

## **Morris People: She leads people on a path away from addiction**

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Joanne Goer is NewBridge Services' director of integrated and addiction services. (Staff photo: John Bell)

Joanne Goer has a trick she plays on herself nightly when she leaves her job as NewBridge Services' director of integrated and addiction services in Montville.

"When I leave here, when I get to the red light, I try to leave work here," said Goer, of Morris Township.

That gives her a half-mile to separate herself from the tales of mental illness and chemical addictions her clients tell; a half-mile to set aside her own efforts to plant the "hook," her way into that client's story, and perhaps, the road to recovery or stability; or to ease herself out of a co-worker's distress at a bad outcome for a client: a relapse or a suicide.

"Now that I supervise a number of staff, when there is a suicide, I have to go through it with them, too," Goer said. "They are devastated. We do a forensic review to determine what we can learn from it. If someone is intent on harming themselves, they don't tell you. In most cases, there is nothing you can do. It is the nature of this job, and if you are going to do this job, you just accept it."

That's a lot to wash away before she reaches that red light.

And sometimes the events and people do not wash away.

"Addiction is a mental illness, a relapsing disease," she said. "Some people don't make it back"

One was a young teen who used to ride his bike to her office. She said he could not get sober and would not go to the hospital. This is one client who does not go away by the time she reaches the red light.

“I still see his face,” she said.

Goer started at NewBridge 25 years ago when the agency was known as the Pequannock Area Mental Health Center.

The treatment for addicts and the mentally ill was radically different in those days, she said. In that quarter-century Goer became her agency’s addictions expert and helped create a model for integrating the treatment of addictions and mental illnesses, called co-occurrence. In the 1990s, she was one of three experts to launch a Morris County task force that educates clinicians and therapists with training to address co-occurrence. The task force now also covers Passaic County.

For those efforts Goer was named outstanding clinician for 2010 by Addiction Professional, the official publication of the Association for Addiction Professionals. She picked up her award in February at the Southeastern Conference on Alcohol and Drug Addiction in Nashville.

Goer said that the treatment field 25 years ago was dominated by professionals who were trained in “psychodynamic treatments” and focused on treating mental illness. Drug and alcohol addictions were handled separately, if at all, she said.

A problem, she said, was that the treatment community had a lot of psychologists who did not look at addictions closely. Some considered drug or alcohol addictions as a character flaw, or the person was thought to lack impulse control.

“The thought was that you couldn't do anything with ‘those people,’” she said.

“Let’s face it, people with drug and alcohol problems are not society's pets,” Goer said. “There is a stigma and only a little less so than the stigma people have about people with mental health problems. So you put those people aside. People just want them to leave.”

What changed, Goer said, was through training, clinicians began to ask the right questions. They began to look for a cluster of symptoms and the idea of treating addictions separately from mental illnesses was shelved. It became clear that a person could be an alcoholic and be mentally ill at the same time, and maybe one condition affected the other.

While it seems like a revolutionary breakthrough, Goer said it was more evolutionary, with careful review of case after case.

Once a new treatment model was devised, it was up to clinicians to find techniques that allowed them to better understand their clients.

“The initial breakthrough opened up the examination of other options,” Goer said. “We were taking the experiential parts of what clients were going through and dealing with maybe an impact that shed light on why they were drinking all the time.”

In her client work, Goer said, “if you come into treatment with me, I’ll listen very closely. I’m going to find out. That’s my hook. I need you to be connected to me. That’s what

therapy is. I listen to you to help you see what you want to do, and what you need to do to get what what you want.”

Goer said that her approach is much like Alcoholics Anonymous.

“That first step, to say ‘I’m an alcoholic,’” she said. “I can’t make someone sober. That has to be their decision. I can show a pathway.”

The reward for her, she said, is illustrated by a time she was approached by a man in a store.

“Someone hit me on the shoulder, and said, ‘You don’t remember me’ and I said, “You look familiar,”” Goer said. “Then he said, ‘You never thought I listened to anything you said. But I did and I’ve been sober for a long time.’”