In Memoriam:
A Tribute to David Powell

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David Powell, PhD, who had recently assumed the position of Assistant Clinical Professor within the Department of Psychiatry at Yale University School of Medicine, died from a fall at his home on November 1, 2013. His passing is a great loss to his family and to the addictions field that he so faithfully served for more than four decades.

David Powell was born March 22, 1945 in Queens, New York. The consummate student, David received degrees in counseling (Princeton Theological Seminary, 1970), psychology (New School for Social Research, 1972; Indiana Northern University, 1974), medical ethics (Harvard University, 2000; Yale University, 2002) and Islamic Studies (Hartford Seminary, 2003). He was a licensed alcohol and drug abuse counselor, a licensed marriage and family therapist and a diplomat in the International Academy of Behavioral Medicine.

For nearly three decades, David Powell served as the Chief Executive Officer of ETP, Inc., delivering employee assistance program services to major U.S. companies including IBM, US Tobacco, Berlin Steel, Trump, Aetna Insurance Company, Travelers Insurance Companies, and Rolls Royce. It was at ETP that David designed and administered the Clinical Preceptorship Program, a comprehensive clinical supervision system implemented worldwide by the U.S. Navy and Marine Corps. Before taking the position at Yale, he served as the President of the International Center for Health Concerns, Inc., and the Clinical Supervision Institute.

Over the course of his career, David Powell served on the editorial boards of numerous journals, served as co-editor of the Journal of Chemical Dependency Treatment, and published more than 150 articles, including regular contributions to the addiction trade journals. The latter reflected his sustained mission of elevating the quality of frontline addiction treatment. David authored ten books, including Clinical Supervision in Alcohol and Drug Abuse Counseling, which has served as the major...
text on clinical supervision since its initial publication in 1979 (with evolving new editions since). He also chaired of the expert workgroup that developed the Center for Substance Abuse Treatment’s Treatment Improvement Protocol #52, Clinical Supervision and Professional Development of the Substance Abuse Counselor (2009).

David was ever-present within the addictions field. His work addressed many frontier issues within the field, but he is unquestionably best known for his pioneering efforts to enhance the quality of clinical supervision in addiction treatment. He pushed this agenda through his numerous publications, frenetic presentation schedule and through consultations with leading addiction treatment organizations, including Betty Ford Center, Caron Foundation, Sierra Tucson, Hazelden and Phoenix House. Over the course of his career, David trained addiction professionals in all 50 states and in more than 80 countries. He was also instrumental in introducing recovery mutual aid groups to countries in which no such resources existed and in helping numerous countries develop addiction treatment and addiction counselor training programs. He served on the Board of Directors for the Asia Pacific Certification Board and the Middle East Certification Board. It was through his writings that many of us became acquainted with international addiction counselor training efforts.

David had numerous passions in his work with all of us. Beyond his work in clinical supervision, he was deeply involved in workforce development issues within the field, the integration of spirituality within addiction treatment and sorting the ambiguities within some of the field’s most complex ethical issues. He was particularly passionate about the need for the field to develop future leaders. As he said in a recent interview, “Old-timers like me need to take folks under our wings and mentor them over the next five years. The key step is being able to be replaceable, to train somebody to do what you can do. Another concern is that we are losing our history. The people that got us to where we are, the shoulders on which we now stand, we not only don’t know who they are, but we don’t seem to care. That is unfortunate. A generation of leaders is ready to turn over the mantle of leadership. The question is who’s going to accept that mantel.”

For years, David and I communicated on issues of import to the field we both loved, but the pace of those communications had quickened in the months before his death. We both were acutely aware that we were in the twilight of our careers and spoke often about how the work we had begun could be best carried forward. That preoccupation with legacy and the future of the field led both of us to capture more of our work in writing and to invest more time in mentoring younger leaders within the field. David and I had just finished two small but, in retrospect, very important projects. The first was an interview with David—a career retrospective—and the second was assembling and editing several papers David had written on his international work. (Both are available for download at www.williamwhitepapers.com.)

Two days before he died, David and I exchanged a series of emails reflecting on the growth of luxurious addiction treatment for the “1%ers” (the very rich and famous) and what this meant for those being treated in such environments and what it meant for our field. We both knew at this point in our lives that time was a most precious and ephemeral gift, but we continued to share numerous plans of the work we still hoped to complete. And most calls ended with us reflecting on the good fortune bestowed upon us via the love of our respective wives and children and what full lives we had been blessed to live.

As I think about David’s influence on the field and on me, my thoughts always come back to his unwavering focus on the person/family seeking or in recovery. As he said in a recent interview, “That’s the issue [recovery]: it is not about any of us. It is to keep our eye on the prize, which is what
drove most of us into this field in the first place. And that prize is the person who’s in recovery and seeing them grow.” When I think of David, I am aware just how few people have so fully integrated such a piercing mind and a compassionate heart. His intellectual brilliance and unrelenting service activities masked a side of David few of us saw: his love of music and railroad models and his joy at playing the White Rabbit at the New York World’s Fair. David Powell offered us his brilliance and unquenchable energy, but also his humility and his friendship. The field misses his presence dearly, as do I. His passing provides an opportunity for personal and collective recommitment to the recovery vision that drove David’s decades of service and innumerable contributions.