role of different facets of parenting in substance use among culturally diverse adolescents and emerging adults. The first talk tests how both facets of parental psychological control—intrusiveness and emotional manipulation—are associated with Korean middle school adolescents’ alcohol use frequency. The results show that adolescents’ beliefs about parental legitimacy, parental intervention frequency, and emotional manipulation were significantly positively associated with high alcohol use frequency, whereas adolescents’ beliefs about what they should be able to decide were not significantly associated with alcohol use. The second talk includes an Asian American emerging adult sample and tests how multidimensional structure for helicopter parenting and cultural values are associated with alcohol use. Results indicate that the three factors of helicopter parenting—parental control, perspective, and action—are significantly positively associated with alcohol use severity, yet with parental control moderating the individualism-alcohol use relation, and parental action moderating the collectivism-alcohol use relation. The third talk includes a racially diverse U.S. sample (48.5% Black/African American) of adolescents and emerging adults and shows that parent delay discounting predicted corporal punishment, which then was associated with both youth alcohol and cannabis use. Together, these talks fill gaps in parenting and substance use research and provide important information to guide developmentally and culturally sensitive interventions.

**Learning Objectives:**

- Learn how both facets of parental psychological control—intrusiveness and emotional manipulation—are associated with Korean middle school adolescents’ alcohol use frequency.
- Recognize how cultural values like individualism and collectivism interact with parenting to influence alcohol use.



- Explain at least one way delay discounting influences parenting and subsequent adolescent alcohol use.

**Learning Level:** Introductory

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**Time:** Friday April 4th 11:15am -12:30pm

**Place:** Blackstone

**Title: LEVERAGING TECHNOLOGY IN RESEARCH AND DISSEMINATION OF ADDICTION RECOVERY EVIDENCE-BASED PRACTICES (1.25 CE)**

**Presenters: Megan Kirouac, Ph.D. (Chair), Mary Beth Miller, Ph.D., Corey Roos, Ph.D., Nicholas A. Livingston, Ph.D. & Katie Witkiewitz, Ph.D. (Discussant)**

**Summary:**

Relevant to the theme of Pathways to sustained recovery: Interventions and community-driven approaches for long-term success, this symposium highlights novel uses of technology to develop and disseminate evidence-based practices into our communities. Traditional research methods have been criticized for their delayed application in the real world and for the disconnect between the laboratory-developed evidence-based protocols and the demands of unique communities; yet technology may address these concerns. In the first talk, Dr. Megan Kirouac describes a national RCT comparing mindfulness-based relapse prevention to referral to mutual support groups, both of which are delivered via telehealth nationwide. Kirouac and colleagues describe efforts to leverage targeted online advertisements to broaden recruitment both geographically and to reach underserved communities. As of this writing, this approach has yielded more than 2000 individuals for screening in just over 12 months of recruitment. In the second talk, Dr. Mary Beth Miller describes a remotely-delivered and dynamic intervention for individuals experiencing alcohol-induced blackout (N=169). Participants completed daily diaries and received event-level feedback in the form of a drinking dashboard. Third, Dr. Corey Roos will present on the development and initial testing of a smart-phone app for a mindfulness-based intervention for promoting substance use recovery. Finally, Dr. Nicholas Livingston will share findings from his use of natural language processing and machine learning in electronic health records to examine opioid use relapse among military veterans. Discussant Dr. Katie Witkiewitz will synthesize the presentations and discuss implications of these findings for leveraging technology to support long-term recovery from addictions.

**Learning Objectives:**

- Summarize considerations for leveraging technology in nationwide study recruitment.
- Describe adaptations to existing evidence-based treatments that have been used to translate traditional treatments to technology-based interventions.
- Describe at least two ways technology may be leveraged to advance the science and practice of addiction prevention and treatment.

**Learning Level:** Introductory

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**Time:** Friday April 4th 1:45pm-3:00pm

**Place:** Narragansett B

**Title: LONG ODDS AND LONG-TERM RISKS: USING LONGITUDINAL DESIGNS TO EXAMINE SPORTS BETTING BEHAVIORS AND CONSEQUENCES (1.25 CE)**

**Presenters: Scott Graupensperger, Ph.D. (Chair), Sarah E. Nelson, Ph.D., Alexander J. Connolly, M.A., Brian Calhoun, Ph.D., & Travis Sztainert, Ph.D. (Discussant)**

**Summary:**

Sports betting is a rapidly growing addictive behavior, with evidence suggesting that technology-driven structural factors make it one of the riskiest forms of gambling. Societal harms are evident, including state-level increases in bankruptcy filings post-legalization in those states, along with growing concerns about mental health and substance use in relation to sports betting. This symposium gathers sports betting experts to explore these risks using longitudinal data across three distinct designs. Dr. Sarah Nelson will present escalation trajectories in sports gamblers, based on two years of operator data from over 30,000 individuals, identifying key escalation patterns that predict both positive and adverse outcomes. Mr. Alexander Connolly will discuss a large two-year U.S. panel study (with oversampling of sports gamblers) showing an inverse relationship between positive play behavior trajectories and problem gambling symptom trajectories. Dr. Brian Calhoun will present bi-weekly assessments of young adult sports bettors over a full year, using complex longitudinal models to identify the highest-risk seasonal periods for gambling engagement and negative consequences, with implications for event-specific prevention. With these same data, Dr. Graupensperger will discuss within-person associations between sports betting and alcohol/cannabis use, showing that young adults with stronger associations between the two behaviors are at increased risk for higher AUDIT/CUDIT scores, respectively, at a 15-month follow-up.

**Learning Objectives:**

- Summarize the growing trends in sports betting, and how this may be concerning from a public health perspective.
- Recognize some of the unique risks of sports betting, relative to other more traditional gambling behaviors.
- Identify 2 specific benefits of longitudinal methods in sports betting.

**Learning Level:**

Introductory

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**Time:** Friday April 4th 1:45pm-3:00pm

**Place:** Narragansett C

**Title: REDEFINING SUCCESS IN ADDICTION RESEARCH: NON-ABSTINENT APPROACHES TO CHANGE AND RECOVERY (1.25 CE)**

**Presenters: Victoria Votaw, Ph.D. (Chair), Robyn Ellis, Ph.D., Larissa Brito, B.S., David “Ikela” I.K. Moniz-Lewis, M.S., & Katie Witkiewitz, Ph.D. (Discussant)**

**Summary:**

Definitions of success in substance use research have historically emphasized abstinence from alcohol and other substances. However, an exclusive focus on abstinence may obscure insights into benefits from reductions in substance use, overlook individual variability in recovery

pathways, and underestimate treatment effects. In addition, patients often report goals beyond abstinence, such as reducing use, improving quality of life, or meeting basic needs, underscoring the need for patient-centered outcomes inclusive of all recovery pathways. This symposium includes four studies that examined predictors of non-abstinent outcomes, identified alternative definitions of success, and explored variability in longer-term recovery. First, Dr. Robyn Ellis will present work examining prospective associations between posttraumatic stress disorder symptoms and changes in drinking risk levels over three years in a nationally-representative sample. Next, Dr. Victoria Votaw will present results from a study identifying non-abstinent indicators (opioid use days) of early response in buprenorphine treatment for opioid use disorder (OUD). Larissa Brito will discuss relationships between social support and interpersonal conflict and a patient-centered outcome, satisfaction with medications for OUD. Lastly, Ikela Moniz-Lewis will present findings on heterogeneous recovery profiles 2-3 months after outpatient substance use disorder treatment, as well as psychological and contextual factors influencing these profiles. Together, these studies capture variability in non-abstinent outcomes (e.g., reductions in use, patient satisfaction), primary substance (e.g., alcohol, opioids, polysubstance use), and recovery stage (e.g., natural recovery, early treatment, following treatment). Our discussant, Dr. Katie Witkiewitz, will lead a discussion on the clinical implications of these presentations and key future research directions.

#### **Learning Objectives:**

- Describe at least 1 alternative substance use outcome to abstinence.
- Identify at least 1 factor associated with patients' likelihood of attaining non-abstinent success.
- Recognize at least 1 psychosocial benefit associated with reductions in substance use.

**Learning Level:** Introductory

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**Time:** Friday April 4th 1:45pm-3:00pm

**Place:** Blackstone

**Title: THE INFLUENCE OF SEX AND GENDER ON CANNABIS USE AND RELATED FACTORS ACROSS THE LIFESPAN (1.25 CE)**

**Presenters: Jillian Halladay, RN, Ph.D. (Chair), André J. McDonald Ph.D., Nolan E. Ramer Ph.D., & Kathryn S. Gex Ph.D.**

#### **Summary:**

This symposium explores the influence of sex and gender on cannabis use and related factors across different developmental age periods. Through four studies, we explore sex and gender differences in cannabis use trends, motives, consequences, parental rules, and mental health related consequences from early adolescence to older adulthood. The first study utilizes a representative sample of grade 7-12 students in Ontario, Canada to investigate temporal trends in associations between cannabis use and psychological distress from 2013 and 2023. This work shows cannabis use to be significantly associated with distress, particularly among females and adolescents identifying as girls/women, and an increase in the co-occurrence of cannabis use and distress over time. The second study examines longitudinal predictors of cannabis-specific rules among parents of a nationally representative sample of US early adolescents followed from age ~10 to 13. This study finds rule-setting by mothers compared to fathers varies based on

perceived ease of access, legal status, adult use, and the gender of the child (fewer rules for boys). The third study investigates bidirectional longitudinal associations over a 2-year period between cannabis (frequency and consequences) and internalizing symptoms (depression and anxiety) among high-risk emerging adults in Canada and the US. This study identifies bidirectional relationships between cannabis consequences and internalizing symptoms, partially supporting both symptom-driven and substance-induced pathways to co-occurrence, with more pronounced effects among females. The fourth study explores cannabis use motives and their effects on use outcomes among US adults, finding most motives to be associated with consequences. This study also found motives differed by age cohort and sex/gender in use out of boredom, conformity, coping, experimenting, and social anxiety. Together, these studies highlight the need for sex and gender specific prevention, intervention, and recovery initiatives related to cannabis use and its consequences across the lifespan.

### **Learning Objectives:**

- Identify temporal population trends in cannabis use and psychological distress among adolescents from 2013 to 2023, and how trends differ based on sex and gender.
- Describe parental rule-setting related to cannabis use, and how rules differ by gender of the parent and child.
- Describe relationships between cannabis use, motives for use, and mental health among adults, and how these differ by sex and gender across the lifespan.

**Learning Level:** Introductory

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**Time:** Friday April 4th 3:15pm-4:30pm

**Place:** Narragansett B

**Title: ORDERING IN ALCOHOL AND CANNABIS CO-USE: COMPREHENSIVE EVIDENCE FROM THE LABORATORY TO THE FIELD (1.25 CE)**

**Presenters: Rachel Gunn, Ph.D. (Chair), Bradley Conner, Ph.D., Nicholas Bush, Ph.D., Eleftherios Hetelekides, M.S., Mark Prince, Ph.D. (Discussant)**

### **Summary:**

Alcohol and cannabis are among the most commonly used substances in the United States. In the wake of expanding legalization and a rise in rates of cannabis use in recent years, understanding the impact of alcohol and cannabis co-use is critical to inform treatment and policy. There is significant evidence to suggest that co-use, particularly simultaneous use (i.e., using at the same time so that the effects overlap), is associated with increased risk of consequences relative to single substance use. However, there is considerable nuance in understanding how co-use confers risk for alcohol and cannabis outcomes and competing findings in the literature. Given the complexity of cannabis use modalities and the unique pharmacology of each substance, close examination of these patterns may elucidate these competing findings and inform how co-use leads to increased substance-related harms. Specifically, preliminary evidence has suggested that order in which alcohol and cannabis are used in co-use events predicts important substance use outcomes in self-report data. In this symposium, we will take a close look at alcohol and cannabis use ordering patterns across a diversity of populations, methods, outcomes, and cannabis formulations to further uncover the impact of ordering as a critical factor to consider in studying alcohol and cannabis co-use. Presenters across career stages will share evidence from

national self-report data, laboratory alcohol and cannabis administration studies, mobile laboratories, and field-based passive data collection to provide a balance of controlled and naturalistic observations and offer a comprehensive understanding of how ordering impacts co-use outcomes.

**Learning Objectives:**

- Summarize how cannabis and alcohol use order impacts outcomes.
- Apply co-use methods to understand patterns and related outcomes.
- Utilize theory to investigate co-use across field-based and laboratory methods.

**Learning Level:** Intermediate

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**Time:** Friday April 4th 3:15pm-4:30pm

**Place:** Narragansett C

**Title: EXPLORING THE PHOENIX EXERCISE- AND ACTIVITY-BASED MUTUAL-HELP PROGRAM: MOTIVATIONS MECHANISMS (1.25 CE)**

**Presenters: David Eddie, Ph.D. (Chair), Danny Valdez, Ph.D., & Katie M. Heinrich, Ph.D.**

**Summary:**

The Phoenix is a novel and rapidly growing activity- and exercise-based mutual-help program with over 80,000 monthly active members. Like traditional mutual-help programs, The Phoenix capitalizes on the inherent value of lived experience and peer support by creating a socially dynamic recovery community. However, it is novel in that it does this through physical and social group activities like CrossFit, rock-climbing, and music offered through a national network of programs offered virtually, on-demand, or in-person, in existing community spaces. The Phoenix has no fees, and the only requirement for participation is 48 hours without the use of alcohol and non-prescription drugs. Its activities are run by volunteers, most of whom have lived experience of addiction and addiction recovery. Its novel focus on physical activity and integration of the biological with the psychosocial, has produced excitement and interest from treatment systems and numerous federal and state agencies, yet to date little formal research has been published on its potential efficacy or mechanisms of behavior change. This symposium presents findings from three studies of The Phoenix: 1) Dr. David Eddie will present findings from a NIDA-funded qualitative study exploring Phoenix members and instructors motivations for participating in The Phoenix and its perceived benefits, 2) Andrew Davis will present work from Dr. Danny Valdez using natural language processing sentiment analysis to understand the relationship between valence of Phoenix Mobile App posts and engagement, and 3) Drs. Jacquelyn Hillios and Katie Heinrich will present on two lines of research exploring psychological safety as a possible mediator of recovery outcomes in Phoenix participants, including structural equation modelling and social network analysis.

**Learning Objectives:**

- Summarize the characteristics of the Phoenix mutual-help program that are salient to members and instructors.
- Describe the relationship between Phoenix app usage and post valence.
- Describe the mediating role of psychological safety in recovery outcomes for Phoenix participants.

**Learning Level:** Introductory

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**Time:** Friday April 4th 3:15pm-4:30pm

**Place:** Blackstone

**Title: STUDYING DAILY RECOVERY: SAMPLING STRATEGIES AND PREDICTORS OF ENGAGEMENT AND WELLBEING (1.25 CE)**

**Presenters: H. H. Cleveland, Ph.D. (Chair), Wen Ren, M.S., Ethan Kile, B.S., Joseph Lancaster, M.S., & Hannah Apsley, M.S.**

**Summary:**

Getting within-person data on how individuals maintain wellbeing during recovery is challenging. This symposium presents methodological and substantive findings from paired studies of daily recovery. Each study used the Penn State WEAR-IT app to collect 10 days of end-of-day surveys about social experiences, recovery-related behaviors, daily well-being, etc. The first study recruited participants from Recovery Community Centers (RCCs). This study recruited and onboarded participants in-person within their RCCs. The second study recruited via electronic fliers sent out by recovery organizations across Pennsylvania and onboarded participants remotely. The papers presented here use these linked studies to address several methodological and substantive questions. Paper one describes differences in participant characteristics between the two samples that may be related to the different modes of sample acquisition. Paper two uses the remotely-sampled and onboarded data set to investigate the factors that predict attending an RCC within this sample. Paper three presents analyses from the in-person sampled data set to demonstrate the role of meeting attendance for daily levels of feeling invested in one's recovery. Paper four provides results on the impact of adults in recovery interacting with their children on their own levels of daily meaningfulness. Discussion will focus on the role of within-person data for understanding the dynamic processes that underlie recovery the pros and cons of different sampling methods for addressing different research questions.

**Learning Objectives:**

- Name sampling approaches for studying daily recovery.
- Describe the social identity model of recovery and recovery identity.
- Identify two aspects of parenting that were shown to be associated with a person's rating of meaningfulness for parents in early recovery.

**Learning Level:** Intermediate

**Saturday April 5, 2025**

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**Time:** Saturday April 5th 9:30am-10:45am

**Place:** Narragansett B

**Title: THE JUVENILE JUSTICE BEHAVIORAL HEALTH SERVICES CASCADE:  
FROM SCREENING TO TREATMENT ENGAGEMENT (1.25 CE)**

**Presenters: Kaitlin, Sheerin, Ph.D. (Chair), Lindsey Nichols, M.S., Charlene Collibee,  
Ph.D., Crosby Modrowski, Ph.D. & Kathleen Kemp, Ph.D. (Discussant)**

**Summary:**

Youth involved in the juvenile legal system (JLS) experience higher rates of substance use than their peers in the community (Tolou-Shams et al., 2019) and successful substance use treatment can reduce the risk of further system involvement (Brogan et al., 2015). The Juvenile Justice Behavioral Health Services Cascade (Belenko et al., 2016) describes the process youth with JLS involvement typically undergo to access needed substance use services, which can include: screening, full assessment, identification of treatment needs, referral to treatment, and, ultimately, engagement in services. The present symposium will include presentations that pertain to various points of this cascade. Our first presenter will touch upon juvenile diversion substance use screening results pre- and post-cannabis legalization; whereas, the second presenter will focus on identification of substance use needs of youth court-ordered to a forensic mental health evaluation and factors linked with subsequent referrals to treatment. The latter two presentations will focus on the role of caregivers in behavioral health services engagement. The first presentation identifies how caregivers own substance use and mental health needs impact their ability to access services for youth participating in juvenile diversion, and the second examines the role that parental monitoring plays in services use among truant youth with problematic cannabis use. Our discussant, Dr. Kathleen Kemp, who has published extensively and received federal funding in the area of substance use screening and treatment for youth with JLS involvement, will conclude with remarks on future implications for improving the Juvenile Justice Behavioral Health Services.

**Learning Objectives:**

- Summarize the points of access to treatment of the juvenile justice behavioral health services cascade.
- Recognize at least three barriers caregivers experience in trying to access services for their justice-involved child.
- Describe rates of cannabis and alcohol use among youth participating in juvenile diversion prior to and after the onset of cannabis legalization.

**Learning Level:** Introductory

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**Time:** Saturday April 5th 9:30am-10:45am

**Place:** Narragansett C

**Title: HOW INTERSECTING IDENTITIES CAN GUIDE IMPROVEMENTS OF  
SUBSTANCE USE TREATMENTS FOR SGM ADULTS (1.25 CE)**

**Presenters: Kalina Fahey, Ph.D. (Chair), Jamie E. Parnes, Ph.D., Siena Ho Shue, B.S., Sarah Ehlke, Ph.D., & Bradley Conner, Ph.D. (Discussant)**

**Summary:**

Sexual and gender minority (SGM) adults have higher rates of substance use disorder (SUD) than their non-SGM counterparts. Current SUD treatments have modest efficacy, and few adapted treatments and public health efforts exist for SGM adults, which may explain why SGM individuals seeking SUD treatment report greater barriers and lower satisfaction/rates of completion compared to their cisgender, heterosexual counterparts. SGM adults have unique experiences that heighten their risk for SUD, warranting a need for adapted treatments and public health efforts to improve outcomes and promote long-term success. Research on intersecting identities can guide improvements to SUD recovery by clarifying how SGM identity intersects with other identities (e.g., race/ethnicity, economic status) to influence substance use-related behaviors. This symposium presents findings on the role of intersecting identities for substance use in SGM adults across four talks: 1) Dr. Kalina Fahey – how intersectional identities relate to differences in health outcomes among adults who use opioids; 2) Dr. Jamie Parnes – the role of gender identity in minority stress experiences and substance use; 3) Ms. Siena Ho Shue – the role of race and sexual orientation in cannabis use 4) Dr. Sarah Ehlke – how the intersection of race/ethnicity and sexual orientation relates to alcohol-related outcomes. Dr. Brad Conner is Discussant, leveraging expertise on identity as a moderator of SUD treatment efficacy. Findings will guide SUD treatment and recovery for SGM individuals by identifying key subgroups at heightened risk for SUD, proposing specific constructs to address in treatment, and considering non-substance use outcomes that support long-term recovery.

**Learning Objectives:**

- Summarize key theories (i.e., minority stress, intersectionality) explaining the cause of health disparities among sexual, gender, and other minoritized populations
- Identify populations at greater risk of experiencing stigma, substance use, and adverse health outcomes (e.g., harms from substance use).
- Discuss clinical implications of the presented research findings that can inform and tailor treatment for sexual, gender, and other minoritized populations.

**Learning Level:** Intermediate

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**Time:** Saturday April 5th 9:30am-10:45am

**Place:** Blackstone

**Title: FOR WHOM DO BLACKOUTS OCCUR? COGNITIVE, BEHAVIORAL, AND DEMOGRAPHIC CORRELATES IN YOUNG ADULTS (1.25 CE)**

**Presenters: Megan Strowger, Ph.D. (Chair), Angelo DiBello, Ph.D., Katie Moskal, M.S., Veronica Richards, Ph.D., Mary Beth Miller, Ph.D. (Discussant)**

**Summary:**

This symposium will focus on understanding which factors increase the likelihood of alcohol-induced blackouts among young adults. Blackouts are associated with negative consequences, including a higher risk of developing alcohol use disorder. Existing alcohol interventions effectively reduce alcohol use among young adults in the short term but not the long term.



Additionally, there is still uncertainty about which demographic factors (such as sex and education status) and cognitive factors (like attitudes, norms, and motives) are associated with blackouts, as well as the effectiveness of protective behavioral strategies. Dr. Strowger's presentation will validate the cross-sectional factor structure of the Alcohol-Induced Blackout Measure-2 and assess its measurement invariance by sex among non-college-attending young adults. Dr. DiBello will then examine between- and within-person effects of descriptive drinking norms and attitudes on drinking outcomes, including blackouts, among college students over a 12-month period. Ms. Moskal will present on which drinking motives are associated with a greater likelihood of experiencing blackouts and the frequency of these events both between- and within-persons among college students six months later. Finally, Dr. Richards will investigate how engagement in serious harm reduction protective behavioral strategies affects the association between alcohol-induced blackouts and negative consequences, using data from college students wearing alcohol sensors and completing daily diaries over four weekends. Together, these presentations will highlight advancements in measurement and examine the correlates of blackouts, providing insights to inform interventions for all young people, regardless of their post-high school career paths.

**Learning Objectives:**

- Identify the at least 1 socio-cognitive factor associated with alcohol-induced blackouts.
- Describe how to measure alcohol-induced blackouts over various timeframes.
- Explain how these findings can inform interventions for alcohol-induced blackouts.

**Learning Level:** Introductory

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**Time:** Saturday April 5th 11:00am-12:15pm

**Place:** Narragansett B

**Title: COMMUNITY-BASED PARTICIPATORY RESEARCH ADVANCES SUBSTANCE USE TREATMENT FOR MINORITIZED POPULATIONS (1.25 CE)**

**Presenters: Silvi Goldstein, Ph.D. (Chair), Emma Shinagawa, M.S., Tessa Frohe, Ph.D., & Susan E. Collins, Ph.D. (Discussant)**

**Summary:**

Individuals from systematically excluded, minoritized and marginalized groups are more adversely affected by substance-related health inequities. Studies show these groups have lower access, utilization, and response to substance use treatment compared to white, men, and stably housed counterparts. Interventions that are codeveloped together with community members from minoritized and marginalized groups can help address treatment gaps, including equitable engagement and retention, experienced by these groups. Community-based participatory research (CBPR) approaches provide opportunities to advance understanding of substance use disorders, develop novel approaches, and bridge treatment gaps across diverse groups. This symposium will share how CBPR can tailor harm reduction, technological, and culturally appropriate interventions for substance use, and how CBPR approaches offer unique opportunities to develop and implement interventions for long-term success across marginalized and minoritized populations who are typically excluded from treatment/intervention development. We will share processes, data, and key lessons learned from community-based participatory research studies that provide information on how to improve substance use

treatment for marginalized & minoritized populations. First, Ms. Shinagawa will present on mixed-methods analysis of non-treatment based supports that may work beyond treatment settings to build recovery capital among American Indian people with opioid use disorder. Next, Dr. Frohe will present community-led insights on integrating digital-health technologies to enhance harm reduction services within a Housing First framework; which provides permanent, supportive housing without requiring abstinence from substances. Finally, Dr. Goldstein will present on how community-based research approaches increase efficacy of harm reduction treatment across minoritized race, ethnicity, and sex assigned at birth groups.

**Learning Objectives:**

- Describe improved treatment approaches and best practices for community-based participatory research among marginalized and minoritized populations.
- Summarize how community-based participatory research can tailor harm reduction, technological, and culturally appropriate interventions for substance use.
- Apply community-based participatory methods to inform substance use treatment.

**Learning Level:** Intermediate

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**Time:** Saturday April 5th 11:00am-12:15pm

**Place:** Narragansett C

**Title: LEVERAGING SOCIAL MEDIA TO INFORM SUBSTANCE USE INTERVENTIONS: FROM PREVENTION TO TREATMENT (1.25 CE)**

**Presenters: Elisa Trucco, Ph.D. (Chair), Julie Cristello, Ph.D., Dana M. Litt, Ph.D., Rachel R. Ouellette, Ph.D., & Alex Russell, Ph.D.**

**Summary:**

Social media use among teens and young adults is nearly ubiquitous with reports indicating that nearly 95% of youth use a social media platform (Vogels et al., 2022). Moreover, studies find that nearly half of teens stated using the internet almost constantly in 2023, which is roughly twice as high compared to the previous decade (Anderson et al., 2023). The dramatic rise in social media use among youth in the past two decades has fueled concerns about the negative impact of social media on mental health and well-being (APA, 2023). Prior work has tended to focus on depression and anxiety symptoms (Primack et al., 2021); yet emerging work also links social media usage to risk for substance use onset and problematic use (Rutherford et al., 2023). Given its continued widespread use, successfully conducting social media research could provide a unique glimpse into factors linked to substance use behaviors among today’s youth that may not be possible with more traditional methods. Moreover, understanding how to effectively leverage social media could significantly enhance screening and prevention efforts, as well as heighten the reach of resource dissemination. This symposium will feature talks adopting cutting-edge approaches (e.g., artificial intelligence) to rigorously analyze large amounts of data across multiple social media platforms (e.g., Instagram, X) as it relates to the entire substance use prevention to treatment spectrum across substances most popular among youth (i.e., e-cigarettes, alcohol). Speakers will also discuss clinical implications and recommendations for greater social media oversight and regulations to protect youth.

**Learning Objectives:**

- Identify current rates of social media usage and links to substance use onset and problematic use.
- Learn how social media engagement impacts risk for offline substance use behavior.
- Recognize how individuals use online supports as part of their recovery efforts.

**Learning Level:** Intermediate

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**Time:** Saturday April 5th 11:00am-12:15pm

**Place:** Blackstone

**Title: INNOVATIVE KNOWLEDGE MOBILIZATION EFFORTS TO MITIGATE THE OVERDOSE CRISIS (1.25 CE)**

**Presenters: Melissa Pielech, Ph.D. (Chair/Discussant), Matthew Rios, M.A.T, Jasper Yeh, B.A., & Maxwell Krieger B.S.**

**Summary:**

Knowledge mobilization (KM) efforts seek to make research knowledge and evidence-based practices accessible so that the information can be used to facilitate meaningful change, such as improving clinical care or overdose prevention. KM is more than just sharing knowledge and resources, however; KM is an intentional and iterative process that includes identifying needs and gaps in knowledge, learning from the perspectives of individuals who will receive the information, and engaging in meaningful collaboration with the intended audiences. This symposium will illustrate how and why KM is integral to addressing the overdose crisis via examples of innovative KM efforts related to reducing harms of opioid and other substance use which are targeted at diverse audiences locally and internationally (i.e. community members/organizations, treatment providers, supporters of individuals with opioid use disorder). First, Matthew Rios will present research on creating an educational resource for supporters of individuals receiving medication for opioid use disorder treatment with integrated input from community stakeholders. Second, Dr. Melissa Pielech will discuss development of provider trainings on mitigating harm and promoting safety when using opioids for pediatric pain management that was created in partnership with patients and a multidisciplinary team. Third, Jasper Yeh will present study findings from a mixed-methods analysis of opioid-related content on TikTok, highlighting potential opportunities for information dissemination via TikTok based on identified gaps in content. Fourth, Maxwell Krieger will describe the application of machine learning methods in an overdose forecasting dashboard, including how surveillance data can inform community outreach and intervention efforts.

**Learning Objectives:**

- Name at least 1 approach for developing educational resources in partnership with end users.
- Describe opioid-related content on TikTok and opportunities for disseminating opioid-related resources via social media.
- Describe how machine learning methods can be used to identify neighborhoods at risk of future overdose deaths to inform community-level overdose prevention resource distribution.

**Learning Level:** Introductory

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**Time:** Saturday April 5th 12:30pm-1:45pm

**Place:** Narragansett B

**Title: MEDICATION FOR OPIOID USE DISORDER MOBILE UNITS: STIGMA ARTIFACTS PAVING THE ROAD FOR INNOVATION? (1.25 CE)**

**Presenters: Rosemarie Martin, Ph.D. (Chair), Victor Capoccia, Ph.D., Sarah Messmer, M.D., & Noelle Martinez, M.D. M.P.H.**

**Summary:**

Mobile health units (MHU i.e., modified recreational vehicle) that provide medications to treat opioid use disorder (MOUD) like methadone and buprenorphine have the potential to enhance treatment retention and reduce mortality. Globally, the implementation of MHUs that provide lifesaving MOUD have found the model of care delivery is feasible to operate and is acceptable to patients. In the United States, MHUs are not a common delivery method for MOUD. Research suggests that provision of MOUD from an MHU is feasible, however, retention of buprenorphine can vary widely by unit and very few units provide methadone. Patient perceptions of MHUs that provide MOUD suggest that the provision of care is less stigmatizing and more flexible compared to fixed-site treatment. Therefore, this innovative delivery model presents great promise to connect patients to care that meets their needs. To better understand and optimize these interventions, it is necessary to understand the diversity of MHU models and health outcomes. We present (1) an overview of how the historical context of MHUs in the US maps onto contemporary social issues that impact the implementation of MHUs (i.e., stigma and health disparities). In addition, we present the characteristics surrounding implementation, lessons learned, and outcomes from three distinct MHUs providing MOUD in the US: (2) CODAC Behavioral Health mobile medication unit in Woonsocket, Rhode Island, (3) the Community Outreach Intervention Projects' mobile medical unit in the West Side of Chicago, (4) the Project Connection At Re-Entry van located outside of the Baltimore City Detention Center in Maryland.

**Learning Objectives:**

- Identify services provided by mobile units for opioid use disorder treatment.
- Describe how service delivery models are impacted by state and federal regulations.
- Summarize findings from mobile units that provide medications to treat opioid use disorder in the United States.

**Learning Level:** Intermediate

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**Time:** Friday April 4th 12:30pm-1:45pm

**Place:** Narragansett C

**Title: DEFINING SOLITARY DRINKING, PREDICTORS, AND RELATED CONSEQUENCES (1.25 CE)**

**Presenters: Micheal Randazza, M.S. (Chair), Scott E. King, M.A., Jack T. Waddell, Ph.D., Carillon J. Skrzynski, Ph.D. & Kasey Creswell, Ph.D. (Discussant)**

**Summary:**

Solitary drinking (i.e., the practice of drinking alone) is a high-risk practice that is associated with current and prospective increases in alcohol use and related problems. Recommendations have been made to define solitary drinking as drinking while others are not physically present (Skrzynski & Creswell, 2020), but variations are present throughout the solitary drinking literature. Internalizing symptoms predispose individuals toward solitary drinking, but this association has not been examined with-in individuals. Given the previously established long-term effects of heavy alcohol use on cognitive decline and increased prevalence of solitary drinking with age, there is a lack of research on factors connected to solitary drinking across the lifespan. The presentations in this symposium will address key gaps in the study of solitary drinking, including defining solitary drinking, predisposing factors, and consequences. First, Scott King will describe qualitative findings from an analysis of interpretations of solitary drinking, including drinker's opinions on the definition of solitary drinking. Second, Dr. Jack Waddell will present a longitudinal analysis of internalizing symptoms with-in and across-individuals and their relationship to solitary drinking. Third, Dr. Carillon Skrzynski will present an examination of solitary drinking in an older adult population and its relationship with cognitive decline. This symposium integrates multi-method research designs (e.g., survey, longitudinal, qualitative) and focuses on diverse at-risk groups (e.g., heavy drinking, symptoms of clinical syndromes, college students, older adults). Findings from these papers have implications for future research and can help guide both the identification of and intervention with individuals who engage in solitary drinking.

**Learning Objectives:**

- Describe how constituent cannabinoids of the cannabis plant interact with each other as well as with other pharmaceutical and recreationally used drugs.
- Identify the impact of solitary drinking in several domains across the lifespan.
- Recognize the utility of identifying solitary drinkers for prevention or intervention efforts.

**Learning Level:** Intermediate

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**Time:** Friday April 4th 12:30pm-1:45pm

**Place:** Blackstone

**Title: RECOVERY HOUSING: INSIGHTS FROM STAKEHOLDER-CENTERED RESEARCH (1.25 CE)**

**Presenters: Fiona Conway, Ph.D. (Chair), Jason Howell, M.B.A., P.S.S., Amy Mericle, Ph.D., Serena Rodriguez, Ph.D., & Julie McElrath, M.S.S.W. (Discussant)**

**Summary:**

Substance use disorders (SUD) are chronic conditions requiring intensive interventions, long-term care, and significant lifestyle changes. Most treatments are time-limited and do not address structural barriers to recovery. One such barrier is limited access to safe and stable housing. The Substance Abuse and Mental Health Services Administration reports that at least 1 out of 3

people entering treatment experience housing instability 30 days prior to treatment entry. Recovery housing (e.g., recovery homes, sober living homes, Oxford Houses) addresses this critical need by providing supportive living environments for people in recovery from SUDs. In substance use recovery homes, residents, managers, and providers (owners/operators) all play crucial roles in fostering a supportive and effective recovery environment. In this symposium, we are presenting the findings of four studies focused on each of these stakeholders. In the first study, we will present findings from surveys and interviews with owners/operators (n=56) regarding their business operations, financial management challenges and opportunities, and best practices. In the second study, we will examine outcomes from three cohorts (n=78) of a Recovery House Manager training program. In the third study, we will share the lessons learned from interviews (n=71) with recovery residence owners, operators, and staff about the adoption, implementation, and sustainability of policies supporting medication for opioid use disorder (MOUD) use in recovery residences. In the fourth study, we will present findings from a national survey (n=838) outlining the policies and practices of recovery residences that aim to combat fatal overdoses.

### **Learning Objectives:**

- Explain the policies and practices implemented by owners/operators and staff of recovery homes that combat fatal overdoses among their residents.
- Identify key components of successful business models for recovery home financial and operational sustainability.
- Describe best practices in the development of a recovery housing manager training program.

**Learning Level:** Introductory

# CONTINUING EDUCATION GRIEVANCE PROCEDURE

The Society of Addiction Psychology (APA Division 50) and the Collaborative Perspectives on Addiction Conference are fully committed to conducting all activities in strict conformance with the American Psychological Association's Ethical Principles of Psychologists.

The Society of Addiction Psychology (APA Division 50) and the Collaborative Perspectives on Addiction Conference will comply with all legal and ethical responsibilities to be non-discriminatory in promotional activities, program content and in the treatment of program participants.

The Education and Training Committee Chair (Ellen Vaughan, Ph.D.) in consultation with the 2025 Collaborative Perspectives on Addiction Program Co-Chairs, Erin Deneke, Ph.D. & Jordan Davis, Ph.D. will be responsible for monitoring and assessing compliance with APA standards.

While the Society of Addiction Psychology (APA Division 50) and the Collaborative Perspectives on Addiction Conference go to great lengths to assure fair treatment for all participants and attempt to anticipate problems, there will be occasional issues which come to the attention of the convention staff which require intervention and/or action on the part of the convention staff or continuing education committee.

Guidelines for handling grievances are described below:

Participants should file grievances in written form for record keeping purposes. You do not need to sign the grievance. Depending on the grievance, the following actions will be taken:

1. If your grievance concerns a speaker, the content presented by a speaker, or the style of presentation, please put your comments in written format. The Education and Training Committee Chair (Ellen Vaughan, Ph.D.) will keep your identity confidential and convey your comments to the speaker.
2. If your grievance concerns a specific CPA2025 CE program, its content, level of presentation or the facilities in which the CE offering was conducted, please submit your grievance for review by the Education and Training Committee Chairs Ellen Vaughan, Ph.D. at [elvaughan@iu.edu](mailto:elvaughan@iu.edu) and CPA2025 Program Co-Chairs Erin Deneke, Ph.D. and Jordan Davis, Ph.D. via email at [EDeneke@caron.org](mailto:EDeneke@caron.org) and [jordand@rand.org](mailto:jordand@rand.org).
3. If you request action, CPA2025 Program Co-Chairs Erin Deneke, Ph.D. and Jordan Davis, Ph.D. in consultation with the Education and Training Committee Chair Ellen Vaughan, Ph.D. will (a) attempt to remedy the situation, or (b) provide a partial or full refund of the CE fee.

If your grievance concerns the CE staff, the Education and Training Committee Chair will attempt to arbitrate.