

Heroes Of The Addiction Crisis: How *Dr. Jean LaCour of NET Institute Center for Addiction and Recovery Education Is Helping The Workforce To Avert The Clutches of Addiction*

As a part of my series about “Heroes Of The Addiction Crisis” I had the pleasure of interviewing International thought leader, Dr. Jean LaCour, co-founded NET Institute Center for Addiction and Recovery Education in 1996 to train professional addiction counselors and in 2014 launched a program to train and certify professional recovery coaches. Passionate about building bridges, she has led a coalition of 1,000+ people in 100+ nations, trained 1,000s of people in 35 nations and inspired change in Russia, Pakistan, Bermuda and Egypt. This fall, she and her team are introducing a new program to address Addiction in the Workforce, which has been dramatically exacerbated by the current pandemic.

<https://www.recoverycoachtraining.com/>

Thank you so much for doing this with us! Can you tell us a bit of your backstory?

My backstory : In 1989, I had recently sold my successful Montessori school and was trying to ignore my husband’s escalating drinking and clinical depression. A dear friend gave me a copy of Codependent No More and said, this is what WE are. The book nailed me. I needed help if we were going to make it. I found that help at a local treatment center that had a support group for family members even if their loved one was not in treatment. By the end of the year my husband lost his CEO job of 14 years due to his drinking and we lost our home and everything else. It took a few years to move from crises to stable recovery.

Is there a particular story or incident that inspired you to get involved in your work with Substance Misuse and Addiction?

One gloomy evening in July 1992, I arrived in Moscow, to assist a group of Russian professors for three months. Seated alone in an old taxi, I made my way across the vast grey Soviet landscape of that great city. Everywhere I looked my eyes locked onto massive public drunkenness, scenes of violence, and misery. I was struck to my core **knowing** this level of addiction was the future of my own country and those I love, if we ignored the heartbreak of addiction.

But how could one person respond to such suffering? In that moment, I made the decision, based on **my** own family’s struggles, to share everything I knew about addiction with anyone who would listen. That decision has led me to 35 nations.

In 1996, my husband and I opened a [nonprofit Institute](#) in Florida to equip everyday people with Addiction Counseling and Recovery Support skills that meet professional standards. This led me into the deserts of Egypt to establish a training program for thousands of people and today 60 NEW addiction programs treat people of all faiths across that region. The Institute has trained over 40,000 people worldwide and is part of a global addiction network in 100 nations, which I led for many years.

Can you explain what brought us to this place? Where did this epidemic come from?

Covid-19 induced stress levels are at an all-time high as more people are descending into the self-destructive world of addiction to cope with the unknown. I call it a *pandemic within the pandemic*. Overnight the US workforce has been redefined and redeployed into three main employee categories: 1) remote or working from home 2) working onsite with a reduced team and 3) essential workers such as healthcare, emergency services, food distribution, etc.

Individuals in these three major categories have been impacted in their roles, responsibilities, work product, use of technology, plus team support and dynamics within fluctuating routines, structures, and timetables.

Each one of us has different levels of resiliency, relationships, or resources to weather the intense storms and upheavals of life. It is not uncommon for someone to begin to use or increase use of substances like alcohol, marijuana, prescription medications, or engage in behaviors like overeating, online pornography, gaming, or shopping to relieve the pressures of the unknown. From experience we know these substances and actions are effective to quickly “medicate” and numb the pain.

The current ongoing anxiety is very real and growing as we worry about getting sick, wearing masks, and adapting to the ‘new normal’ of working remotely, managing home schooling for our kids, facing loss of income and loss of social contact while the media amplifies political hostilities and civil unrest.

Statistics abound about alcohol sales being 55% higher in the first weeks after Covid-19 hit, and this stat is just the tip of the iceberg. The fact that liquor stores were considered essential and therefore allowed to stay open during lock-down is a staggering commentary on our addicted society. Amid such circumstances it can be a quick progression from normal social use of these substances or behaviors to increased misuse to manage stress. This is when a person is most at risk for becoming addicted.

Can you describe how your work is making an impact battling this epidemic?

This fall my organization, NET Training Institute, is launching the International Center for Addiction and Recovery Education (I-CARE). This new program will address employee performance issues based on the concept of [Emotional Sobriety](#) and personal resilience. This approach will avert the hidden costs of employee misuse and addiction. It will be available for businesses intent on proactively addressing the needs and issues of remote workers, onsite workers, and essential workers. The Institute will train and certify workforce facilitators to

support positive change and mitigate risk and healthcare costs through nonclinical services. We are currently attracting Wellness and Human Resource Professionals, Executive and Corporate Coaches, Counselors, and others who appreciate the power of proactive, preventive measures to help colleagues, companies, and communities recognize and avert the clutches of addiction.

Wow! Without sharing real names, can you tell us a story about a particular individual who was impacted by your Workforce initiative?

Our interest in partnering with the business community began in 2008 when I was invited to a regional business networking breakfast meeting. I was told that many network members were planning to mentor or adopt a local nonprofit or social impact organization. To my surprise, the CEO of the network asked me to be the guest speaker at their next meeting. I tried to decline the invitation, assuming they would not be interested in one of my addiction lectures. I struggled with topics and settled on what has become my keynote talk called, “The Cost of Doing Business in a ‘High’ Society.” Everyone had on their public ‘game face’ and listened politely. I thought I had bombed big time with my brain scans and workplace stats, but then, one by one, people came up to shake my hand and privately tell me about their alcoholic father or daughter or their own recovery. I was floored! And the grinning CEO hugged me and booked me to speak immediately at four upcoming venues!

Can you share something about your work that makes you most proud? Is there a particular story or incident that you found most uplifting?

Besides my ongoing work in training addiction workers in developing nations, there is one incident I’d like to share with your readers from 2008. Our board hosted an open house to invite people from the business networks I mentioned earlier. We went to great effort to set up displays and photos at different places in our offices so we could tell our story and cultivate new donors.

After the short tour, we gathered everyone together for coffee and to ask for support. To our amazement people were quietly telling each other and some of our staff about their personal and family addiction problems. I quickly assessed we needed to intervene so these precious people could share and debrief years of feeling alone with their private pain. I divided them up and assigned our trained staff to facilitate each group — people raised in alcoholic homes, others struggling family members, and even a men’s group. It filled my team with gratitude and joy to see these business people who appeared so successful, responding to the safety and warm acceptance we offered. Addiction touches all of us regardless of our age, race, gender, economic, social, educational status. This is why we talk about the miracle of recovery.

Can you share three things that the community and society can do to help you address the root of this problem? Can you give some examples?

Prior to Covid-19 the major **public health** catastrophe facing the US was clearly the opioid crises.

- From 1999–2018 approximately 450,000 people died from an overdose involving any opioid, including prescription and illicit opioids.

- In 2018, 67,000 people died from a drug overdose, 70% of these people were involved with opioids. <https://www.cdc.gov/drugoverdose/epidemic/index.html>

The CDC is the US federal agency dealing with public health; its full title is the Center for Disease Control and Prevention. I am an Internationally Certified Prevention Professional (CPP) and value the principles and guidelines of the prevention profession. I began with the CDC to align our efforts to have the greatest impact.

Prevention strategies include assessing risk factors versus resilience factors in the context of an individual, a family, a neighborhood, a company, a community, etc. Our nonprofit organization has pivoted to provide targeted effective adult prevention strategies to a company or industry that complements clinical services offered through Employee Assistance Programs (EAPs).

Major prevention funding for substance misuse is dedicated to protecting our youth and college age young people or to dealing with one issue such as opioids or alcohol or tobacco. There is very little available for adult prevention, We are energized by creating a business centric program that moves beyond factual information to a deeper personal understanding of an employee's context and desire for behavior change in the midst of a 'new normal'.

That said, I encourage each person reading this to step back and think in terms of your own personal risk in how you are coping with the incredible stress of the Covid-19 pandemic.

Make two columns for risk/ resilience. Consider a few risk factors such as lack of sleep, technology issues, stressful relationships, your increased responsibility load at work and at home, how much alcohol, marijuana, are you using etc. Resilience factors may be your network of friends, your faith or spiritual roots, a few easy physical activities from walking to yoga, to pushups, etc.

Journal — Personal: Answer these three questions honestly.

- How am I doing since March 2020?
- What am I pretending NOT to know?
- What **small** change/s can I make now in my awareness or activities that will support the stability and future growth I desire in my life?

If you had the power to influence legislation, which three laws would you like to see introduced that might help you in your work?

1. Legislators at all levels must wait two years before engaging in lobbying, self-dealing, and conflicts of interest in general and specifically related to contributions from industries callously fueling addiction for profit for shareholders. Manufacturers and distributors of pharmaceuticals, alcohol, tobacco, and marijuana recklessly contribute to addiction and to the river of suffering flooding our homes, schools, social services, prisons, and healthcare.
2. By mandate and social pressure, media of all kinds, will cease to reinforce stigma and stereotypes about addicted people by dramatizing, publicizing, or finding humor in their

failures. Instead, the new media standard will present addiction as a multi-faceted brain disorder requiring medical or professional care and support like other chronic diseases such as diabetes. Media will showcase stories that reframe and portray people in recovery as survivors who have often misused substances to cope with traumatic events. Active addiction itself can be a harrowing life and death experience, but the process of recovery often results in changed lives marked by service, courage, tenacity, altruism, and humility. Note: The media does not ridicule cancer survivors, disabled people or returning military veterans. This shift in perception and media portrayal can quickly reverse stigma and shame that keeps people fearful about seeking help.

3. Drug courts, due to their successful outcomes, especially for juveniles, must be well funded and set up in multiple jurisdictions nationwide to provide a practical and cost saving diversion from prison, which is known for trauma and lifelong consequences instead of rehabilitation.

I know that this is not easy work. What keeps you going?

I am inspired by the people who find us and enroll in our training and certification programs. Currently we have online students from 28 nations in our Professional Recovery Coach program. Most have a deep desire, even a calling, to serve people and families facing addiction. They are “addiction aware” and “recovery minded”. Collectively these people are a force multiplier in treatment services and make great Workforce Recovery Champions in businesses, schools, universities, healthcare, impaired professional programs, etc.

Do you have hope that one day this leading cause of death can be defeated?

Yes. I believe people change behaviors based on self-interest, prosocial attitudes, personal values, and correct information. Think about people now using seatbelts, practicing safe sex, putting babies in car seats, ID theft practices, better food choices, recycling, reducing consumption to reduce landfills and save the planet initiatives, etc. When people get an accurate understanding about the who, what, when, and how of addiction and recovery, then our society will begin to heal in this area of senseless death.

How do you define “Leadership”? Can you explain what you mean or give an example?

There are many gifted people speaking about this topic as we move away from the traditional ‘command and control’ model. Today’s leaders need the ability to build teams, listen well, encourage/ motivate, risk being vulnerable, etc. All important.

My contribution to this conversation is about three qualities or concepts that are character based and stem from a few paragraphs penned by Stephen Covey. He observed that prior to World War II most Americans understood that success was based on integrity, honesty, making good on your commitments, hard work, sense of fairness, striving for excellence, and so on. But times have changed. Madison Avenue, marketing, and mass media, etc. have shifted our culture to accepting that the illusion of these qualities is acceptable. Social media has only intensified the pressure and demand for this type of superficiality and airbrushed identity.

My understanding of leadership has been forged in the fire of international addiction recovery initiatives that are led by men serving addicted men. These programs often operate outside of traditional government sponsored social services because prison or labor camps are the go-to solution historically.

Respect: either you have it, or you don't, or you automatically reserve it for people in your social class, profession, etc. It is deeper than nondiscrimination based on gender, race, religion, disability, etc. Either you see the person in front of you in terms of a means to an end or in terms of their inherent human dignity.

Trust me, respect is not automatic in recovery work when people you serve have lost any resemblance to their past humanity. As a woman (with long blond hair), I triggered many leaders in many different cultural contexts as a person able to provide them with something of value. I was not what they were looking for and their disrespect was triggered. But time after time, it was my respect for them and their startling efforts in saving lives with so few resources that opened the door to possibilities.

Ethics: what does this mean to you in a world that is less right/wrong and mostly gray or relative. I read a surprising article in the *Harvard Business Review* a few years ago about a business professor reaching out to their business school graduates who were in prison for white collar crimes, think Enron. Basically, most of his graduates were in two categories. Some grads said they were not intending to break the law, but everything was so grey and vague. Other individuals were incarcerated for pressing the ethical/legal limits by making short term gains demanded by shareholders versus long term best strategies for growth and public safety. These people assumed their companies could protect them in some way before reality set in.

Personal Activity: Journal honestly if you have ever used an ethical plum line in your work. Does your industry have an ethical code? Is there an ethical line you have dealt with in the past? What was the situation? Did you experience internal conflict or distressing emotions that alerted you to ethical issues? Is there a line you will not cross, what stand are you willing to take? Write out some situations related to your industry or career that may arise.

Power Differential: This is a concept clearly discussed in certain professions such as legal, medical, human experimentation, counseling/ psychology, education, etc. It simply means that by virtue of your position of expertise or authority your clients, patients, customers attribute certain power and ability to you and will trust you and your advice, your product, etc. People who come to you for your services are automatically in a top down position and they are vulnerable due to some need.

What are your “5 things I wish someone told me when I first started” and why. Please share a story or example for each.

1. Stigma and stereotypes are deadly and prevent people from seeking help for themselves or a loved one. I come from three generations of well-educated women who, unbeknownst to each of us, married *affluent* men whose drinking progressed into the depths of alcoholism with all its tragic pain and losses. I call addiction a “sickness of

silence” because it is shrouded in secrets and shame. Neither my dear grandmother nor mother ever shared their stories or struggles with me or the wisdom they gained.

2. I wish I’d understood that ‘high functioning’ alcoholics are just as addicted as people who have less control over their behavior. It was a mystery how my husband could drink so much and still be standing! But a time came when he spiraled out of control and experienced ‘rock bottom.’
3. Neuroscience has brought important knowledge to the addiction field that has removed some of the shame and fear that surrounds addiction. Just this aspect has changed the way we perceive the problems people are facing. People can Google any aspect of addiction to gain understanding and research possible options for help.
4. In the early 1990s I could never have imagined the extent of the potential risk or danger of the pharmaceutical industry aggressively marketing pain medication through the healthcare industry and the immense suffering it’s caused to individuals, families, and communities.
5. I wish I had permission in the 1990s when I began to train addiction counselors and recovery support staff to really focus my approach and content on the concept of Emotional Sobriety. Bill Wilson, the founder of Alcoholics Anonymous, used this term in a private letter to a friend concerning his hopes for the future wave of recovery efforts. I have made Emotional Sobriety my theme and core premise in training professional recovery coaches and will bring it into all of my future work.

You are a person of enormous influence. If you could inspire a movement that would bring the most amount of good to the most amount of people, what would that be? You never know what your idea can trigger. :-)

Wanted:

People who stop using plastic straws & bags to save the oceans and wildlife.

People who buy items made by indigenous people to support their rise out of poverty.

People who boycott chicken or beef products to protest cruelty to animals.

People who will spread the word that our appetites are fueling unspeakable abuse of innocent people.

Real people. I’ve met UN workgroups like the Colombian woman forced to transport drugs as a ‘mule’ for the cartels. Many are arrested and languish in jail and abused by authorities. Or the handsome young man from West Africa, coming in desperation to plead for UN help to rid his country of vicious drug traffickers who have taken over villages for drug labs for product that will be sold in Europe.

Fact: The US is approximately 4.4% of the world’s population yet we have consumed up to 66% of the world’s supply of these illicit substances: heroin, cocaine, methamphetamine, illegal marijuana, counterfeit fentanyl and prescription pills made in dirty labs.

Fact: Our personal demand to use illegal substances is not a victimless crime.

<https://trafficlawguys.com/what-is-victimless-crime/>

Fact:

- The US is a land of *Entitled Consumers with Voracious Appetites*.
- Supply and demand drive drug traffickers in Mexico to increase supply by cruel and violent means that harm and terrorize women, children, and men and keep them in poverty and servitude to Transnational Criminal Organizations (TCOs).
- TCOs also run lucrative sex trafficking routes that supply children across our border.
- A large percentage of US deaths from fentanyl poisoning or heroin overdose are caused by illegal substances that originate in Mexico or the Dominican Republic.

Can you please give us your favorite “Life Lesson Quote”? Can you share how that was relevant to you in your life? — Martin Luther King Jr.

“We adopt the means of nonviolence because our end is a community at peace with itself. We will try to persuade with our words, but if our words fail, we will try to persuade with our acts.”

- Martin Luther King Jr.

Martin Luther King Jr. came to my hometown of St. Augustine, Florida, in May 1964, the month I turned 15. King observed that St. Augustine’s (Negro community) had been made to “bear the cross,” suffering (extreme) violence and brutality that helped prompt the US Congress to pass the Civil Rights Act of 1964.

Local police did not protect the marchers from bloody attacks by segregationists and the Ku Klux Klan. One day I found myself in the center of town about 30 yards from a black man leading a group of young people peacefully trying to enter a local store with a lunch counter. It was a terrible scene with whites releasing dogs on them, shoving, and hitting some with bats. I had never witnessed such actions. Neither had I been in the presence of real courage. I was forever changed.

In 2011, I was training in Madurai, India, where Dr. King spent time in 1959 at the Gandhi Memorial Museum, which depicted the story of India’s struggle for freedom. Dr. King said this, “... nonviolent resistance is the most potent weapon available to oppressed people in their struggle for justice and human dignity. Gandhi embodied certain universal principles that are inherent in the moral structure of the universe, and these principles are as inescapable as the law of gravitation.”

Is there a person in the world, or in the US whom you would love to have a private breakfast or lunch with, and why? He or she might just see this, especially if we tag them. :-)

Janice Bryant Howroyd <https://www.actonegroup.com/about.aspx>

I believe Mrs. Howroyd would be an excellent mentor and wise guide for our nonprofit organization at this time as we launch our Addiction Awareness Workforce Solutions program.

She is the first African American woman to start and run a billion-dollar business. She's founder and CEO of ActOne Group, a global enterprise that provides employment, workforce management, and procurement solutions to a wide range of industries, Fortune 500 organizations, local and mid-market companies, and government agencies.

ActOne Group operates in 19 countries across the world and has over 17,000 clients and 2,600 employees worldwide. It is the largest privately-held, woman and minority owned workforce management company in the US.

ActOne Group provides flexible, comprehensive solutions under three distinct business verticals: [Staffing](#), [Workforce Solutions](#), and [Business Services](#).

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