

## Vignette 2: Samuél

Samuel is a 33-year-old Hispanic male who lives in Newark. When you first meet him, Samuel puts on a brash persona that melts away as he begins to feel more comfortable. The brashness appears to be a cover up for his feelings of inadequacy and loneliness. Samuel was sexually abused as a child, an experience that he kept secret from his family for fear that they couldn't "handle it". He didn't feel sufficiently supported within his family to discuss this experience of rape by an adult female, and the stigma surrounding such an experience. For years, he blamed himself for the incident; only with therapy did he start to redirect responsibility to his perpetrator. He still carries shame and embarrassment and continues to experience panic attacks and ongoing self-blame.

Samuel grew up in a home where smoking was normalized: his mother was a smoker, his dad was a smoker who quit, and his grandmother smoked and died from emphysema. Samuel has smoked cigarettes since he was a teenager, until recently he was a heavy smoker.

Samuel, started using oxycodone and valium when he was 17 years old after they were prescribed for a back injury. When the prescriptions for opioids ran out, he purchased them illegally. He eventually started adding marijuana and ecstasy to his opioid habit.

Samuel is overweight and has been for most of his life. Samuel has had difficulties with sleep much of his life and on-and-off suffers from nightmares.

At age 30, Samuel was in a car accident again injuring his back and eventually causing the development of syringomyelia. Although he is in medical care for the syringomyelia, this condition led to oxycodone use/abuse and then heroin use, as heroin is cheaper to buy on the streets than is oxycodone. He denies using heroin intravenously, stating that he takes it via intranasal only.

Samuel was imprisoned for 18 months for possession of controlled dangerous substances, specifically opioids. After his release from prison, he spent 90 days in a reentry program. He then entered an intensive outpatient drug treatment program that was supposed to last 6 months, but he dropped out after his counselor left the program to take another job.

Samuel was referred to a local mental health agency via the New Jersey Division of Mental Health and Addiction Services (DMHAS) hotline. Although he was motivated to seek treatment, this internal motivation was externally reinforced by the fact that he was still on probation and required by law to stay in treatment. Samuel completed the “traumatic assessment questionnaire for adults” and with time verbalized his childhood traumatic event exposures. With sensitive support by his therapist, Samuel has worked to see himself less through a shame-based lens using techniques like talking, journaling, and mindfulness.

Samuel has been drug-free for much of the last 6 months, with only one “dirty” urine test. He is working on cutting down his cigarette smoking. He has worked full time for over a year earning a good salary. Samuel states he is committed to getting his life back together. He feels a sense of hope for the future, that is encouraged and supported by his mental health therapist. Samuel has made an appointment with a primary care provider to address his weight issue and to discuss medication to address his cigarette smoking. In addition, Samuel and two co-workers have agreed to walk for a half hour each day during their lunch break.